



Data Article

Data on the *in vitro* and *in vivo* anti-tumor effects of itraconazole, paclitaxel, and the two in combination in HT-29 and YM-1 cancer cell line and HT-29 colon cancer xenograft models

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ABSTRACT

Colon cancer is one of the fatal cancers in the world that metastatic potential and resistance to chemotherapy drugs are outstanding causes of cancer-induced mortality [1–4]. We have investigated *in vitro* and *in vivo* anti-cancer effect of itraconazole and paclitaxel alone and their anti-cancer synergistic effect through MTT assay in YM-1 and HT-29 cell lines and in HT-29 tumor-bearing nude mice. Histopathological experiment was done for further assessment. Also, we evaluated the inhibitory effect of itraconazole on P-gp using specific *in vivo* biodistribution through ^{99m}Tc-MIBI uptake. ^{99m}Tc-MIBI, a myocardial perfusion imaging agent, is a useful radiotracer in diagnosis of some tumors and the liver and tumor accumulation of ^{99m}Tc-MIBI is changed by P-gp regulators [5–8]. The data presented in this article are related to the research paper entitled "Itraconazole synergistically increases therapeutic effect of paclitaxel and ^{99m}Tc-MIBI accumulation, as a probe of P-gp activity, in HT-29 tumor-

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bearing nude mice". We hope our preliminary data to be helpful to design the chemotherapy regimen schedule with Itraconazole and Paclitaxel.

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Specifications Table

Subject	Health and medical sciences
Specific subject area	<i>In vitro</i> and <i>in vivo</i> anti-cancer effect of itraconazole, paclitaxel and the two in combination in YM-1 and HT-29 cell lines and HT-29 colon cancer xenograft models.
Type of data	Table Figure
How data were acquired	ELISA reader (Biotech, USA), Gamma counter with a NaI (Tl) detector ((Delshid, Tehran, Iran)) Excel 2016, Graf pad prism 8
Data format	Raw analyzed
Parameters for data collection	Cytotoxic effects of paclitaxel, itraconazole and concomitant treatment in Human colorectal cancer cell line (HT-29) and esophageal cancer cell line (YM-1) lines were evaluated by MTT test. cell viability % percentage was obtained through following equation: Absorption of Treated / Absorbed Control Cells) × 100%. <i>In vivo</i> anti-tumor efficacy of paclitaxel, itraconazole and their synergistic effect was illustrate by measurement of tumor volum by external vernier caliper during the 12 days' treatment period. P-gp modulatory effect of itraconazole also assessed by biodistribution pattern of 99mTc-MIBI in HT-29 xenograft model, too.
Description of data collection	Human colorectal cancer cell line (HT-29) and esophageal cancer cell line (YM-1) were seeded in 96-well plates with 200 µl of RPMI and DMEM medium and incubated at 37°C for 24 h. Afret that, the medium was removed and cells were exposed to paclitaxel alone (0.05µM), itraconazole alone (5µM), and the two in combination (itraconazole + paclitaxel) with the same concentrations (n=24). After 48 and 72 h incubation, 20 µL of MTT solution (5mg/ml) was added to the each well and incubated at 37°C for 4 hours. Then, the supernatant was removed and 100 µL of DMSO was added and absorbance of plates were read on an ELISA reader at a wavelength of 570 nm. For animal study, 1 × 10 ⁷ cell of HT-29 cell line were subcutaneously injected into the right hind legs of the Twenty-four female nude mice (3 to 5-week-old, 14-20 g). when tumors appeared, they divided to some extent uniformly based on tumor size into 4 following experimental groups. Control group, itraconazole group (10 mg/Kg, i.p.), paclitaxel group (20 mg/Kg, i.p.), itraconazole (10 mg/Kg, i.p.) + paclitaxel (20 mg/Kg, i.p.) group. The daily tumor size measurement was started on 12th days after HT-29 cell transplantation and cotinued untill the end of the treatment period.The treatment schedule was started on 14 th day and drugs were injected intraperitoneally on 14th, 18th, 22th, and 26 th days after HT-29 cells transplantation. Sestamibi kit (MIBI) was prepared according to the manufacturer's protocol and intravenously injected through the tail vein of nud mice 24 hours after final treatment day. 60 min after radiotracer injection, mice were sacrificed with a lethal dose of ketamine/xylazine (i.p.) and blood collected and other organs ranging from heart and liver to tumor were removed, weighed and counted by a gamma counter.
Data source location	Institution: Mazandaran University of Medical Sciences City/Town/Region: Sari, Farahabad Country: Iran

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Data accessibility
Related research article

Data is with this article.
Mahdi Ghadi^a, Seyed Jalal HosseiniMehr^a, Fereshteh Talebpour Amiri^b, Alireza Mardanshahi^c, Zohreh Noaparast^{a*}, Itraconazole synergistically increases therapeutic effect of paclitaxel and ^{99m}Tc-MIBI accumulationin in HT-29 tumor-bearing nude mice, European Journal of Pharmacology,
<https://doi.org/10.1016/j.ejphar.2021.173892>

Value of the Data

- The presented data provided experimental evidence for the potential anticancer effect of Itraconazole and Paclitaxel and the two in combination in human colon cancer in both *in vitro* and *in vivo* xenograft model.
- The data provided valuable information of anti-tumor efficacy of Itraconazole, a commercially cheap and available antifungal drug, and paclitaxel, a commonly used drug for the treatment of ovarian, breast, head and neck and lung cancer, and their Synergistic anti-tumor effects in nude mice xenograft model of HT-29 cells. These data may give additional insight to oncologist to design new chemotherapy regimen with Itraconazole and Paclitaxel in colon cancer.
- The data provided valuable evidence for researchers to investigate the anti-cancer effect of Itraconazole and Paclitaxel and the two in combination using another similar cellular model.

1. Data Description

Recently we have reported that *in vitro* and *in vivo* anti-cancer effect of itraconazole, paclitaxel and the two in combination in YM-1 and HT-29 cell lines and HT-29 bearing nude mice [9]. Here, we present raw data regarding the anti-cancer effect of these drugs. Detail raw and analysis data on Cytotoxic effects summarizes in Table 1. Table 2 demonstrates the changes in tumor volume measurements during treatment period in itraconazole, paclitaxel and itraconazole+ paclitaxel-treated nude mice. Notable, the animal experiment was performed by following two treatment protocol: 1) itraconazole (20 mg/Kg), paclitaxel (20 mg/Kg), itraconazole (20 mg/Kg)+ paclitaxel (20 mg/Kg). 2) itraconazole (10 mg/Kg), paclitaxel (20 mg/Kg), itraconazole (10 mg/Kg)+ paclitaxel (20 mg/Kg). Itraconazole-induced liver toxicity at dose of 20 mg/Kg caused to lessen the dose of itraconazole to 10 mg/Kg. Fig. 1 shows the itraconazole-induced hepatotoxicity at dose of 20 mg/Kg. [Table 3](#) shows the ^{99m}Tc-MIBI biodistribution raw data are presents in [Table 3](#).

2. Experimental Design, Materials and Methods

2.1. MTT assay test

Human colorectal cancer cell line (HT-29) and Human ovarian cancer cell line (SKOV3) cultured in RPMI and DMEM medium supplemented with 10% fetal bovine serum and penicillin-streptomycin at 37°C and 5% CO₂. Then these cells were seeded in 96-well plates and respectively incubated with 200 µl of RPMI and DMEM at 37°C for 24 h, again. After incubation, the medium was removed and cells were treated with paclitaxel (0.05µM), itraconazole (5µM), and combination treatment of itraconazole (5µM) + paclitaxel (0.05µM). It is notable that 10⁴ cells were seeded in each well and the total dishes for each group were 24. After 48 and 72 h incubation, 20 µL of MTT solution (5mg/ml) was added to each well and incubated at 37°C for 4 hours, again. Then, the supernatant was removed and 100 µL of DMSO was added and mixed slowly. Finally, the absorbance of plates was read on an ELISA reader at a wavelength of 570 nm (Biotech, USA). The untreated cells (24 dishes) were used as a control group to compare

Table 3The ^{99m}Tc - MIBI accumulation in vital organs of HT-29 xenograft nude mice (n= 3 for each group).

		Injection Dose= (Total-Tail-Syring):			2539675		2528779		2012263	
		Cpm		%CPM/ID*W (except intestine: %Cpm/ID)		Mean		SD		
Control	Weight of organs									
	blood	0.51	0.407	0.681	1727	3071	5879	0.133335	0.298383	
	heart	0.13	0.228	0.133	58559	94246	33479	17.73667	16.34621	
	s.a	0.136	0.179	0.114	13910	18707	10535	4.027263	4.13276	
	lung	0.239	0.16	0.142	14363	7247	8795	2.366296	1.791131	
	liver	0.724	0.866	0.832	189273	264911	174638	10.29371	12.09682	
	kidney	0.334	0.381	0.264	324483	374505	164583	38.25316	38.87064	
	spleen	0.149	0.13	0.089	11843	9683	7379	3.129661	2.945477	
	stomach	0.277	0.271	0.241	21703	12567	17759	3.085047	1.833798	
	muacle	0.156	0.158	0.192	7019	8047	8019	1.771628	2.01403	
	bone	0.042	0.111	0.332	1859	4175	7673	1.742817	1.487382	
	tumor	2.406	0.381	2.809	118999	13613	131259	1.947464	1.412921	
	intestine	-	-	-	537311	472979	406355	21.15668	18.70385	
	tail	-	-	-	54563	71459	482891	-	-	
	syringe	-	-	-	177479	171479	276563	-	-	
ITCZ	Injection Dose= (Total-Tail-Syring)					2093707	2589595	2037811		
	blood	0.184	0.238	0.424	4131	4399	3047	1.072313	0.713748	
	heart	0.18	0.152	0.083	36123	41303	24602	9.585071	10.49316	
	s.a	0.104	0.12	0.103	8583	9455	10007	3.941756	3.042625	
	lung	0.163	0.115	0.119	7403	4895	4775	2.169223	1.643701	
	liver	0.939	1.1	1.074	252611	413483	272447	12.84904	14.51554	
	kidney	0.293	0.352	0.217	164866	274260	100991	26.87494	30.08762	
	spleen	0.129	0.105	0.073	10463	6383	5267	3.873919	2.347489	
	stomach	0.302	0.384	0.189	18119	24887	9395	2.865572	2.502704	
	muacle	0.167	0.272	0.085	8191	14339	3203	2.342634	2.03572	
	bone	0.216	0.105	0.193	7015	6035	8491	1.551165	2.219505	
	tumor	4.619	2.975	1.567	263219	170831	67475	2.721782	2.217419	
	intestine	-	-	-	546199	607319	479303	26.08765	23.45227	
	tail	-	-	-	497315	39551	608699	-	-	
	syringe	-	-	-	180695	142571	125207	-	-	

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Table 3 (continued)

	Injection Dose= (Total-Tail-Syring):							2539675	2528779	2012263
PTX	Injection Dose= (Total-Tail-Syring)							2592595	2656027	2231159
	blood	0.337	0.181	0.169	467	935	443	0.053451	0.194491	0.117486
	heart	0.15	0.129	0.142	21215	32003	19204	5.45528	9.340464	6.061397
	s.a	0.15	0.136	0.112	13023	9851	9404	3.348768	2.727149	3.763258
	lung	0.12	0.136	0.183	6071	6287	7080	1.951391	1.740492	1.73401
	liver	1.077	1.281	1.078	202795	181991	154280	7.262845	5.348946	6.414462
	kidney	0.256	0.32	0.283	156467	168191	116577	23.5748	19.78883	18.46273
	spleen	0.028	0.079	0.142	1859	4538	4638	2.560865	2.162743	1.463901
	stomach	0.16	0.276	0.262	10907	14195	11380	2.629363	1.936394	1.946751
	muacle	0.187	0.212	0.278	9895	11003	12171	2.040983	1.954082	1.962234
	bone	0.214	0.236	0.255	11063	15443	6267	1.993997	2.463696	1.101511
	tumor	0.182	0.9	1.015	4498	34811	28845	0.953264	1.456268	1.27372
	intestine	-	-	-	538115	644804	499538	20.75584	24.27701	22.38917
	tail	-	-	-	64511	16307	237918.3	-	-	-
	syringe	-	-	-	114611	99383	302639.7	-	-	-
ITCZ+PTX	Injection Dose= (Total-Tail-Syring)							2544835	2192971	2455027
	blood	0.056	0.104	0.149	2040	3350	6563	1.431471	1.468854	1.794154
	heart	0.144	0.192	0.149	48755	55828	51504	13.30445	13.25922	14.07986
	s.a	0.131	0.164	0.097	20777	27709	11739	6.23235	7.704493	4.929502
	lung	0.113	0.14	0.189	10271	8399	16019	3.571697	2.735688	3.452369
	liver	0.84	1.139	1.025	257638	234910	257471	12.05233	9.404697	10.23171
	kidney	0.227	0.251	0.325	134713	122291	184255	23.31975	22.21712	23.09296
	spleen	0.087	0.154	0.168	7199	10271	11543	3.251571	3.041298	2.798679
	stomach	0.201	0.169	0.514	17135	12715	27095	3.349873	3.43081	2.147186
	muacle	0.348	0.09	0.523	15199	4743	24475	1.716232	2.403132	1.906183
	bone	0.37	0.155	1.094	14723	7223	55439	1.563633	2.124971	2.064152
	tumor	0.733	1.393	0.768	93935	115540	70409	5.035745	3.782233	3.734312
	intestine	-	-	-	550971	541315	794279	21.65056	24.68409	32.35316
	tail	-	-	-	43835	418199	46031	-	-	-
	syringe	-	-	-	183047	160547	270659	-	-	-

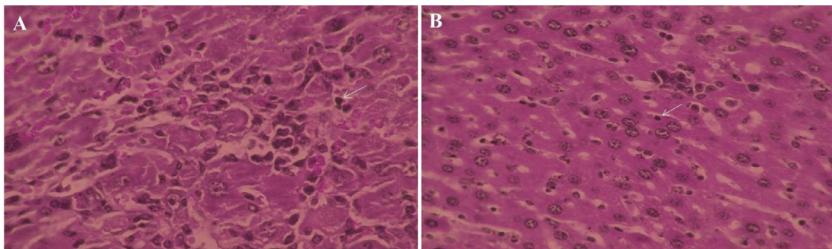


Fig. 1. Histopathologic findings of liver tissue A: Itraconazole (20 mg/Kg) group B: Itraconazole (20 mg/Kg) + Paclitaxel (20 mg/Kg) group. Hepatic cells showed increased inflammatory cells in itraconazole + paclitaxel groups but were only lower than those in itraconazole 20 mg / kg. H&E staining, Magnification: 40 \times , Scale bar: 100 μ m.

cell absorbance and survival. The cell survival percentage was calculated according to following equation: Live cell percentage (%) = (absorption of treated / absorbed control cells) \times 100%.

2.2. Effects of itraconazole and paclitaxel and their co-administration on tumor growth in HT-29 xenograft nude mice

HT-29 cells (1×10^7) suspended in 100 μ l fresh medium and subcutaneously administered into the right hind legs of the mice using a grafting needle. The first tumor sizes were measured 12 days after transplantation by external vernier caliper and to assess the anti-tumor effects of itraconazole, paclitaxel and their contaminant treatment, the tumor volumes daily recorded till the end of treatment period. The tumor volume was calculated according to the standard formula (length \times width \times height $\times \pi$)/6) [10]. Also, 12 days after transplantation the tumor-bearing nude mice were divided uniformly based on tumor volume into 4 experimental groups: The first treatment schedule was control group, itraconazole group (20 mg/Kg, i.p), paclitaxel group (20 mg/Kg, i.p), itraconazole (20 mg/Kg, i.p) + paclitaxel (20 mg/Kg, i.p) group. Itraconazole-induced liver toxicity at dose of 20 mg/Kg caused to decrease the dose of itraconazole to 10 mg/Kg. The second treatment schedule was control group, itraconazole (10 mg/Kg, i.p), paclitaxel (20 mg/Kg, i.p), itraconazole (10 mg/Kg, i.p) + paclitaxel (20 mg/Kg, i.p) group. The treatment protocol was started 14 days after HT-29 cells transplantation and drugs were injected intraperitoneally on 14th, 18th, 22th, and 26th days for a total of 12 days of treatment period. It is noted that itraconazole was injected 30 min before paclitaxel administration.

2.3. 99m Tc-MIBI biodistribution pattern

24 hours after the final drug injection, 99m Tc-MIBI (10MBq in 0.1 ml) was intravenously injected to through the tail vein and mice were killed with a lethal dose of ketamine/xylazine (i.p.) at 60 min after 99m Tc-MIBI injection. Then blood was collected and necessary organs such as heart, lung, liver, spleen, salivary gland, stomach, kidney, muscle, bone, and tumor were removed, weighed and their radioactivity was counted by a gamma counter. 99m Tc-MIBI uptake values were calculated as a percentage of injected doses per gram of tissue (%ID/g) except for intestine (%ID).

2.4. Statistical analysis

Data were analyzed using Excel and Graph Pad Prism 6 software (Graph Pad, La Jolla, CA, USA) and statistical analysis was done by ANOVA and independent-samples T-test.

Ethics Statement

The authors confirm that all experiments comply with the ARRIVE guidelines and were carried out in accordance with the U.K. Animals (Scientific Procedures) Act, 1986 and associated guidelines, EU Directive 2010/63/EU for animal experiments, or the National Institutes of Health guide for the care and use of Laboratory animals (NIH Publications No. 8023, revised 1978)].

Also, ethical aspect of the research such as animal keeping and the minimum number of nude mice that needed for valid statistical analysis approved by the Research Ethics Guidelines of Mazandaran University of Medical Sciences.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper

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