

Non-coding RNAs in melanoma: Biological functions and potential clinical applications

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Malignant melanoma (MM) is a malignant tumor that originates from melanocytes and has a high mortality rate. Therefore, early diagnosis and treatment are very important for survival. So far, the exact molecular mechanism leading to the occurrence of melanoma, especially the molecular metastatic mechanism, remains largely unknown. Non-coding RNAs (ncRNAs), such as microRNAs (miRNAs), long non-coding RNAs (lncRNAs), and circular RNA (circRNAs), have been investigated and found to play vital roles in regulating tumor occurrence and development, including melanoma. In this review, we summarize the progress of recent research on the effects of ncRNAs on melanoma and attempt to elucidate the role of ncRNAs as molecular markers or potential targets that will provide promising application perspectives on melanoma.

INTRODUCTION

Melanoma is the most aggressive and lethal type of skin cancer. It originates from melanocytes and has a poor prognosis.^{1,2} According to clinical factors and molecular characteristics, melanoma can be divided into four subtypes: cutaneous melanoma with chronic sun damage, cutaneous melanoma without chronic sun damage, acral melanoma, and mucosal melanoma.^{3,4} In white people, the main subtypes of melanoma are non-acral cutaneous melanomas, and the prevalence of acral melanomas and mucosal melanomas is only about 5% and 1%, respectively.^{5,6} In the Asian population, the main subtypes of melanoma are acral melanoma and mucosal melanoma, which account for more than 70% of the melanoma in this population.⁷

Recent statistics show that the incidence of melanoma is increasing at an annual rate of 5%.⁸ Although it accounts for less than 10% of skin malignancies, the mortality rate is as high as 80%.⁹ The main reasons for the high mortality rate are that melanoma has a high degree of malignancy, rapid progress, and the existing treatments are not ideal. Patients can have local lymph node and distant organ metastases at an early stage. There are various ways to diagnose and treat melanoma clinically. At present, the most effective treatment is early diagnosis, enlarged resection, and lymph node dissection.¹⁰ Because a significant number of patients have metastasized when they are diagnosed, the prognosis is poor and the 5-year survival rate is less than 20%.⁸ In recent years, however, with

the clinical application of targeted therapy and immunotherapy, some patients have benefited greatly, especially from targeted therapies such as BRAF (B-Raf proto-oncogene, serine/threonine kinase; vemurafenib) and mitogen-activated protein kinase kinase (MEK) (trametinib) inhibitors.^{11–13} However, due to subtype bias, more than 50% of Asian patients are unable to benefit from targeted therapy of BRAF and c-Kit; because the tumor gene mutation load in this population is low, the overall mutation frequencies of BRAF and c-Kit are about 25.5% and 10.8%, respectively.^{14,15} In addition, recent clinical studies have shown that immunotherapy with anti-cytotoxic T lymphocyte-associated protein 4 (CTLA4) or anti-programmed cell death 1 (PD1) antibodies provides promising clinical benefits for some melanoma patients, but drug resistance remains.^{16–18} Therefore, it is vital to find new melanoma-specific markers and anti-tumor drug targets in the field of melanoma research.

Non-coding RNAs (ncRNAs), which account for 98% of the human genome, are a type of RNA without protein coding functions, which mainly include microRNAs (miRNAs), long ncRNAs (lncRNAs), and circular RNAs (circRNAs).¹⁹ Although ncRNAs do not have the function of encoding proteins, they can regulate physiological processes such as DNA replication, RNA transcription, and protein translation, and they play an important role in cell differentiation and metabolism. They are widely involved in regulating the occurrence and development of tumors by playing the role of a proto-oncogene or tumor suppressor gene.^{20–23} In recent years, there has been an increase in research focused on exploring the role of multiple ncRNAs in regulating the proliferation, migration, angiogenesis, recurrence, and metastasis of malignancies, including melanoma.^{24,25} In this review, we discuss recent studies on the role of miRNAs, lncRNAs, and circRNAs in melanoma. Moreover, we provide an overview of the current knowledge of the relationship between ncRNAs and melanoma as well as the potential impact and promise of ncRNAs in the diagnosis and treatment of melanoma.

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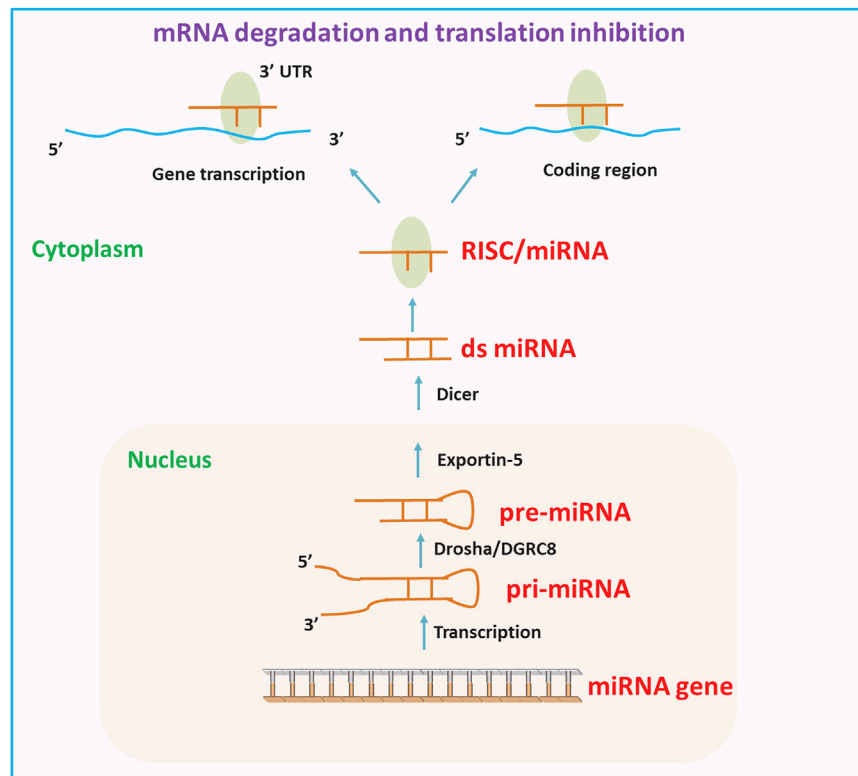


Figure 1. The process of miRNA biogenesis and miRNA in gene regulation

A miRNA is transcribed from its gene into pri-miRNA, which is cut into a pre-miRNA by Drosha. Pre-miRNA is transported to the cytoplasm through exportin 5/Ran-GTP and is cleaved by Dicer into a miRNA-miRNA duplex. The leader strand is loaded onto the RISC, and then the target mRNA is inhibited on the 3' UTR.

the protein, causing degradation of the target mRNA or inhibiting its translation, thereby regulating gene expression at the post-transcriptional level (Figure 1).^{30–32} lncRNAs are a type of ncRNA with transcripts longer than 200 nt. They can compete with miRNAs, DNAs, or transcription factors to act as a “molecular sponge” and can cause upregulation or downregulation of target protein expression. lncRNAs are able to recruit or prevent the binding of the transcriptional elements and transcription factors, directly impacting the transcriptional output. lncRNAs are also involved in post-transcriptional regulation in the nucleus. For example, lncRNAs can interact with the splicing machinery or directly with nascent RNAs to guide particular splicing

BIOLOGICAL CHARACTERISTICS AND FUNCTIONS OF ncRNAs

With the advancement of human genomics and the rapid development of next-generation sequencing technology, researchers have found that only about 1.5% of the nucleic acid sequences in the human genome are related to protein coding, and the rest are called ncRNAs because they do not encode proteins.²⁶ ncRNAs mainly include ribosomal RNA (rRNA), transfer RNA (tRNA), miRNA, lncRNA, circRNA, and competitive endogenous RNA (ceRNA). Among these ncRNAs, miRNA, lncRNA, and circRNA have been widely reported to play important roles in the occurrence and development of tumors.^{27–29} miRNAs are a type of endogenous non-coding small RNA with a length of about 18–24 nt. Most miRNAs are processed from either miRNA DNA or introns. The miRNA sequence is transcribed to the primary transcript primary miRNA (pri-miRNA), which is additionally capped and polyadenylated by RNA polymerase II. The pri-miRNA is then cut into a precursor miRNA (pre-miRNA) by Drosha in the nucleus. Next, exportin 5 and Ran-guanosine triphosphate (GTP) bind the pre-miRNA and thus enable its export from the nucleus into the cytoplasm. In the cytoplasm, the pre-miRNA is cleaved into a mature double-stranded, ~22-nt miRNA/miRNA duplex processed by Dicer. The double-stranded miRNA complex then binds to the RNA-induced silencing complex (RISC). Functional miRNA is produced after the complementary strand is removed from the RISC and degraded. Its function is mainly by combining with the RISC to form the miRISC complex and then specifically binding to the mRNA encoding

patterns. In the cytoplasm, lncRNAs can influence translational output in different ways. First, they can regulate the translational rate by modulating polysome loading to an mRNA molecule or controlling the internal ribosomal entry sites. In addition, they can also regulate gene expression by reducing or stimulating mRNA decay (Figure 2).^{33–35} circRNAs are a novel endogenous ncRNA with a special covalent closed loop structure, which does not have a 5' end cap and 3' end poly(A) tail structure. circRNAs may arise from introns or exons, which result in the formation of different types of circRNAs, that is, exonic, intronic, and exon-intron circRNAs. The exonic circRNA is the result of pre-mRNA splicing. When the 3' splice donor is attached to the 5' splice acceptor, the exonic circRNA is formed. If the introns between exons are retained, the resulting circular transcription is called exon-intron circRNA. Intronic circRNAs can be produced by intronic lariats, which can resist degradation by debranching enzymes. Their function can be used as a miRNA sponge, regulating alternative splicing and gene transcription, protein translation, and the ceRNA mechanism (Figure 3).^{36–38}

miRNAs IN MELANOMA

miRNAs are a type of key molecules in post-transcriptional regulation of genes, involved in cell proliferation, differentiation, and the occurrence and development of various diseases.^{39,40} Different studies have demonstrated that more than 60% of human genes are regulated by miRNAs, which might act as oncogenes or tumor suppressors, depending on target gene, cellular context, and tissue.^{41–43} Several

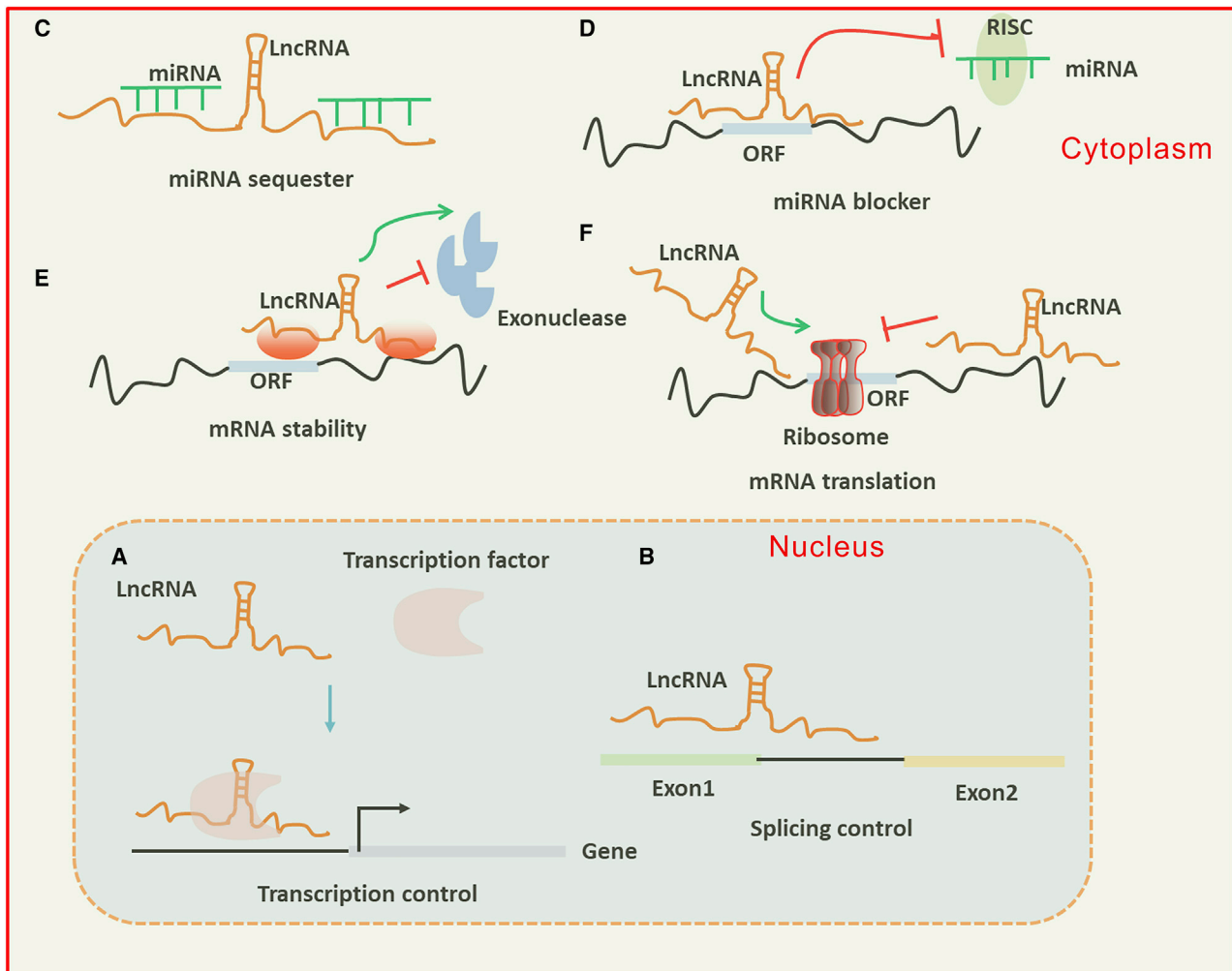


Figure 2. Models of lncRNA functions

(A) lncRNAs activate transcription of some genes by recruiting transcription factors to their enhancers or promoters and suppress transcription by secluding transcription factors and keeping them away from their enhancers or promoters. (B) lncRNAs can regulate mRNA functioning through base pairing with them and altering their splicing patterns. (C and D). lncRNAs can act as “sponges” by base pairing with their complementary miRNAs and inhibiting their effects. Cytoplasmic lncRNAs can regulate mRNA expression by competing for microRNA binding or blocking miRNA. (E and F) lncRNAs can regulate mRNA expression by regulating mRNA stability or mRNA translation by base pairing with mRNA molecules in the cytoplasm.

miRNAs have oncogene or tumor suppressor activities and play a key role in cancer development, progression, and metastasis.⁴⁴ Abnormal miRNA expression has been found in many human tumors, including breast cancers, hepatocellular carcinoma, bladder cancer, and gastric and colorectal cancer, among others.^{45–49} In recent years, several studies have analyzed miRNAs important involvement in proliferation, invasion, and metastasis of melanoma^{50–52} (Figure 4).

miRNAs act as oncogenes in melanoma

Previous studies have confirmed that many miRNAs are involved in the development of melanoma (Table 1). miR-155 is a regulatory gene that plays a role in a variety of human cancers, including lung cancer, acute myeloid leukemia, and hepatocellular carcinoma^{64–66} Peng

et al.⁶⁷ found that miR-155 is upregulated in melanoma cell lines and tissues. It directly targets NDFIP1 (Nedd4 family interacting protein 1) and inhibits its expression. When NDFIP1 is downregulated, it induces the growth and migration of melanoma cells. Ling et al.⁶⁸ found that the expression of miR-367 was upregulated in melanoma tissue samples through quantitative polymerase chain reaction, and phosphatase and tensin homolog (PTEN) was its target gene. miR-367 promoted the colony formation of melanoma cells by regulating PTEN. miR-21 is a well-known modulator of cell proliferation, survival, and migration/invasion. Deregulation of miR-21 has been found in human cutaneous melanoma, and higher levels expression of miR-21 correlate with advanced tumor stage, invasion, and tumor recurrence. Some studies have identified that PTEN is a direct target

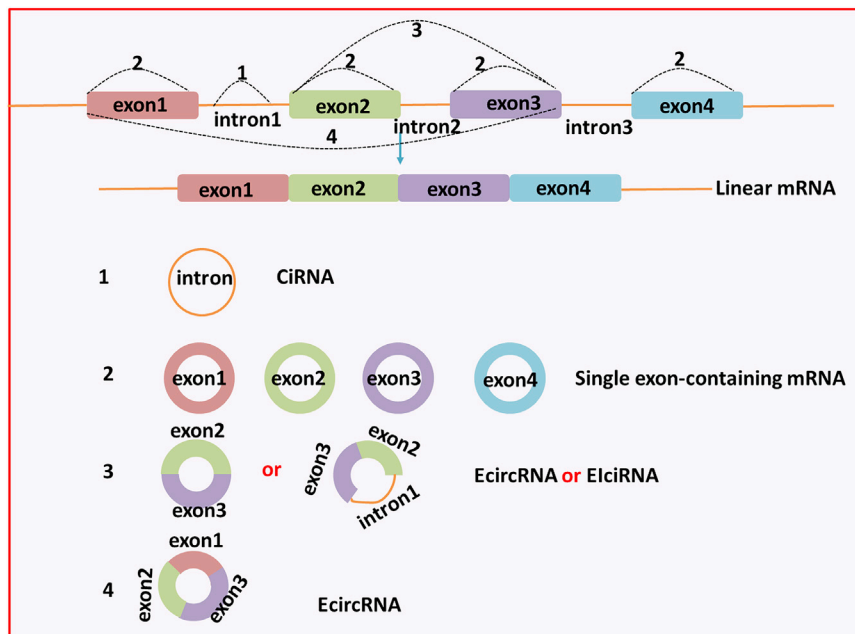


Figure 3. circRNA types are diverse

There may be many types of circRNA derived from the same gene. circRNAs are generated from the single exons of pre-mRNAs by back-splicing. Back-splicing coupled with splicing removes the intervening introns to produce exonic circRNAs (EcircRNAs). Some EcircRNAs with a retained intron are generated by back-splicing and called exon-intron circRNAs (ElciRNAs). Some of the intron lariats produced during canonical splicing escape the debranching process and form stable intronic circRNAs (CiRNAs).

seen that let-7b may negatively regulate the growth and proliferation of melanoma cells by inhibiting progression of the melanoma cell cycle. Yan et al.⁷⁴ found that miR-34a can directly or indirectly downregulate the expression of c-MET, p-Akt, and other cell cycle-related proteins in uveal melanoma, thereby significantly inhibiting tumor growth and migration. Another potent tumor suppressor miRNA, such as miR-200c, its expression is significantly

reduced in melanoma cells.⁷⁵ Decreasing miR-200c increases Bmi-1 expression, which enhances the activation of the mitogen-activated protein kinase (MAPK) and PI3K/AKT pathways and the acquisition of the characteristics of the epithelial-to-mesenchymal transition (EMT), such as N-cadherin, and the upregulation of downregulation of E-cadherin.⁷⁶

Exosome miRNAs in melanoma

Exosomes, which are the smallest type of extracellular vesicles (EVs) that are 30–180 nm in diameter, were discovered by Pan et al.⁷⁷ Tumor-derived exosomes contain abundant miRNAs (exo-miRNAs) and various enzymes that are involved in the synthesis and regulation of miRNAs, and they play a key role in epigenetic regulation.⁷⁸ In the past few years, exosomes have been considered to be predictive and prognostic biomarkers useful in monitoring tumor development and a new tool for drug delivery by acting as transporters of various significant bioactive molecules, including miRNAs, that play a key role in the intercellular crosstalk between cancer and stromal cells, promoting the maturation of the tumor microenvironment.^{79–81} Melanoma-derived exosomes have been shown that can induce the migration of endothelial cells and affect angiogenesis by transporting miR-9 to endothelial cells. Moreover, exosomes can enhance metastatic niche formation in hypoxic conditions.^{58,82} Rappa et al.⁸³ revealed 49 miRNAs with higher concentration in metastatic-melanoma derived exosomes than in primary cells by using miRNA profiling. Among them, 20 miRNAs have been proven to have a specific cancer-associated function. In addition, Xiao et al.⁸⁴ demonstrated 130 upregulated and 98 downregulated miRNAs in melanoma-derived exosomes compared with melanocyte-derived exosomes, among which 70 miRNAs, including let-7a, miR-221, and miR-31, were related to malignancy. Furthermore, the role of exosomes in

of miR-21, and levels of PTEN, in turn, regulate the activation of the phosphatidylinositol 3-kinase (PI3K)/AKT pathway.⁶⁹ In addition, some miRNAs have also been shown to affect apoptosis of melanoma cell. For example, miR-638 is significantly overexpressed in metastatic melanoma. The overexpression of miR-638 enhances the pro-tumorigenic and metastatic properties of melanoma cells *in vitro* and *in vivo*. miR-638 can also prevent melanoma cells from autophagy and apoptosis by regulating TP53INP2 expression, and it stimulates p53 and p53 downstream target gene expression.⁷⁰ Other miRNAs, such as miR-214, miR-100, and miR-125b, have been reported to be involved in the control of melanoma cell proliferation and apoptosis.^{62,71} These findings suggest that miRNAs can play an oncogenic role in melanoma.

miRNAs act as tumor suppressors in melanoma

Compared with miRNAs as an oncogene, studies show that more miRNAs act as tumor suppressors. Liu et al.⁷² found that miR-9 was significantly reduced in highly invasive uveal melanoma (UM) cell lines. miR-9 can negatively regulate the expression of nuclear factor κ B (NF- κ B) and its downstream targets such as matrix metalloproteinase (MMP)-2 and MMP-9, and of vascular endothelial growth factor A (VEGFA), thereby inhibiting the migration and invasion of uveal melanoma cells. Let-7 is the first miRNA to be shown to be involved in tumor formation. Let-7, a member of the let-7 family, plays an important role in melanoma. Schultz et al.⁷³ analyzed melanoma patients and found that five members of the let-7 family were significantly downregulated. Further studies found that let-7b overexpression in melanoma cells can reduce the expression of cyclin D1, cyclin D3, and cyclin-dependent kinase 4 (Cdk4), and significantly reduced the number of melanoma cells in the S phase and G₁ phase and reduced the non-adherent growth of melanoma cells. It can be

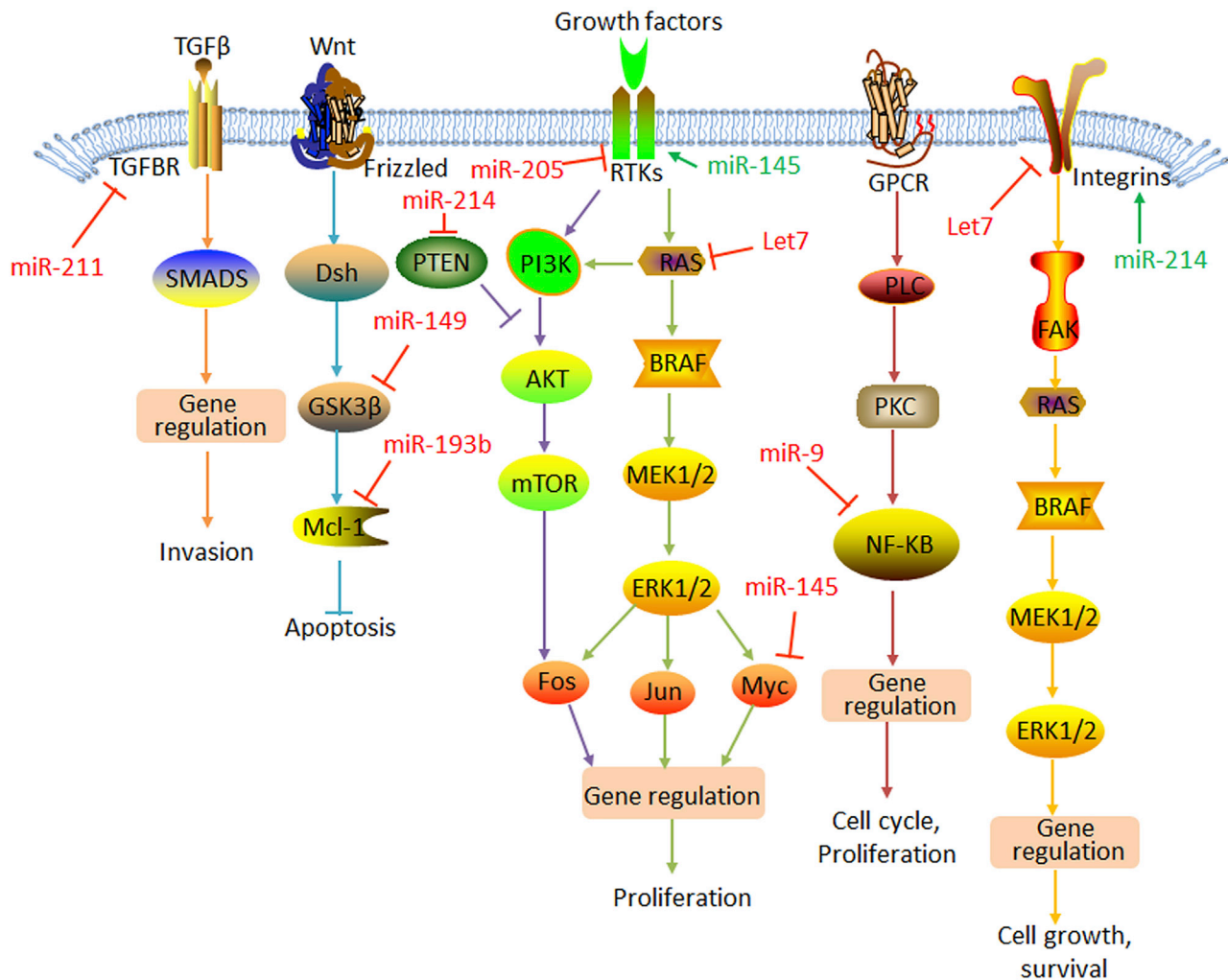


Figure 4. MicroRNAs regulate various genes and pathways in melanoma

preparing a pre-metastatic niche in distant tissues has recently been described.⁸⁵ Dror et al.⁸⁶ showed that melanoma-derived exosomes transport of miR-211 contributes to the melanoma cells crosstalk with fibroblasts. Moreover, exosomes are released into the dermis prior to melanoma cell invasion. These findings showed that melanoma cells are able to regulate the stromal niche during the early phase of melanoma.

miRNAs and immunity in melanoma

Melanoma is a well-known immunogenic cancer. Many antigens and specific lymphocytes have been isolated from melanoma.⁸⁷ The immune system plays a important role in melanoma therapy, and some specific immune therapies have been developed, such as anti-CTLA4 and anti-PD1 (ipilimumab and nivolumab/pembrolizumab, respectively)-based immune therapies, which were the first agents to be approved by the US Food and Drug Administration (FDA).^{88,89} In 2014, nivolumab was approved by the FDA for metastatic melanoma treatment, and anti-PD1 antibodies have demon-

strated the highest efficacy in melanoma. Notwithstanding the remarkable clinical results, most patients (50%–60%) treated with these agents do not have a durable response.^{88,90} Recently, miRNAs have been investigated as regulators of this immune-evasive property of melanoma cells. It has been reported that miR-30d can mediate the inhibition of GALNT7 (*N*-acetylgalactosamine [GalNAc] transferase 7) to promote the expression of interleukin (IL)-10, which in turn triggers an immune-suppressive response.⁹¹ Studies have shown that miR-30e can regulate the cytotoxicity of natural killer (NK) cells through targeted regulation of perforin.⁹² miR-155 can also regulate the function of NK cells. Overexpressed miR-155 can increase the activity of NK cells by targeting to hematopoietic-specific inositol phosphatase 1 (SHIP-1) and promote the secretion of immune-stimulating cytokine interferon γ (IFN- γ).⁹³ Moreover, miR-155 is involved in modulating the IL-1 β -induced downregulation of microphthalmia-associated transcription factor (MITF)-M expression in melanoma cells.⁹⁴ In addition, some miRNAs, such as miR-146, have been suggested to promote M2 polarization and generate

Table 1. The deregulated miRNAs in melanoma

miRNA	Expression	Target	Activity	Role	Reference
miR-137	down	MITF	proliferation	tumor suppressor	⁵³
Let7a-b	down	integrin β 3, BSG	migration, invasion	tumor suppressor	^{54,55}
miR-21	up	STAT3	proliferation	oncogene	⁵⁶
miR-205	down	E2F	proliferation, apoptosis	tumor suppressor	⁵⁷
miR-9	down	NF- κ B	angiogenesis, ECM remodeling, metastasis	tumor suppressor	⁵⁸
miR-182	up	MITF, FOXO3	proliferation, apoptosis, cell motility, metastasis	oncogene	⁵⁹
miR-145	down	IRS-1	proliferation	tumor suppressor	⁶⁰
miR-124a	down	CDK4, CDK6, cyclin D2, EZH2	proliferation	tumor suppressor	⁶¹
miR-214	up	TFAP2C, ITGA3	cell motility, migration, metastasis	oncogene	⁶²
miR-200c	down	ZEB1	EMT	tumor suppressor	⁵¹
miR-222	up	p27	proliferation	oncogene	⁶³

negative feedback on the activation of NF- κ B-related genes regulated by Toll-like receptor 4 (TLR4).^{95,96} miR-200a has been shown to suppress CDK6 expression in melanoma cells. Recently, CDK4/6 inhibitors have demonstrated promising anti-tumor capabilities in melanoma.⁹⁷

miRNAs as therapeutic approaches in melanoma

Classical treatment options include chemotherapy, radiotherapy, and immunotherapy with great limited efficacy. Although anti-PD1 or anti-CTLA4 antibodies are showing promising clinical results, emergence of resistance has already been encountered.⁹⁸ Since many miRNAs are overexpressed in melanoma, miRNA-based cancer gene therapy offers a novel therapeutic possibility of targeting multiple gene networks.⁹⁹ Huynh et al.¹⁰⁰ has shown the influences of antisense-miR-182 in a melanoma mouse model. They observed that antisense-miR-182 can inhibit tumor growth and metastatic spread. Consistently, Wang et al.¹⁰¹ showed that the inhibition of miR-573 in a murine xenograft model reduced the growth and migration of the melanoma cells. These studies demonstrated that the regulation of miRNAs could alter the expression of oncogenic or tumor-suppressing potential of their targets, eventually resulting in therapeutic effects. Thus, identification of new miRNAs as potential therapeutic targets opens new horizons in the treatment of melanoma.

DEREGULATED lncRNAs IN MELANOMA

lncRNAs are a class of RNAs whose transcripts are longer than 200 nt and do not encode proteins. Compared with miRNAs, lncRNAs have longer sequences and more complex spatial structures, and the mechanisms involved in expression regulation are more diverse and complex. lncRNAs can modulate gene expression through various mechanisms, including chromatin modification, transcriptional regulation, RNA splicing, miRNA sequestration, and translational regulation.¹⁰²⁻¹⁰⁴ In the past, lncRNAs were dismissed as nonfunctional transcriptional junk.¹⁰⁵ However, in recent years, there has been an increase of research focused on investigating the role of

multiple lncRNAs in regulating tumorigenesis, including melanoma¹⁰⁶ (Table 2; Figure 5).

lncRNAs regulate melanoma cell proliferation and metastasis

Read et al.¹¹⁷ found that antisense ncRNA in the INK4 locus (ANRIL) can be transcribed into a noncoding RNA containing 19 exons in the opposite direction of the P15/CDKN2B/INK4B-P16/CDKN2A/INK4A-P14/ARF gene cluster. In addition, CDKN2A mutations are found in approximately 20%–40% of familial melanomas.¹¹⁸ Therefore, it can be speculated that ANRIL transplants the transcripts of gene clusters through epigenetics, thereby affecting tumor cell proliferation.¹¹⁹ Similar ANRIL expression can also be seen in various other malignant tumors, such as colorectal cancer and non-small cell lung cancer.^{120,121} lncRNA HOXA11-AS is overexpressed in uveal melanoma tissues and cells, and it can interact with the enhancer of Zeste homolog 2 (EZH2) to inhibit the expression of its target p21 protein. In addition, it was also found that HOXA11-AS was negatively correlated with miR-124 expression. Overexpression of miR-124 can reduce the proliferation and invasion effects of HOXA11-AS.¹²² In addition, MALAT1 (metastasis-associated lung adenocarcinoma transcript 1) is the first lncRNA proven to be associated with non-small cell lung cancer, a common tumor marker to predict lung cancer metastasis, and is associated with the occurrence and development of various tumors.¹²³ In melanoma-related research, MALAT1 is highly expressed in melanoma, and the expression level is positively correlated with the tumor's proliferation and invasion ability. Further research found that it can be combined with miR-183 and integrin β 1 (ITGB1), and interact with splicing factors (protein factors involved in the splicing process of RNA precursors).¹²⁴

lncRNAs regulate melanoma cell apoptosis

Long-chain ncRNA SPRY4-IT1 (or SPRIGHTLY) is the first discovered and named lncRNA associated with melanoma. It is transcribed from the intron of the SPRY4 gene. In addition to melanoma, this lncRNA also plays an important role in esophageal squamous cell carcinoma, prostate cancer, glioma, and gastric cancer.¹²⁵⁻¹²⁸ Some

Table 2. The deregulated lncRNAs in melanoma

lncRNA	Expression	Target	Location	Functions	Reference
BANCR	up	ERK1/2	cytoplasm	proliferation	¹⁰⁷
HOTAIR	up	PRC2	nucleus and cytoplasm	migration, invasion	¹⁰⁸
ANRIL	up	INK4	nucleus and cytoplasm	proliferation, migration	¹⁰⁹
MALAT1	up	Slug	nucleus	migration, metastasis	¹¹⁰
SAMMSON	up	p32	cytoplasm	proliferation	¹¹¹
PVT1	up	miR-26b	nucleus and cytoplasm	proliferation	¹¹²
SLNCR1	up	MMP9	nucleus	invasion	¹¹³
UCA1	up	FOXM1	cytoplasm	migration, proliferation	¹¹⁴
H19	up	EZH2	nucleus	migration	¹¹⁵
HOXA11-AS	up	EZH2/P21	nucleus	proliferation, invasion	¹¹⁶

studies have reported that SPRY4-IT1 inhibits apoptosis by combining with lipin 2 to avoid cytolipid toxicity and alter lipid metabolism processes.¹²⁹ SAMMSON was discovered because its gene sequence is very close to the MITF gene, and its sequence at 3p13-14 was specifically amplified in about 10% of melanomas. SAMMSON is regulated by the melanocyte-specific transcription factor SOX10, and its expression has been detected in more than 90% of The Cancer Genome Atlas (TCGA) primary and metastatic melanoma patients. However, unlike its neighboring oncogene MITF, the expression of SAMMSON has no difference between the invasive and proliferative melanoma phenotypes, and there is insufficient evidence to show that these two transcripts are coordinated. Regardless of the mutation status of TP53, NRAS, or BRAF, the knockout of the SAMMSON can reduce the viability of melanoma cells.¹¹¹ The knockout of SAMMSON did not reduce the expression of MITF, so it could not promote the transcription of MITF. One of its functions is closely related to p32, which is the main regulator of mitochondrial homeostasis and metabolism. SAMMSON can enhance the function of targeting mitochondria and tumorigenesis and development of p32, thereby promoting oxidative metabolism.¹¹¹ Wang et al.¹³⁰ found that lncRNA CASC2 is lowly expressed in melanoma tissues and cell lines, and high expression of CASC2 significantly inhibits the growth and invasion of melanoma cells. In addition, it was also found that CASC2 directly binds to miRNA-181a and inhibits the expression of miRNA-181a, which further inhibits the expression of its downstream apoptosis-associated protein plexin C1 (PLXNC1), thereby promoting tumor cell apoptosis.

lncRNAs as a therapeutic target for melanoma

Evaluating the function of lncRNAs usually depends on inhibiting the activity of lncRNAs (gene knockout) and observing the resulting changes in the molecular phenotype. The specific methods of down-regulating lncRNAs are antisense oligonucleotides (ASOs), RNA interference (RNAi), and clustered regularly interspaced short palindromic repeats (CRISPR).^{131,132} These lncRNA downregulation technologies are expected to become future melanoma treatment technologies. SAMMSON is a lncRNA that promotes the development of melanoma and is highly expressed in tumor tissues.^{111,133} ASO-

and RNAi-mediated SAMMSON gene knockdown reduces the number of tumor cell clones and induces melanoma cell apoptosis, and this process is not affected by the status of BRAF, NRAS, or TP53. In *in vivo* experiments, intravenous injection of SAMMSON-specific antisense oligonucleotides in a model of patient-derived tumor xenograft (PDX) from melanoma patients can significantly reduce tumor growth. In the PDX model, the combined application of a SAMMSON-specific ASO and a BRAF inhibitor dabrafenib can induce apoptosis, while dabrafenib alone can only inhibit tumor growth. In addition, compared with BRAF and MEK inhibitor combination therapy, BRAF inhibitor and SAMMSON-targeted ASO combination therapy showed no signs of toxicity.¹¹¹

THE ROLE OF circRNAs IN MELANOMA

As early as 1976, circRNAs were discovered in plant viruses.¹³⁴ At that time, researchers thought that it was a product of wrong splicing and was not valued. In the following 30 years, there were only a few reports describing the presence of circular mRNA transcripts in mammals. It was not until 2012 that Salzman et al.¹³⁵ discovered that hundreds of human genes can express circRNAs using high-throughput sequencing methods, and researchers realized that the number and extensiveness of circRNAs had been underestimated before. Since then, researchers have discovered that circRNAs are not only a type of ncRNA molecule with rich expression, high stability, diversity, and conservatism, but they also play an important role in the occurrence and development of various diseases, including melanoma^{136,137} (Table 3).

Characteristics and functions of circRNAs

circRNAs are a type of non-linear single-chain ncRNA. Unlike conventional linear RNAs, circRNAs lack the typical terminal structure (5' cap structure and 3' polyadenylation).¹⁴⁶ Exonuclease degrades RNA by recognizing the end of linear RNA. The lack of these structures makes circRNAs more stable than linear RNA and resistant to exonuclease R.¹⁴⁷ Not only that, but also studies have found that circRNAs have species specificity, tissue specificity, disease specificity, and specificity related to developmental stage.^{148–150} Moreover, a gene can produce many different types of circRNA, and even some

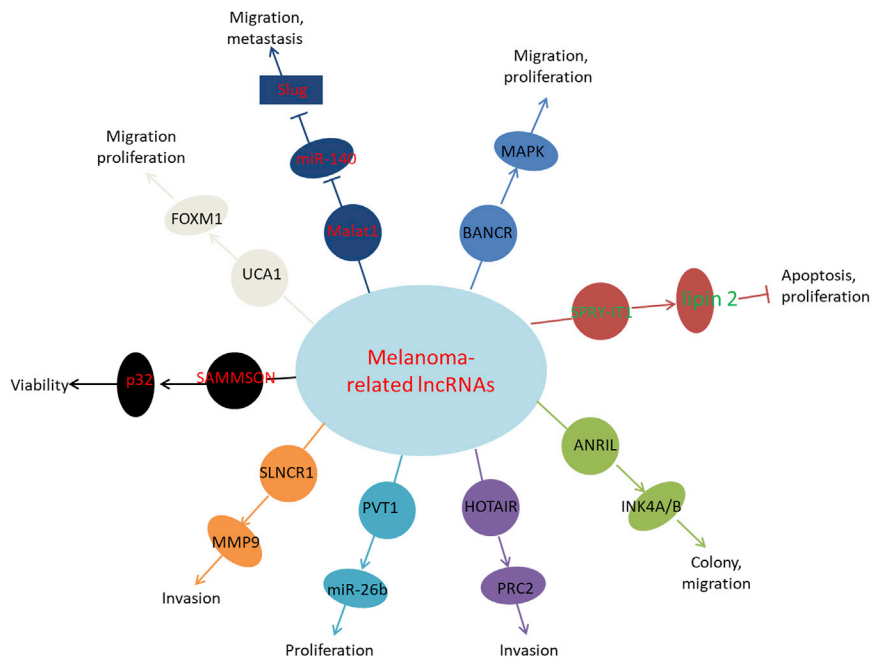


Figure 5. Deregulated lncRNAs regulate various genes and malignant phenotypes in melanoma

circRNA expression levels are more abundant than their corresponding linear RNA.

Studies have found that some circRNAs have multiple conserved miRNA binding sites that can competitively bind miRNAs to act as a miRNA sponge, and changes in circRNA abundance can regulate the effect of miRNAs on their target genes.¹⁵¹ Although most circRNAs are located in the cytoplasm,^{135,152} studies have shown that some circRNAs in the nucleus can regulate gene expression at the transcriptional level. For example, circRNAs can interact with U1 small nuclear ribonucleoprotein (U1snRNP), and the formed circRNA-U1snRNP complex can be combined with RNA polymerase II at the promoter of its parent gene to enhance gene expression.¹⁴⁷ Although most reports indicate that endogenous circRNAs cannot be combined with ribosomes for translation,^{152,153} recent studies have shown that a small portion of circRNAs can encode proteins. Legnini et al.¹⁵⁴ found that human and mouse muscles are regulated by circZNF609 during their differen-

tiation. This circRNA is translated into a protein in a manner that is dependent on splicing but has nothing to do with the cap structure.

circRNAs and melanoma

In recent years, more and more studies have shown that circRNAs show strong functions in regulating cell proliferation, apoptosis, angiogenesis, and metastasis, indicating that circRNAs can be used as a cancer biomarker and may be an important therapeutic target for cancer.¹⁵⁵ Ju et al.¹⁵⁶ found that many circRNAs are abnormally expressed in oral melanoma, and these circRNAs may be involved in the progression and metastasis of oral melanoma, and they may be used as a potential diagnostic biomarker for oral melanoma. Yang et al.¹³⁷ screened out seven circRNAs of expression abnormalities in uveal melanoma through bioinformatics anal-

ysis and the expression of circRNAs constructed in the uveal MM, including hsa_circ_01119873, hsa_circ_0128533, and hsa_circ_0047924, among others, which may serve as candidates for future research on the pathogenesis of uveal melanoma. In addition, Jin et al.¹⁴¹ demonstrated that human circMYC was obviously upregulated in human melanoma tissue. Furthermore, circMYC promoted the proliferation of human melanoma cells and Mel-CV cells. The expression of circMYC can repress Mel-CV cell glycolysis and lactate dehydrogenase A (LDHA) activities *in vitro*. Research by Bian et al.¹⁴⁵ showed that hsa_circ_0025039 is overexpressed in melanoma tissues and cell lines, which can promote tumor cell growth, invasion, and glucose metabolism through the miR-198/CDK4 axis *in vivo* and *in vitro*, suggesting that hsa_circ_0025039 may be a new target for the treatment of melanoma. The research of circRNAs in melanoma is still relatively lacking and is concentrated in the field of mucosal melanoma. Therefore, their potential as a biomarker and therapeutic target of melanoma needs to be further explored.

Table 3. The deregulated circRNAs in melanoma

circRNA	Expression	Target	Activity	Role	Reference
circ_0084043	up	miR-429	proliferation, migration and invasion	oncogene	138
CDR1as	down	IGF2BP3	metastasis	tumor suppressor	139
circ_0017247	up	miR-145	migration and invasion	oncogene	140
circMYC	up	miR-1236	proliferation	oncogene	141
circ-FOXM1	up	miR-143-3p	proliferation and invasion	oncogene	142
ITCH	down	GLUT1	proliferation	tumor suppressor	143
circ_0016418	up	miR-625	proliferation and migration	oncogene	144
circ_0025039	up	miR-198	invasion and metabolism	oncogene	145

Table 4. miRNAs, lncRNAs, and circRNAs with a diagnostic, predictive, and therapeutic role in melanoma

ncRNAs	Target	Potential clinical relevance	References
miRNAs			
miR-7	EGFR/IGF-1R/ CRAF	drug-sensitive (BRAFi)	157
miR-32	MCL-1	drug-sensitive (vemurafenib)	158
miR-579-3p	BRAF, MDMD2	drug-sensitive (BRAFi/ MEKi)	159
miR-125b	CCL-2	drug-resistant (vemurafenib)	71
miR-30a-5p	IGF1R	drug-resistant (cisplatin)	160
miR-206	unknown	predictive	161
miR-221-3p	unknown	prognostic	162
miR-16	unknown	prognostic	163
lncRNAs			
PICSAR	DUSP6	diagnostic	164
HOTAIR	miR-152-3p	diagnostic, prognostic	165
CASC9	Nrg1	diagnostic, prognostic	166
RMEL3	MAPK, PI3K	therapeutic target	167
LLME23	RAB23	therapeutic target	168
MALAT1	ITGB1	diagnostic, prognostic	169
circRNAs			
CDRIas	LINC00632	therapeutic target	139
circRNA_0084043	miR-153-3p	therapeutic target	170
circ_0020710	CXCL12	predictive	171
circMYC	LDHA	predictive	141
circ-GLI1	CYR61	predictive	172
circ_0002770	TGFBR1	therapeutic target	173

CONCLUSIONS

The good prognosis of melanoma still depends on early detection and early diagnosis, and targeted therapy and immunotherapy bring hope to advanced melanoma. Finding ideal biomarkers and therapeutic targets is the focus of research. Epigenetic changes are easier to discover than genetic mutations, and they are easier to reverse, which is a good breakthrough point for the early diagnosis and treatment of cancer. At present, research on melanoma has made great progress in epigenetics related to RNA, and the prospects of miRNAs, lncRNAs and circRNAs as biomarkers are promising (Table 4). During the past decade, the explosive growth of RNA-related epigenetic research data has revealed the multi-layered complexity of gene expression and regulation. The discovery of biomarkers and refinement of therapeutic targets for melanoma is a gold mine for basic research.

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AUTHOR CONTRIBUTIONS

Q.P. assembled the related studies and drafted the manuscript. J.W. revised and finalized the manuscript. Both read and approved the final manuscript.

DECLARATION OF INTERESTS

The authors declare no competing interests.

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