www.bjcancer.com

The tumour-suppressive function of *miR-1* and *miR-133a* targeting TAGLN2 in bladder cancer

H Yoshino¹, T Chiyomaru^{*,1}, H Enokida¹, K Kawakami¹, S Tatarano¹, K Nishiyama¹, N Nohata², N Seki² and M Nakagawa¹

¹Department of Urology, Graduate School of Medical and Dental Sciences, Kagoshima University, 8-35-1 Sakuragaoka, Kagoshima 890-8520, Japan and ²Department of Functional Genomics, Graduate School of Medicine, Chiba University, 1-8-1 Inohana, Chuo-ku, Chiba 260-8670, Japan

BACKGROUND: On the base of the microRNA (miRNA) expression signature of bladder cancer (BC), we found that miR-1 and miR-133a were significantly downregulated in BC. In this study, we focussed on the functional significance of miR-1 and miR-133a in BC cell lines and identified a molecular network of these miRNAs.

METHODS AND RESULTS: We investigated the miRNA expression signature of BC clinical specimens and identified several downregulated miRNAs (*miR-133a*, *miR-204*, *miR-1*, *miR-139-5p*, and *miR-370*). *MiR-1* and *miR-133a* showed potential role of tumour suppressors by functional analyses of BC cells such as cell proliferation, apoptosis, migration, and invasion assays. Molecular target searches of these miRNAs showed that *transgelin 2* (*TAGLN2*) was directly regulated by both *miR-1* and *miR-133a*. Silencing of TAGLN2 study demonstrated significant inhibitions of cell proliferation and increase of apoptosis in BC cell lines. The immunohistochemistry showed a positive correlation between TAGLN2 expression and tumour grade in clinical BC specimens.

CONCLUSIONS: The downregulation of *miR-1* and *miR-133a* was a frequent event in BC, and these miRNAs were recognised as tumour suppressive. *TAGLN2* may be a target of both miRNAs and had a potential oncogenic function. Therefore, novel molecular networks provided by miRNAs may provide new insights into the underlying molecular mechanisms of BC.

British Journal of Cancer (2011) **104**, 808–818. doi:10.1038/bjc.2011.23 www.bjcancer.com Published online 8 February 2011

© 2011 Cancer Research UK

Keywords: TAGLN2; microRNA; miR-1; miR-133a; bladder cancer

Bladder cancer (BC) is the fourth most common tumour diagnosed and the second most common cause of death in patients with genitourinary tract malignancies worldwide (Parkin *et al*, 2005; Jemal *et al*, 2010). In Japan, the age-standardised mortality rate of BC has remained relatively stable in men but has increased slightly since 1993 in women (Qiu *et al*, 2009). There have been significant advances in treatment, including surgical techniques and adjuvant chemotherapy; however, BC continues to be a common disease with high mortality (Shirodkar and Lokeshwar, 2009). Therefore, new treatment modalities based on novel molecular networks in BC are desired.

MicroRNAs (miRNAs) are a class of small non-coding RNA molecules of 20-22 nucleotides that have a critical role in a variety of biological processes including development, differentiation, apoptosis, and cell proliferation. They regulate gene expression through translational repression and mRNA degradation. Although their biological functions remain largely unknown, recent studies suggest that miRNAs contribute to the development of various types of cancer (Ryan *et al*, 2010). A growing body of evidence indicates that miRNAs are aberrantly expressed in many human cancers, and they may function as oncogenes and tumour

E-mail: chiyo@m2.kufm.kagoshima-u.ac.jp

suppressors. Upregulated miRNAs could function as oncogenes by negatively regulating tumour-suppressor genes, whereas downregulated miRNAs could act as tumour suppressors, inhibiting cancers by regulating oncogenes (Lu *et al*, 2005; Calin and Croce, 2006; Ambs *et al*, 2008; Childs *et al*, 2009). Bioinformatic predictions indicate that miRNAs regulate > 30% of the protein coding genes (Filipowicz *et al*, 2008). It is estimated that ~ 1000 miRNAs exist in the vertebrate genome. So far, 1048 human miRNAs are registered at miRBase release 16.0 (http://microrna. sanger.ac.uk/).

MiR-1 and miR-133a were among the top five downregulated miRNAs in our screening. MiR-1 and miR-133a are muscleenriched miRNAs that inhibit proliferation of progenitor cells and promote myogenesis by targeting histone deacetylase (HDAC4) and serum response factor (SRF), respectively (Chen et al, 2006). Recently, miR-1 and miR-133a have been reported to be downregulated in various cancers and to have tumour-suppressive functions (Datta et al, 2008; Nasser et al, 2008; Yan et al, 2009; Uchida et al, 2010; Chiyomaru et al, 2010a). We have reported that miR-133a directly regulated oncogenic FSCN1, LASP1, and GSTP1 genes in human BC (Uchida et al, 2010; Chiyomaru et al, 2010a, b). We recognised that miR-1 and miR-133a are located on the same chromosomal loci (18q11.2 and 20q13.33) (Chiyomaru et al, 2010b). Like this, several miRNAs are located on the same chromosomal region, in a so-called 'cluster'. Recent studies demonstrated that miR-17-92 cluster and miR-221/222 cluster, which harbour oncogenic miRNAs, had important roles in several

^{*}Correspondence: Dr T Chiyomaru;

Received 22 October 2010; revised 6 January 2011; accepted 11 January 2011; published online 8 February 2011

human malignancies (Zhang *et al*, 2009; Di Leva *et al*, 2010). However, the functional roles of the target genes regulated by these miRNA clusters have not been thoroughly investigated.

The aim of this study was to investigate whether miR-1 has tumour-suppressive function in BC cell lines and to find common target genes of miR-1 and miR-133a. We focussed on transgelin 2 (TAGLN2), which was one of the most downregulated genes in oligo-microarray studies using an miR-1 transfectant and is a putative target gene of miR-1 and miR-133a as suggested by webbased software. The functional role of TAGLN2 has not yet been determined. Previous studies have reported that high expressions of TAGLN2 were observed in various human malignancies (Chen et al, 2005; Shi et al, 2005; Huang et al, 2006; Rho et al, 2009; Zhang et al, 2010). We hypothesised that miR-1 and miR-133a directly regulate TAGLN2, which may have an oncogenic function in BC. We performed a luciferase reporter assay to determine whether TAGLN2 mRNA is actually targeted by miR-1 and miR-133a and a loss-of-function study using BC cell lines to investigate the functional roles of TAGLN2 in BC.

MATERIALS AND METHODS

Clinical specimens and cell culture

Tissue specimens for miRNA screening using a low-density array (LDA) were from 11 BC patients who had undergone cystectomy or transurethral resection of bladder tumours (TUR-BT) at Kagoshima University Hospital between 2007 and 2008. The tissue specimens for quantitative RT - PCR were from 23 BC patients who had received cystectomy or TUR-BT at Kagoshima University Hospital between 2006 and 2009. The patients' backgrounds and clinicopathological characteristics are summarised in Supplementary Table 1. Normal bladder epitheliums (NBEs) were derived from patients with noncancerous disease. These specimens were staged according to the American Joint Committee on Cancer/ Union Internationale Contre le Cancer tumour-node-metastasis classification and histologically graded (Sobin and Wittekind, 2002). Our study was approved by the Bioethics Committee of Kagoshima University; written previous informed consent and approval were given by these patients.

We used two human BC cell lines: BOY, which was established in our laboratory from an Asian male patient aged 66 years who was diagnosed with stage III BC with lung metastasis; and T24, which was invasive and obtained from the American Type Culture Collection. These cell lines were maintained in a minimum essential medium (MEM) supplemented with 10% fetal bovine serum in a humidified atmosphere of 5% CO₂ and 95% air at 37 °C.

Tissue collection and RNA extraction

Tissues were immersed in RNAlater (QIAGEN, Valencia, CA, USA) and stored at -20 °C until the RNA extraction. Total RNA including miRNA was extracted using the mirVana miRNA isolation kit (Ambion, Austin, TX, USA) following the manufacturer's protocol. The integrity of the RNA was checked with RNA 6000 Nano Assay Kit and a 2100 Bioanalyzer (Agilent Technologies, Santa Clara, CA, USA).

MiRNA expression signatures and data normalisation

MicroRNA expression patterns were evaluated using the TaqMan LDA Human microRNA Panel v2.0 (Applied Biosystems, Foster City, CA, USA). The assay was composed of two steps: generation of cDNA by reverse transcription and a TaqMan real-time PCR assay. The description of real-time PCR and the list of human miRNAs can be found on the company's website (http://www. appliedbiosystems.com). An analysis of relative miRNA expression data was performed using GeneSpring GX version 7.3.1 software



(Agilent Technologies) according to the manufacturer's instructions. A cutoff *P*-value of < 0.05 was used to narrow down the candidates after global normalisation of the raw data. After global normalisation, additional normalisation was done by *RNU48* and *MammU6*.

Quantitative real-time RT-PCR

TaqMan probes and primers for TAGLN2 (P/N: Hs00761239_m1; Applied Biosystems) were assay-on-demand gene expression products. All reactions were performed in duplicate and a negative control lacking cDNA was included. We followed the manufacturer's protocol for PCR conditions. Stem-loop RT – PCR (TaqMan MicroRNA Assays; P/N: PM10617 for *miR-1*, and PM10413 for *miR-133a*; Applied Biosystems) was used to quantitate miRNAs according to the earlier published conditions (Ichimi *et al*, 2009). To normalise the data for quantification of *TAGLN2* mRNA and the miRNAs, we used *human GUSB* (P/N: Hs9999908_m1; Applied Biosystems) and *RNU48* (P/N: 001006; Applied Biosystems), respectively, and the $\Delta\Delta$ Ct method was employed to calculate the fold change. As a control RNA, we used Premium Total RNA from normal human bladder (AM7990; Applied Biosystems).

Mature miRNA and siRNA transfection

As described elsewhere (Ichimi *et al*, 2009), the BC cell lines were transfected with Lipofectamine RNAiMAX transfection reagent (Invitrogen, Carlsbad, CA, USA) and Opti-MEM (Invitrogen) with 10 nM of mature miRNA molecules. Pre-miR and negative-control miRNA (Applied Biosystems) were used in the gain-of-function experiments, whereas *TAGLN2* siRNA (Cat no. HSS144745 and HSS144746; Invitrogen) and negative-control siRNA (D-001810-10; Thermo Fisher Scientific, Waltham, MA, USA) were used in the loss-of-function experiments. Cells were seeded in a 10-cm dish for protein extraction (8×10^5 per dish), in a six-well plate for apoptosis (10×10^4 per well) and for wound healing assay (20×10^4 per well), in a 24-well plate for mRNA extraction and luciferase reporter assay (5×10^4 per well), and in a 96-well plate for XTT assay (3000 per well).

Cell proliferation, migration, and invasion assays

Cell proliferation was determined using an XTT assay (Roche Applied Sciences, Tokyo, Japan) performed according to the manufacturer's instructions. Cell migration activity was evaluated by wound healing assay. Cells were plated in six-well dishes, and the cell monolayer was scraped using a P-20 micropipette tip. The initial gap length (0h) and the residual gap length 24 h after wounding were calculated from photomicrographs. A cell invasion assay was carried out using modified Boyden Chambers consisting of transwell-precoated matrigel membrane filter inserts with 8-mm pores in 24-well tissue culture plates (BD Biosciences, Bedfold, MA, USA). Minimum essential medium containing 10% fetal bovine serum in the lower chamber served as the chemoattractant as described previously (Chiyomaru *et al*, 2010a). All experiments were performed in triplicate.

Apoptosis analysis

The BC cell lines transiently transfected with transfection reagent only (mock), si-control, si-TAGLN2, miR-control, *miR-1*, or *miR-133a* in six-well tissue culture plates as described earlier were harvested 72 h after transfection by trypsinisation and washed in cold PBS. Double staining with FITC-Annexin V and propidium iodide (PI) was carried out using the FITC Annexin V Apoptosis Detection Kit (BD Biosciences) according to the manufacturer's recommendations and immediately analysed within an hour by flow cytometry (FACScan; BD Biosciences). Cells were discriminated into viable cells, dead cells, early apoptotic cells, and apoptotic cells by the CellQuest software (BD Biosciences), and then the percentages of early apoptotic and apoptotic cells from each experiment were compared. Experiments were done in triplicate.

Target gene search for miR-1

Oligo-microarray Human 44K (Agilent) was used for expression profiling in *miR-1*-transfected BC cell lines (BOY and T24) in comparison with miR-negative control transfectant, as previously described (Chiyomaru *et al*, 2010a). Briefly, hybridisation and washing steps were performed in accordance with the manufacturer's instructions. The arrays were scanned using a Packard GSI Lumonics ScanArray 4000 (PerkinElmer, Boston, MA, USA). The data obtained were analysed with DNASIS array software (Hitachi Software Engineering, Tokyo, Japan), which converted the signal intensity for each spot into text format. The Log2 ratios of the median subtracted background intensity were analysed. Data from each microarray study were normalised by global normalisation.

The predicted target genes and their miRNA binding site seed regions were investigated using TargetScan (release 5.1, http:// www.targetscan.org/). The sequences of the predicted mature miRNAs were confirmed using miRBase (release 16.0, September 2010; http://microrna.sanger.ac.uk/).

Western blots

Molecular Diagnostics

After 3 days of transfection, protein lysate $(20 \ \mu g)$ was separated by NuPAGE on 4–12% bis-tris gel (Invitrogen) and transferred into a polyvinylidene fluoride membrane. Immunoblotting was done with diluted (1:150) polyclonal TAGLN2 antibody (HPA001925; Sigma-Aldrich, St Louis, MO, USA) and GAPDH antibody (MAB374; Chemicon, Temecula, CA, USA). The membrane was washed and then incubated with goat anti-rabbit IgG (H + L)-HRP conjugate (Bio-Rad, Hercules, CA, USA). Specific complexes were visualised with an echochemiluminescence (ECL) detection system (GE Healthcare, Little Chalfont, UK), and the expression level of these genes was evaluated using ImageJ software (ver. 1.43; http:// rsbweb.nih.gov/ij/index.html).

Plasmid construction and dual-luciferase reporter assay

The miRNA target sequences were inserted between the *XhoI*-*PmeI* restriction sites in the 3'UTR of the *hRluc* gene in the psiCHECK-2 vector (C8021; Promega, Madison, WI, USA). Primer sequences for full-length 3'UTR of *TAGLN2* mRNA (5'-ATCGCTC GAGACAGATGGGCACCAACCGCG-3' and 5'-CTCTAGGTTTAAA CATCTTCCTCAAGCCCCAGAC-3') were designed. Specific miRNA target sequences (40 bp length, Supplementary Table 2) for *miR-1* and *miR-133a* were artificially synthesised and inserted in the vector. Following that, T24 cells were transfected with 15 ng of vector, 10 nM of miRNA, and 1 μ l of Lipofectamine 2000 (Invitrogen) in 100 μ l of Opti-MEM (Invitrogen). The activities of firefly and *Renilla* luciferases in cell lysates were determined with a dual-luciferase assay system (E1910; Promega). Normalised data were calculated as the quotient of *Renilla*/firefly luciferase activities.

Immunohistochemistry

A tissue microarray of 47 urothelial carcinomas and 8 normal bladders was obtained from US Biomax, Inc. (BL208; Rockville, MD, USA). Detailed information on all tumour specimens can be found at http://www.biomax.us/index.php. Immunostaining was done on the tissue microarray following the manufacturer's protocol. The primary rabbit polyclonal antibodies against TAGLN2 (Sigma-Aldrich) were diluted by 1:25. The slides were

treated with biotinylated anti-rabbit IgG (H+L) made in goat (Vector Laboratories, Burlingame, CA, USA). Diaminobenzidinehydrogen peroxide (Sigma-Aldrich) was the chromogen, and the counterstaining was done with 0.5% haematoxylin. The positivity of endothelia served as an inner positive control. Immunostaining was evaluated according to a scoring method as described previously (Zhang et al, 2010). Each case was scored on the basis of the intensity and area of staining. The intensity of staining was graded on the following scale: 0, no staining; 1+, mild staining; 2+, moderate staining; and 3+, intense staining. The area of staining was evaluated as follows: 0, no staining of cells in any microscopic fields; 1+, <30% of cells stained positive; 2+, 30-60% stained positive; and 3+, >60% stained positive. A combined staining score (intensity + extension) of ≤ 2 was low expression, a score between 3 and 4 was moderate expression, and a score between 5 and 6 was high expression.

Statistical analysis

The relationship between two variables and the numerical values obtained by real-time RT-PCR was analysed using the Mann–Whitney *U*-test. The relationship among three variables and the numerical values was analysed using the Bonferroni-adjusted Mann–Whitney *U*-test. The χ^2 -test was used to evaluate the relationships between the immunohistochemical score of TAGLN2 expression and clinicopathological factors. Expert StatView analysis software (version 4; SAS Institute Inc., Cary, NC, USA) was used in both cases. In the comparison among three variables, a nonadjusted statistical level of significance of *P*<0.05 corresponds to a Bonferroni-adjusted level of *P*<0.0167.

RESULTS

Identification of downregulated miRNAs in BC by miRNA expression signatures

We evaluated mature miRNA expression levels of 11 BC and 5 NBE specimens by miRNA expression signatures. A total of 41 and 19 downregulated miRNAs were selected after the normalisation using *RNU48* and *MammU6*, respectively (Supplementary Tables 3 and 4). The 17 miRNAs were commonly downregulated with *RNU48* and *MammU6* normalisation (Table 1). The top five miRNAs (*miR-133a*, *miR-204*, *miR-1*, *miR-139-5p*, and *miR-370*) in the list were subjected to further study.

 Table I
 Downregulated microRNAs in bladder cancer (BC)

microRNA	P-value	Normal	Cancer	Fold change Cancer/normal
hsa-miR-133a hsa-miR-204 hsa-miR-1 hsa-miR-139-5p hsa-miR-370 hsa-miR-133b hsa-miR-574-3p hsa-miR-376c	3.50E-02 4.50E-02 9.40E-03 1.71E-04 2.37E-02 3.60E-02 6.11E-04 2.57E-03	1.17E-01 4.51E-03 1.52E-03 8.31E-02 8.95E-04 1.78E-03 3.25E-01 1.44E-02	2.48E - 03 2.08E - 04 7.16E - 05 4.65E - 03 8.26E - 05 1.26E - 04 3.63E - 02 1.91E - 03	2.12E-02 4.61E-02 4.72E-02 5.60E-02 9.23E-02 7.06E-02 1.12E-01 1.32E-01
hsa-miR-214 hsa-miR-214 hsa-miR-140-3p hsa-miR-134 hsa-miR-134 hsa-miR-218 hsa-miR-196b hsa-miR-186 hsa-miR-320	2.62E-03 1.34E-03 6.29E-03 7.02E-04 1.43E-03 1.83E-03 6.14E-03 8.04E-04 3.81E-02	5.08E -02 4.70E -03 1.73E -02 3.54E -03 4.58E -03 1.66E -02 2.76E -02 8.68E -02 2.34E -01	7.29E -03 7.16E -04 2.96E -03 6.69E -04 1.05E -03 4.06E -03 7.56E -03 3.10E -02 9.70E -02	1.32E-01 1.43E-01 1.52E-01 1.72E-01 1.89E-01 2.29E-01 2.44E-01 2.74E-01 3.57E-01 4.14E-01

Detection of miR-133a, miR-204, miR-1, miR-139-5p, and miR-370 expression by quantitative stem-loop RT-PCR

Quantitative stem-loop RT – PCR demonstrated that the expression levels of the top five miRNAs (*miR-133a*, *miR-204*, *miR-1*, *miR-139-5p*, and *miR-370*) were significantly lower in 23 BC specimens in comparison with 10 NBEs (P < 0.005; Figure 1). These miRNA expressions were significantly lower in BC cell lines (BOY and T24) in comparison with the normal human bladder RNA (P < 0.0001; Figure 2A).

Effect of the downregulated miRNA transfection on cell proliferation, migration activity, and invasion in BC cell lines

To investigate the functional role of the five selected miRNAs, we performed gain-of-function studies using the miRNA transfectants. The XTT assay showed significant cell proliferation inhibitions in miR-1 and miR-133a transfectants in comparison with the miR-control transfectants (percentage of cell viability for BOY: 59.9 ± 1.4 , 64.1 ± 1.4 , and 100.0 ± 1.2 , respectively, P < 0.0001; and for T24: 43.3 ± 0.6 , 62.4 ± 0.7 , and 100.0 ± 0.7 , respectively. P < 0.0001), but no significant inhibition was observed in other miRNA transfectants except the miR-204-transfected BOY cell line (Figure 2B). The wound healing assay showed significant cell migration inhibitions in miR-1 and miR-133a transfectants in comparison with the controls (percentage of wound closure for BOY; 41.4 ± 2.5 , 71.3 ± 4.4 , and 100.0 ± 3.2 , respectively, P < 0.0001; and for T24: 26.0 ± 2.4, 65.2 ± 3.9, and 100.0 ± 3.2, respectively, P < 0.0001), but no significant inhibition was observed in other miRNA transfectants except miR-370-transfected BOY cell line (Figure 2C). Matrigel invasion assay demonstrated that invading cell numbers were significantly decreased in both miR-1- and miR-133a-transfected BOY cell lines and miR-1-transfected T24 cell line in comparison with the controls (percentage of cell invasion for BOY: 23.4 ± 3.0 , 57.3 ± 8.9 , and 100.0 ± 10.0 , respectively, P < 0.0001; and for T24: 43.4 ± 4.8, 96.5 ± 4.4, and 100.0 ± 3.8 , respectively, P < 0.0001; the miR-1 transfectant vs control), but no significant inhibition was observed in other miRNA transfectants except the miR-370-transfected BOY cell line (Figure 2D). To evaluate the simultaneous effect of miR-1 and miR-133a, we evaluated another XTT assay by using miR-1 and miR-133a co-transfected BOY and T24 cell lines. We found similar effects of cell viability inhibition by the transfectants in comparison with that of each miR-1 or miR-133a transfectants (Supplementary Figure 1). Because miR-1 and miR-133a transfection had a

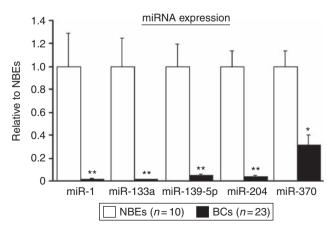


Figure I MicroRNA expression levels in clinical specimens. Real-time RT–PCR showed that miRNA expression in BCs was lower than that of NBEs. *P < 0.005; **P < 0.0001.

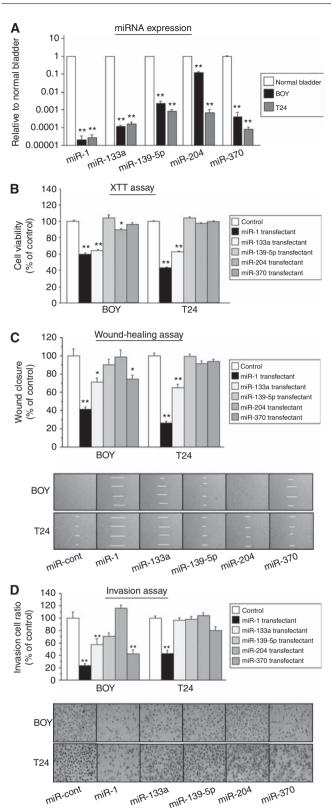


Figure 2 (**A**) MicroRNA expression levels in BC cell lines. Real-time RT–PCR showed that miRNA expression in BC cell lines (BOY and T24) was lower than that of the normal human bladder RNA. (**B**–**D**) Effect of cell viabilities in miRNA (*miR-1, miR-133a, miR-139-5p, miR-204, and miR-370*) transfectants: (**B**) cell proliferation determined by the XTT assay; (**C**) cell migration activity determined by the wound healing assay; and (**D**) cell invasion activity determined by the matrigel invasion assay in BOY and T24 cell lines transfected with the miRNAs. **P*<0.005; ***P*<0.0001.

811



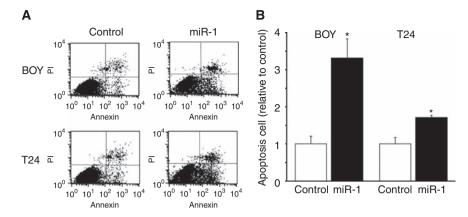


Figure 3 (A) Apoptosis assay determined by flow cytometry. Early apoptotic cells can be seen in the bottom right quadrant and late are in the upper right. (B) The normalised ratio of the apoptosis assay is shown in the histogram. *P < 0.05.

Table 2	Downregulated	genes i	n <i>miR-1</i>	transfectants
---------	---------------	---------	----------------	---------------

		Fold change (log 2 ratio)				
Entrez gene ID	Symbol	BOY	Т24	Average	Description	Target sites
23446	SLC44A I	-3.86	-3.69	-3.77	Solute carrier family 44, member 1	+
4902	CIQTNF5	-3.92	-3.48	-3.70	Clq and tumour necrosis factor related protein 5	_
8407	TAGLN2	-3.67	-3.33	-3.50	Transgelin 2	+
27230	SERP I	-3.14	-3.45	-3.30	Stress-associated endoplasmic reticulum protein 1	+
359845	FAMIOIB	-3.35	-2.87	-3.11	Family with sequence similarity 101, member B	+
5756	TWFI	-3.03	-2.84	-2.93	Twinfilin, actin-binding protein, homologue 1 (Drosophila)	+
79794	C12orf49	-3.04	-2.69	-2.86	Chromosome 12 open reading frame 49	+
2697	GIAI	-2.17	-3.07	-2.62	Gap junction protein, α 1, 43 kDa	+
4860	PNP	-2.65	-2.54	-2.60	Purine nucleoside phosphorylase	+
57580	PREXI	-2.07	-2.44	-2.26	Phosphatidylinositol-3,4,5-trisphosphate-dependent Rac exchange factor I	+
8683	SFRS9	-2.33	-2.14	-2.24	Splicing factor, arginine/serine-rich 9	+
23531	MMD	-2.37	-2.08	-2.22	Monocyte to macrophage differentiation-associated	+
2539	G6PD	-2.3 I	-2.06	-2.18	Glucose-6-phosphate dehydrogenase	+
84912	SLC35B4	-2.31	-2.05	-2.18	Solute carrier family 35, member B4	+
7117	TMSL3	-2.06	-2.30	-2.18	Thymosin-like 3	+
10487	CAPI	-2.25	-2.08	-2.17	CÁP, adenylate cyclase-associated protein 1 (yeast)	+
5757	PTMA	-2.25	-2.04	-2.15	Prothymosin, α	+
378	ARF4	-2.12	-2.14	-2.13	ADP-ribosylation factor 4	+

significantly stronger tumour-suppressive effect among the five miRNAs, they were subjected to further analyses as the leading candidates for tumour-suppressive miRNAs in BC.

MiR-1 induced apoptosis in BC cell lines

Cell apoptosis in *miR-1* transfectants was detected using flow cytometry. As shown by representative images in Figure 3A, the apoptotic cell fractions (early apoptotic and apoptotic; lower right and upper right, respectively) were greater in miR-1 transfectants than in miR-control transfectants (BOY and T24). As shown in Figure 3B, miR-1 transfection induced apoptosis in BC cell lines (BOY, 3.31 ± 0.51 and 1.00 ± 0.20 ; T24, 1.70 ± 0.08 and 1.00 ± 0.17 , respectively, P < 0.05). In terms of miR-133a, we previously demonstrated that miR-133a transfection also induced apoptosis in the same BC cell lines (Uchida et al, 2010).

Gene expression profile identifying downregulated genes in miR-1 transfectant

To gain further insight into which genes are affected by miR-1 transfection, we performed gene expression analysis with miR-1 transfectants and the controls (BOY and T24 cells). A total of 18 genes were downregulated less than -4.0-fold in miR-1 transfectants compared with the controls (Table 2). The TargetScan program showed that 17 genes had putative target sites of miR-1 in their 3'UTR (Table 2). Previously, we had performed gene expression analysis with miR-133a transfectants (Uchida et al, 2010), and the TAGLN2 gene was commonly listed in the top 10 downregulated genes in current (miR-1) and former (miR-133a) signatures. Therefore, we focussed on the TAGLN2 gene as a promising candidate targeted by both miR-1 and miR-133a. Entries from the former and the current microarray data were approved by the Gene Expression Omnibus (GEO) and were assigned GEO accession numbers GSE19717 and GSE24782.

TAGLN2 expression in BC cell lines and TAGLN2 silencing by miR-1 and miR-133a transfection

The quantitative real-time RT-PCR analysis showed that the mRNA expression of TAGLN2 in the BOY and T24 cell lines was more than two-fold higher than that in the normal human bladder RNA (Figure 4A). To examine the functional role of TAGLN2, we performed gain-of-function studies using miR-1 and miR-133a transfectant (BOY and T24) cell lines, and the mRNA and protein expression levels of TAGLN2 were markedly

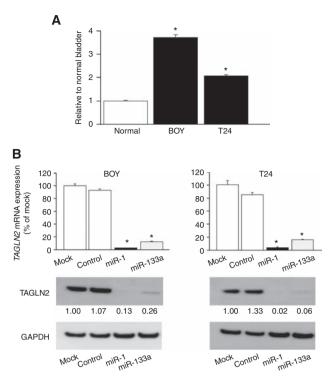


Figure 4 (A) The mRNA expression of *TAGLN2* in the BOY and T24 cell lines and the normal human bladder RNA. The mRNA expression of *TAGLN2* was more than two-fold in BC cell lines compared with the normal human bladder RNA. (B, upper) *TAGLN2* mRNA expression after 24 h of transfection with 10 nM of the miRNA (*miR-1* and *miR-133a*). (B, lower) TAGLN2 protein expression after 72 h of transfection of miRNA. GAPDH was used as a loading control. The protein expression level of TAGLN2 was also repressed in the transfectants.

813

downregulated in the transfectants in comparison with the controls (Figure 4B).

TAGLN2 as a target of post-transcriptional repression by miR-1 and miR-133a

We performed a luciferase reporter assay to determine whether TAGLN2 mRNA has a target site for miR-1 and miR-133a. We used a vector encoding full-length 3'UTR of TAGLN2 mRNA and found that the luminescence intensity was significantly reduced in the miR-1 and miR-133a transfectant (Figure 5A). Furthermore, the luminescence intensity significantly decreased at the three sites targeted by miR-1 (position 71-77, 185-191, and 348-354) and two sites targeted by miR-133a (position 214-220 and 242-248) (Figure 5B).

Effect of TAGLN2 knockdown on cell proliferation, invasion, and migration activity in BC cell lines

To examine the functional role of TAGLN2, we performed loss-offunction studies using two different si-TAGLN2 transfections into BOY and T24 cell lines. The mRNA and protein expression of TAGLN2 was markedly repressed by these si-TAGLN2 transfections (Figure 6A). The XTT assay revealed significant cell proliferation inhibition in the two si-TAGLN2 transfectants in comparison with that in the untransfectants (mock) and the si-control transfectants (percentage of cell viability for BOY: 69.0 ± 1.3 , 49.7 ± 2.0 , 100.0 ± 2.6 , and 104.6 ± 2.9 , respectively, P < 0.0001; and for T24: 77.4 ± 1.4, 63.6 ± 1.4, 100.0 ± 1.2, and 100.5 \pm 1.6, respectively, P<0.0001; Figure 6B). The wound healing assay also demonstrated significant cell migration inhibitions in the two si-TAGLN2 transfectants compared with the counterparts (percentage of wound closure for BOY: 36.0 ± 7.3 , 15.8 ± 11.4 , 100.0 ± 3.0 , and 98.2 ± 2.6 , respectively, P < 0.0001; and for T24: 79.3 ± 2.6 , 43.6 ± 3.2 , 100.0 ± 2.3 , and 104.3 ± 2.3 , respectively,

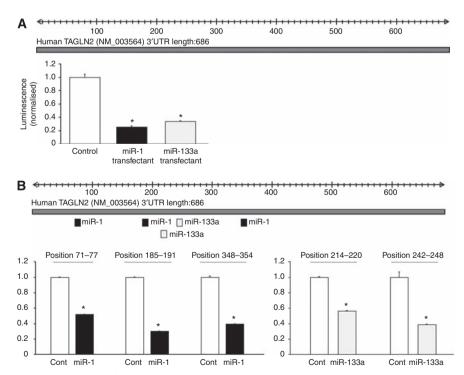


Figure 5 *MiR-1* and *miR-133a* binding sites in 3'-UTR of *TAGLN2* mRNA. (**A**) A luciferase reporter assay using the vector encoding full-length 3'-UTR of *TAGLN2* mRNA. The *Renilla* luciferase values were normalised by firefly luciferase values. (**B**) Luciferase reporter assays using the vectors encoding putative target sites of TAGLN2 3'-UTR: three target sites for *miR-1* and two sites for *miR-133a*.

814

P < 0.0001; Figure 6C). The matrigel invasion assay demonstrated that the number of invading cells was significantly decreased in the two si-TAGLN2 transfectants compared with the counterparts (percentage of cell invasion for BOY: 49.2 ± 3.3 , 6.2 ± 2.7 , 100.0 ± 12.8 , and 97.7 ± 10.7 , respectively, P < 0.0005; and for T24: 45.7 ± 4.0 , 53.2 ± 5.3 , 100.0 ± 6.0 , and 108.3 ± 7.6 , respectively, P < 0.0001; Figure 6D).

TAGLN2 knockdown-induced apoptosis in BC cell lines

The apoptotic cell fractions were greater in the two si-TAGLN2 transfectants than those in the mock and si-control transfectant at 72 h after transfection (relative to mock; BOY: 2.34 ± 0.04 ,

2.84 \pm 0.05, 1.00 \pm 0.15, and 1.00 \pm 0.15, respectively, *P*<0.0001; T24: 1.93 \pm 0.09, 2.70 \pm 0.12, 1.00 \pm 0.00, and 1.18 \pm 0.07, respectively, *P*<0.0001; Figure 6E).

Immunohistochemistry of TAGLN2 in tissue microarray

Figure 7 shows representative results of immmunohistochemical staining of TAGLN2. The TAGLN2 was strongly expressed in several tumour lesions: A (Grade 1, T2bN0M0), B (Grade 2, T3N0M0), C (Grade 3, T2N0M0), and D (Grade 3, metastatic region), whereas no expression was observed in the normal tissue (E); the expression score of tumours was significantly higher than that of normal tissues (P = 0.0202). We found that there were

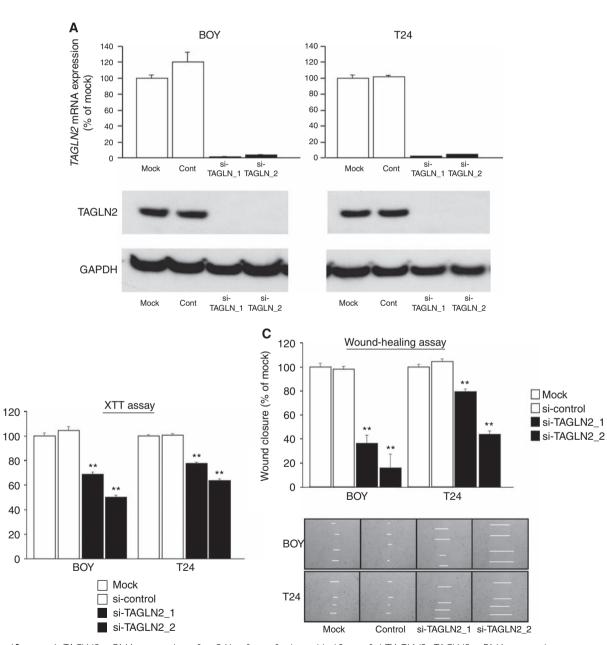


Figure 6 (A, upper) TAGLN2 mRNA expression after 24 h of transfection with 10 nM of si-TAGLN2. TAGLN2 mRNA expression was repressed in si-TAGLN2 transfectants. (A, lower) TAGLN2 protein expression after 72 h of transfection of the siRNAs. GAPDH was used a loading control. ($\mathbf{B}-\mathbf{D}$) TAGLN2-knockdown effects on BC cell viability by si-RNA. (B) Cell proliferation determined by the XTT assay; (C) cell migration activity determined by the wound healing assay; and (D) cell invasion activity determined by the matrigel invasion assay in BOY and T24 cell lines transfected with si-TAGLN2. *P < 0.0005; **P < 0.0001. (E) Apoptosis assay determined by flow cytometry. Early apoptotic cells can be seen in the bottom right quadrant and late are in the upper right. The normalised ratio of the apoptosis assay is shown in the histogram. **P < 0.0001.

В

Cell viability (% of mock)

miR-1 and miR-133a as tumour suppressors in BC H Yoshino et al

D Invasion assay 120 100 Invasion cell ratio 80 (% of mock) Mock si-control Г 60 si-TAGLN2 1 si-TAGLN2_2 40 20 0 BOY T24 BOY T24 si-TAGLN2_1 si-TAGLN2_2 Control Mock Apoptosis assay 3 relative to mock) Mock Apoptosis cell 2 Si-control si-TAGLN2_1 si-TAGLN2_2 1 0 BOY T24 Mock Control si-TAGLN2_1 si-TAGLN2 2 10⁴ 10 10⁴ 10 BOY a ₫ ₫ ٦ 10 100 100 10 10⁰ $10^1 \ 10^2 \ 10^3 \ 10^4$ 10⁰ $10^1 \ 10^2 \ 10^3 \ 10^4$ $10^0 \ 10^1 \ 10^2 \ 10^3 \ 10^4$ $10^1 \ 10^2 \ 10^3$ 10⁰ 10 Annexin Annexin Annexin Annexin 10 10 10 10⁴ T24 Ē ٦ ٦ ٦ 10 10 10² 10³ 10⁴ 10⁰ 10¹ 10² $10^1 \ 10^2 \ 10^3$ $10^1 \ 10^2 \ 10^3$ 10^{0} 10^{1} 10^{3} 10 10^{0} 10 10^{0} 10 Annexin Annexin Annexin Annexin

<u> Molecular Diagnostics</u>

Figure 6 Continued.

significant correlations between the expression scores and tumour grade/metastasis (P = 0.0148 and P = 0.0145, respectively; Table 3).

Ε

DISCUSSION

In this study, we identified 17 downregulated miRNAs that survived after three different normalisation methods. Among them, we tested miR-133a, miR-204, miR-1, miR-139-5p, and miR-370, which were the top five downregulated miRNAs. Investigators had demonstrated that miR-204 was a tumoursuppressive miRNA in head and neck tumour (Lee et al, 2010); miR-139-5p was downregulated in endometrial serous adenocarcinoma (Hiroki et al, 2010); and miR-370 expression was silenced by promoter hypermethylation in malignant human cholangiocytes (Meng et al, 2008). The expression levels of the five miRNAs were indeed downregulated in BC specimens as well as in BC cell lines. However, we found typical tumour-suppressive effects in miR-1- and miR-133a-transfected BC cell lines, and these miRNAs were plausible to be critical for BC development.

The miR-1 and miR-133 are cardiac and skeletal muscle-specific, bicistronic miRNAs transcriptionally controlled by some major regulators of muscle differentiation (Chen et al, 2006; Williams et al, 2009). These miRNAs have been reported to be 816

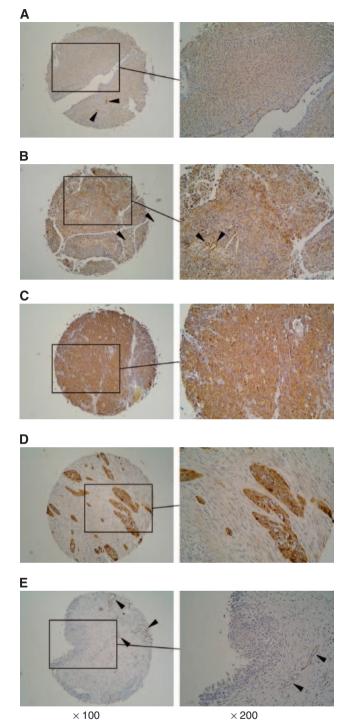


Figure 7 Immunohistochemical staining of TAGLN2 in tissue specimens.
(A) Positively stained tumour lesion (Grade 1, T2bN0M0); (B) positively stained tumour lesion (Grade 2, T3N0M0); (C) positively stained tumour lesion (Grade 3, T2N0M0); (D) positive staining in metastatic BC cells of metastatic region (Grade 3); (E) negative staining in normal urocustis tissue.
(A-D) Positive staining in tumour cells: weak (A), moderate (B), and strong (C, D). Some microvessel walls also stained positive for TAGLN2 (A, B, E arrowheads).

downregulated in human malignancies (Datta *et al*, 2008; Nasser *et al*, 2008; Yan *et al*, 2009; Uchida *et al*, 2010; Chiyomaru *et al*, 2010a). Ectopic expression of *miR-1* in HCC, lung cancer, prostate cancer, and rhabdomyosarcoma inhibited tumour cell growth (Ambs *et al*, 2008; Datta *et al*, 2008; Nasser *et al*, 2008; Yan *et al*, 200

Table 3	Relationships between TAGLN2 expression and clinicopatho-
logical fact	prs in tissue microarray

		TAGI			
Characteristics	n	Low (0-2)	Moderate (3 to 4)	High (5 to 6)	P-values
Normal and BC tissu Normal Cancer	<i>ie</i> 8 47	8 22	0 20	0 5	0.0202
Age at presentation >65 years ≼65 years	17 30	9 13	6 4	2 3	0.7499
Sex Male Female	38 9	17 5	18 2	3 2	0.2635
Histological grade G1+G2 G3	28 19	14 6	4 8	0 5	0.0148
Tumour status TI T2+T3+T4 Unknown	10 28 9	5 15	4 	l 2	0.9536
LN metastasis N0 N1 Unknown	40 6	50 0	7 	3 0	0.5195
Distant metastasis M0 M1	43 4	22 0	18 2	3 2	0.0145

Abbreviations: TAGLN2 = transgelin 2; BC = bladder cancer; LN = lymph node.

2009). However, the function of miR-1 in BC remains to be elucidated. MiR-1 had an important role in the regulation of apoptosis, which is involved in post-transcriptional repression of BCL2 in cardiomyocyte (Tang et al, 2009). In cancer research fields, ectopic miR-1 induced apoptosis through enhanced activation of caspases 3 and 7, cleavage of their substrate PARP-1, and depletion of antiapoptotic Mcl-1 in lung cancer cells (Nasser et al, 2008). Consistent with previous studies, re-expression of miR-1 in BC cell lines resulted in induction of apoptosis and reduced cell viability in this study. Regarding miR-133a, previous studies demonstrated that its expression was downregulated in pancreatic ductal adenocarcinoma, oesophageal squamous cell carcinoma, rhabdomyosarcoma, colorectal cancer, and squamous cell carcinoma of the tongue (Bandrés et al, 2006; Szafranska et al, 2007; Wong et al, 2008a, b; Arndt et al, 2009; Yan et al, 2009; Kano et al, 2010). MiR-133a inhibited proliferation and induced apoptosis and directly bound to pyruvate kinase type M2 expression, which are potent oncogenes (Wong et al, 2008b). However, there has been no study concerning genes targeted by both miR-1 and miR-133a, which are clustered on the same chromosomal loci in human malignancies. In BC, we have reported that miR-133a had a critical role in regulating oncogenic FSCN1, LASP1, and GSTP1 (Uchida et al, 2010; Chiyomaru et al, 2010a, b) and have demonstrated for the first time that LASP1 was the target of miR-1/miR-133a cluster (Chiyomaru et al, 2010b). In this study, the TAGLN2 gene was found to be another target of the miR-1/miR-133a cluster. It is plausible that the miR-1/miR-133a cluster may have important roles as tumour suppressors through downregulating these oncogenic genes. However, we found no simultaneous effect of cell viability inhibition by miR-1 and miR-133a co-transfection, suggesting that each miRNA may strongly repress same target

genes and no additional effect might be caused by the other miRNA. Further investigations are necessary to elucidate the simultaneous effect of the miR-1/miR-133a cluster. Our data suggest that retrieved expression of miR-1/miR-133a clusters could be a new therapeutic strategy for BC.

TAGLN2 contains a conserved actin-binding domain also known as the calponin (a calcium-binding protein) homologue domain. TAGLN and TAGLN3 are homologues of TAGLN2, and TAGLN3 is a novel neuron-specific protein and has not been reported in cancer (Ito et al, 2005). The protein encoded by the TAGLN gene is an actin-binding protein like TAGLN2, found in fibroblasts and smooth muscle. Overexpression of the TAGLN protein has been observed in carcinomas of the stomach, liver, and oesophagus (Rho et al, 2009). Although the function of TAGLN2 is unknown, there have been a number of reports concerning the relationship between TAGLN2 expression and tumourigenesis (Chen et al, 2005; Shi et al, 2005; Huang et al, 2006; Rho et al, 2009; Zhang et al, 2010). Overexpression of TAGLN2 was observed in HCC and pancreatic cancer (Chen et al, 2005; Shi et al, 2005; Huang et al, 2006). Zhang et al (2010) demonstrated that increased TAGLN2 expression was correlated with lymph node metastasis, distant metastasis, and the TNM classification in colorectal cancer. We also found a significant correlation of TAGLN2 expression with metastasis region and tumour grade despite of no correlation with tumour stage. Our tissue microarray included no Ta tumour and only four metastasis-positive patients. Studies for larger number of samples with balanced pathological background are

REFERENCES

- Ambs S, Prueitt RL, Yi M, Hudson RS, Howe TM, Petrocca F, Wallace TA, Liu CG, Volinia S, Calin GA, Yfantis HG, Stephens RM, Croce CM (2008) Genomic profiling of microRNA and messenger RNA reveals deregulated microRNA expression in prostate cancer. *Cancer Res* **68**: 6162–6170
- Arndt GM, Dossey L, Cullen LM, Lai A, Druker R, Eisbacher M, Zhang C, Tran N, Fan H, Retzlaff K, Bittner A, Raponi M (2009) Characterization of global microRNA expression reveals oncogenic potential of miR-145 in metastatic colorectal cancer. *BMC Cancer* **9:** 374
- Bandrés E, Cubedo E, Agirre X, Malumbres R, Zárate R, Ramirez N, Abajo A, Navarro A, Moreno I, Monzó M, García-Foncillas J (2006) Identification by real-time PCR of 13 mature microRNAs differentially expressed in colorectal cancer and non-tumoural tissues. *Mol Cancer* **5**: 29
- Calin GA, Croce CM (2006) MicroRNA signatures in human cancers. Nat Rev Cancer 6: 857-866
- Chen JF, Mandel EM, Thomson JM, Wu Q, Callis TE, Hammond SM, Conlon FL, Wang DZ (2006) The role of microRNA-1 and microRNA-133 in skeletal muscle proliferation and differentiation. *Nat Genet* **38**: 228 – 233
- Chen R, Yi EC, Donohoe S, Pan S, Eng J, Cooke K, Crispin DA, Lane Z, Goodlett DR, Bronner MP, Aebersold R, Brentnall TA (2005) Pancreatic cancer proteome: the proteins that underlie invasion, metastasis, and immunologic escape. *Gastroenterology* **129**: 1187–1197
- Childs G, Fazzari M, Kung G, Kawachi N, Brandwein-Gensler M, McLemore M, Chen Q, Burk RD, Smith RV, Prystowsky MB, Belbin TJ, Schlecht NF (2009) Low-level expression of microRNAs let-7d and miR-205 are prognostic markers of head and neck squamous cell carcinoma. Am J Pathol 174: 736-745
- Chiyomaru T, Enokida H, Kawakami K, Tatarano S, Uchida Y, Kawahara K, Nishiyama K, Seki N, Nakagawa M (2010a) Functional role of LASP1 in cell viability and its regulation by microRNAs in bladder cancer. *Urol Oncol* (in press)
- Chiyomaru T, Enokida H, Tatarano S, Kawahara K, Uchida Y, Nishiyama K, Fujimura L, Kikkawa N, Seki N, Nakagawa M (2010b) miR-145 and miR-133a function as tumour suppressors and directly regulate FSCN1 expression in bladder cancer. *Br J Cancer* **102**: 883-891
- Datta J, Kutay H, Nasser MW, Nuovo GJ, Wang B, Majumder S, Liu CG, Volinia S, Croce CM, Schmittgen TD, Ghoshal K, Jacob ST (2008) Methylation mediated silencing of microRNA-1 gene and its role in hepatocellular carcinogenesis. *Cancer Res* 68: 5049-5058
- Di Leva G, Gasparini P, Piovan C, Ngankeu A, Garofalo M, Taccioli C, Iorio MV, Li M, Volinia S, Alder H, Nakamura T, Nuovo G, Liu Y,



needed to elucidate the precise correlation between TAGLN2 expression and clinicopathological parameters. These studies have implied that TAGLN2 may represent a potential tumour biomarker. We found that cell viability was markedly decreased in TAGLN2 knockdown cells by inducing apoptosis, which suggests that this molecule may have oncogenic function. However, it is still unknown how TAGLN2, which is an actin-binding protein, interacts with apoptosis. Further examinations are necessary to elucidate this.

In summary, *miR-1/miR-133a* clusters may function as tumour suppressors through repression of oncogenic TAGLN2 in BC. *MiR-1/miR-133a* transfection and TAGLN2 knockdown resulted in decreased BC cell viability and induction of apoptosis. Novel molecular networks provided by miRNAs may provide new insights into the underlying molecular mechanisms of BC.

ACKNOWLEDGEMENTS

This research was partially supported by the Ministry of Education, Science, Sports and Culture Grants-in-Aid for Scientific Research (B and C), 20390427 and 20591861, 2008. We thank Ms Mutsumi Miyazaki for her excellent laboratory assistance.

Supplementary Information accompanies the paper on British Journal of Cancer website (http://www.nature.com/bjc)

Nephew KP, Croce CM (2010) MicroRNA cluster 221–222 and estrogen receptor alpha interactions in breast cancer. J Natl Cancer Inst 102: 706–721

- Filipowicz W, Bhattacharyya SN, Sonenberg N (2008) Mechanisms of post-transcriptional regulation by microRNAs: are the answers in sight? *Nat Rev Genet* 9: 102-114
- Hiroki E, Akahira J, Suzuki F, Nagase S, Ito K, Suzuki T, Sasano H, Yaegashi N (2010) Changes in microRNA expression levels correlate with clinicopathological features and prognoses in endometrial serous adenocarcinomas. *Cancer Sci* 101: 241–249
- Huang J, Sheng HH, Shen T, Hu YJ, Xiao HS, Zhang Q, Zhang QH, Han ZG (2006) Correlation between genomic DNA copy number alterations and transcriptional expression in hepatitis B virus associated hepatocellular carcinoma. *FEBS Lett* **580**: 3571–3581
- Ichimi T, Enokida H, Okuno Y, Kunimoto R, Chiyomaru T, Kawamoto K, Kawahara K, Toki K, Kawakami K, Nishiyama K, Tsujimoto G, Nakagawa M, Seki N (2009) Identification of novel microRNA targets based on microRNA signatures in bladder cancer. Int J Cancer 125: 345-352
- Ito M, Depaz I, Wilce P, Suzuki T, Niwa S, Matsumoto I (2005) Expression of human neuronal protein 22, a novel cytoskeleton-associated protein, was decreased in the anterior cingulate cortex of schizophrenia. *Neurosci Lett* 378: 125-130
- Jemal A, Siegel R, Xu J, Ward E (2010) Cancer statistics, 2010. CA Cancer J Clin **60:** 277-300
- Kano M, Seki N, Kikkawa N, Fujimura L, Hoshino I, Akutsu Y, Chiyomaru T, Enokida H, Nakagawa M, Matsubara H (2010) miR-145, miR-133a and miR-133b: tumor suppressive miRNAs target FSCN1 in esophageal squamous cell carcinoma. *Int J Cancer* 127: 2804–2814
- Lee Y, Yang X, Huang Y, Fan H, Zhang Q, Wu Y, Li J, Hasina R, Cheng C, Lingen MW, Gerstein MB, Weichselbaum RR, Xing HR, Lussier YA (2010) Network modeling identifies molecular functions targeted by miR-204 to suppress head and neck tumor metastasis. *PLoS Comput Biol* 6: e1000730
- Lu J, Getz G, Miska EA, Alvarez-Saavedra E, Lamb J, Peck D, Sweet-Cordero A, Ebert BL, Mak RH, Ferrando AA, Downing JR, Jacks T, Horvitz HR, Golub TR (2005) MicroRNA expression profiles classify human cancers. *Nature* 435: 834–838
- Meng F, Wehbe-Janek H, Henson R, Smith H, Patel T (2008) Epigenetic regulation of microRNA-370 by interleukin-6 in malignant human cholangiocytes. *Oncogene* 27: 378-386

- Nasser MW, Datta J, Nuovo G, Kutay H, Motiwala T, Majumder S, Wang B, Suster S, Jacob ST, Ghoshal K (2008) Down-regulation of micro-RNA-1 (miR-1) in lung cancer. Suppression of tumourigenic property of lung cancer cells and their sensitization to doxorubicin-induced apoptosis by miR-1. J Biol Chem 283: 33394-33405
- Parkin DM, Bray F, Ferlay J, Pisani P (2005) Global cancer statistics, 2002. CA Cancer J Clin 55: 74–108
- Qiu D, Katanoda K, Marugame T, Sobue T (2009) A Joinpoint regression analysis of long-term trends in cancer mortality in Japan (1958-2004). Int J Cancer Jan 124: 443-448
- Rho JH, Roehrl MH, Wang JY (2009) Tissue proteomics reveals differential and compartment-specific expression of the homologs transgelin and transgelin-2 in lung adenocarcinoma and its stroma. *J Proteome Res* 8: 5610-5618
- Ryan BM, Robles AI, Harris CC (2010) Genetic variation in microRNA networks: the implications for cancer research. *Nat Rev Cancer* 10: 389-402
- Shirodkar SP, Lokeshwar VB (2009) Potential new urinary markers in the early detection of bladder cancer. *Curr Opin Urol* 19: 488-493
- Shi YY, Wang HC, Yin YH, Sun WS, Li Y, Zhang CQ, Wang Y, Wang S, Chen WF (2005) Identification and analysis of tumour-associated antigens in hepatocellular carcinoma. Br J Cancer 92: 929-934
- Sobin LH, Wittekind C (2002) TNM Classification of Malignant Tumours. 6th edn. International Union Against Cancer (UICC). Wiley-Liss: New York. pp 199-202
- Szafranska AE, Davison TS, John J, Cannon T, Sipos B, Maghnouj A, Labourier E, Hahn SA (2007) MicroRNA expression alterations are

linked to tumorigenesis and non-neoplastic processes in pancreatic ductal adenocarcinoma. Oncogene 26: 4442-4452

- Tang Y, Zheng J, Sun Y, Wu Z, Liu Z, Huang G (2009) MicroRNA-1 regulates cardiomyocyte apoptosis by targeting Bcl-2. Int Heart J 50: 377-387
- Uchida Y, Chiyomaru T, Enokida H, Kawakami K, Tatarano S, Kawahara K, Nishiyama K, Seki N, Nakagawa M (2010) MiR-133a induces apoptosis through direct regulation of GSTP1 in bladder cancer cell lines. *Urol Oncol* (in press)
- Williams AH, Liu N, van Rooij E, Olson EN (2009) MicroRNA control of muscle development and disease. Curr Opin Cell Biol 21: 461-469
- Wong TS, Liu XB, Chung-Wai Ho A, Po-Wing Yuen A, Wai-Man Ng R, Ignace Wei W (2008a) Identification of pyruvate kinase type M2 as potential oncoprotein in squamous cell carcinoma of tongue through microRNA profiling. *Int J Cancer* **123**: 251–257
- Wong TS, Liu XB, Wong BY, Ng RW, Yuen AP, Wei WI (2008b) Mature miR-184 as potential oncogenic microRNA of squamous cell carcinoma of tongue. *Clin Cancer Res* 14: 2588-2592
- Yan D, Dong Xda E, Chen X, Wang L, Lu C, Wang J, Qu J, Tu L (2009) MicroRNA-1/206 targets c-Met and inhibits rhabdomyosarcoma development. J Biol Chem 284: 29596-29604
- Zhang Y, Ye Y, Shen D, Jiang K, Zhang H, Sun W, Zhang J, Xu F, Cui Z, Wang S (2010) Identification of transgelin-2 as a biomarker of colorectal cancer by laser capture microdissection and quantitative proteome analysis. *Cancer Sci* 101: 523-529
- Zhang ZW, An Y, Teng CB (2009) The roles of miR-17-92 cluster in mammal development and tumorigenesis. *Yi Chuan* **31:** 1094–1100

818