

# *Marsdenia tenacissima* Extract Affects the Proliferation, Apoptosis, and Migration of Oral Squamous Cell Carcinoma Cells Through hsa\_circular\_0003645/microRNA-335

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## Wang *et al.*: Mechanism of *Marsdenia tenacissima* Extract on Oral Squamous Cell Carcinoma

Numerous papers stated that *Marsdenia tenacissima* extract possessed tumor-suppression properties. Herein, we aimed to investigate the influence and underlying mechanism of *Marsdenia tenacissima* extract on oral squamous cell carcinoma. After being cultured, CAL-27 cells were treated with various doses of *Marsdenia tenacissima* extract. Proliferation, apoptosis, and migration were assessed using cell counting kit-8, clone formation, scratch, and flow cytometry assays. Western blot detected protein levels. Quantitative reverse transcription polymerase chain reaction method analyzed hsa\_circular\_0003645 and microRNA-335 expression. Their interaction was validated using dual-luciferase reporter gene experiment. 1.0 and 1.5 mg/ml *Marsdenia tenacissima* extract or si-hsa\_circular\_0003645 could suppress CAL-27 cell proliferation, migration, N-cadherin, and hsa\_circ\_0003645, whereas increase apoptosis, E-cadherin, and microRNA-335. Furthermore, the upregulation of hsa\_circular\_0003645 might abolish *Marsdenia tenacissima* extract exposure-mediated oral squamous cell carcinoma cell proliferation and migration inhibition and apoptosis promotion. Besides, hsa\_circular\_0003645 could target microRNA-335. *Marsdenia tenacissima* extract treatment might hinder oral squamous cell carcinoma progression *via* regulating hsa\_circular\_0003645 and microRNA-335.

**Key words:** *Marsdenia tenacissima* extract, oral squamous cell carcinoma, hsa\_circular\_0003645, microRNA-335, cell proliferation, apoptosis, migration

As a prevalent head and neck malignant disease worldwide, Oral Squamous Cell Carcinoma (OSCC) is characterized by local invasiveness, high recurrence, and ease of metastasis, with approximately 58 450 newly diagnosed cases and 12 230 deaths in the United States<sup>[1]</sup>. Nevertheless, the pathogenesis of OSCC has not yet been clarified. Although significant advances in surgery, radiotherapy, and chemotherapy have recently acquired some benefits, most sufferers with advanced or metastatic OSCC are responsible for the poor prognosis<sup>[2,3]</sup>. Accordingly, exploring the mechanisms underlying the OSCC process is worthy of the development of new therapeutic targets. A Traditional Chinese Medicine (TCM) and Dai herbal medicine, *Marsdenia tenacissima* (*M. tenacissima*) contains complex ingredients, such as alkaloids, steroidal ester glycosides, and resins, which have been widely used in the treatment of asthma, bronchitis, and other diseases<sup>[4]</sup>. Beneficially, *M. tenacissima* Extract

(MTE) has presented strong anti-tumor properties in different human cancers through multiple pathways *in vitro*<sup>[5,6]</sup>. Yet, its function in OSCC is still unknown. Of interest, recent studies have shown that MTE might prevent the malignant behaviors of glioma *via* modulating non-coding Ribonucleic Acid (RNA), such as Long noncoding RNA (LncRNA), Maternally Expressed Gene 3 (MEG3) and microRNA (miR)-542-3p<sup>[7]</sup>. Different from other non-coding RNAs, circular RNAs (circRNAs) were generated and formed by alternative splicing of pre-messenger RNA (mRNA), with a covalently closed-loop structure<sup>[8]</sup>. It has been reported that dysregulated circRNAs were widely involved in the pathogenesis of

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diverse tumors<sup>[9]</sup>. Previous laboratory work has demonstrated that hsa\_circ\_0003645 functions as a well-known carcinogenic factor in various tumors<sup>[10,11]</sup>, but its expression profiles and functions in OSCC remain largely unclear. In terms of molecular mechanisms, circRNAs have been pointed out to exert key roles by regulating the downstream-target miRNA<sup>[12]</sup>. Herein, circRNA interactive bioinformatics software found miR-335 as a probable target of hsa\_circ\_0003645. In fact, some reports have indicated that miR-335 might restrain the aggressive phenotypes of breast cancer and ovarian cancer<sup>[13,14]</sup>. As a metastasis suppressor miRNA, miR-335 has confirmed to repress tongue squamous carcinoma cell proliferative ability and induce cell cycle arrest<sup>[15]</sup>. Herein, this project focused on whether MTE might control OSCC progression *via* modulating hsa\_circ\_0003645/miR-335.

## MATERIALS AND METHODS

### Cell culture and reagents:

MTE was provided by Sciphar Limited Company (Shaanxi, China). OSCC cell line (CAL-27, Chinese Academy of Sciences, Shanghai, China) were cultured in Roswell Park Memorial Institute (RPMI) 1640 medium (Solarbio, Beijing, China) and 10 % Fetal Bovine Serum (FBS) (Invitrogen, Paisley Scotland, United Kingdom (UK)). Lipofectamine™ 2000 reagent, Cell Counting Kit-8 (CCK-8), and Bicinchoninic Acid (BCA) Kit were offered by Solarbio. Takara (Liaoning, Dalian) provided reverse transcription and Polymerase Chain Reaction (PCR) kits. Invitrogen offered Trizol reagent. Besides, Genepharma (Shanghai, China) offered PCR primers, si-hsa\_circ\_0003645, si-Negative Control (NC), plasmid cloning Deoxyribonucleic Acid (pcDNA)-hsa\_circ\_0003645, pcDNA, miR-335 mimics, miR-NC, and Wild-Type/Mutant (WT/MUT)-hsa\_circ\_0003645 plasmids. Rabbit anti-human E-cadherin and N-cadherin were acquired by Santa Cruz Biotechnologies (Santa Cruz, CA, United States of America (USA)). Beyotime (Shanghai, China) provided dual-luciferase activity detection Kit.

### Method:

**Cell treatment and transfection:** Referring to the previous description<sup>[16]</sup>, 0.5, 1.0, 1.5 mg/ml MTE were employed to respectively stimulate CAL-27 cells ( $5.0 \times 10^5$  cells/well, in 6-well plates) in RPMI

1640 medium for 48 h, generated MTE-L/M/H groups. Synchronously, control group was normal cultured CAL-27 cells. According to lipofectamine method, we knock-downed hsa\_circ\_0003645 by transfecting si-NC or si-hsa\_circ\_0003645 into un-treated CAL-27 cells, marked si-NC or si-hsa\_circ\_0003645 group. Besides, pcDNA or pcDNA-hsa\_circ\_0003645 were transfected into CAL-27 cells, and incubated with 1.5 mg/ml MTE, recorded as MTE+pcDNA or MTE+pcDNA-hsa\_circ\_0003645 group.

**CCK-8 assay:** In 96-well plates, transfected CAL-27 cells ( $2.5 \times 10^4$  cells/well) were cultured for 24 h, followed by mixture with 10  $\mu$ l, CCK-8 reagent. After being cultured for another 2 h, an enzyme meter was applied to assess the Optical Density (OD) values in different groups.

**Colony formation assay:** After being harvested and trypsinized, 1000 un-treated or treated cells in 6-well plates were cultured for 14 d and the medium was changed every 2 d. The culture was terminated when cell colonies were visible. After washing, cells were sequentially subjected to 4 % paraformaldehyde fixture and crystal violet staining. Under a microscope, colony number was counted ( $\geq 50$  cells were regarded as a colony).

**Flow cytometry:** After being collected and washed with Phosphate Buffer Solution (PBS),  $5.0 \times 10^4$  cells in 6-well plates were re-suspended in 500  $\mu$ l binding buffer. Then, 5  $\mu$ l annexin V-Fluorescein Isothiocyanate (FITC) and 5  $\mu$ l Propidium Iodide (PI) were added into the cell the cells suspension, followed by fully mixture and incubation for 15 min at room temperature. At last, a flow cytometry was utilized to analyze cell apoptosis within 1 h.

**Wound healing assay:** Cell migration was measured in this experiment. In short,  $5.0 \times 10^4$  cells in 6-well plates were maintained for 24 h. After that, a scratch was created using a sterile pipette tip in cell monolayer and scratch spacing was measured and denoted  $d_{0h}$ . After washing the floating cells, the cells were cultured with serum-free medium for 24 h and the intracellular spacing was examined and denoted  $d_{24h}$ . Finally, scratch healing rate (%) =  $(d_{0h} - d_{24h}) / d_{0h} \times 100$  %.

**Western blot:** Based on Radio-Immunoprecipitation Assay (RIPA) lysis buffer, total CAL-27 cell proteins were prepared. After BCA method determination, the corresponding protein samples were appended with the loading buffer and denatured, followed by separation

with Sodium Dodecyl-Sulfate Polyacrylamide Gel Electrophoresis (SDS-PAGE). Following shifted onto membranes and blocked for 1 h, the membranes were subjected to overnight incubation with primary antibodies: E-cadherin (1:1000), N-cadherin (1:1000), and Glyceraldehyde 3-Phosphate Dehydrogenase (GAPDH) (1:2000). After being soaked in secondary antibody (1:2000) for 2 h, the band was analyzed and quantified.

**Reverse Transcription quantitative-PCR (RT-qPCR):** After extracted with Trizol reagent, the obtained total RNAs were reversely transcribed in complementary DNA (cDNA), which was adopted to RT-qPCR reaction. Amplification was initially carried out at 95° for 10 s for 35 cycles (95° 10 s, 58° 30 s, 72° 30 s). Primer was displayed as follows: hsa\_circ\_0003645: Forward: 5'-CACAGTGGCCTTGTTCCCT-3'; Reserved: 5'-TTCCAAGACAGAGTTTTGCT-3'; miR-335: Forward: 5'-TCAAGAGCAATAACGAAAAATGT-3'; Reserved: 5'-GCTGTCAACGATACGCTACGT-3'; GAPDH: Forward: 5'-GTCAAGGCTGAGAACGGGAA-3'; Reserved: 5'-AAATGAGCCCCAGCCTTCTC-3'; U6: Forward: 5'-GCGATACAGAAGCACGAGAG-3' and Reserved: 5'-CGATACAGAGAGCGCGACTAC GAG-3'. Finally, GAPDH or U6 was respectively internal reference for hsa\_circ\_0003645 or miR-335, and

results were assessed with  $2^{-\Delta\Delta Ct}$  method.

**Dual-luciferase reporter gene assay:** Based on Lipofectamine™ 2000, WT/MUT-hsa\_circ\_0003645 was co-transfected into  $5.0 \times 10^4$  CAL-27 cells in 6-well plates with miR-NC or miR-335 mimics for 6 h. After changing the medium, cells were cultured for another 24 h. Then, cells were harvested and lysed for the detection of luciferase activity.

#### Statistical analysis:

Data with normal distribution were processed based on Statistical Package for the Social Sciences (SPSS) 21.0 and reported as ( $\bar{x} \pm s$ ). The comparisons of two-group and multiple groups were employed with student's t-test or one-way Analysis of Variance (ANOVA). Meanwhile, Least Significant Difference (LSD)-t test was used for pairwise comparison between groups. Difference was deemed statistically significant at  $p < 0.05$ .

## RESULTS AND DISCUSSION

Referring to data displayed in fig. 1 and Table 1, MTE exposure might hinder cell OD value and colony formation number, and induce apoptosis rate in a dose-dependent manner ( $p < 0.05$ ).

Based on the results exhibited in fig. 2 and Table 2, MTE treatment apparently reduced CAL-27 cell scratch healing rate and N-cadherin expression, and enhanced E-cadherin expression in a concentration-dependent way ( $p < 0.05$ ).

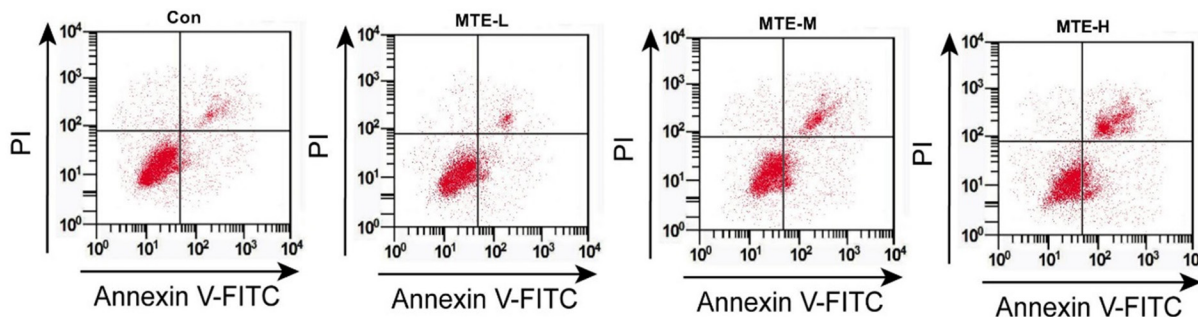


Fig. 1: MTE regulated CAL-27 cell apoptosis

TABLE 1: EFFECTS OF MTE ON CAL-27 CELL PROLIFERATION AND APOPTOSIS ( $\bar{x} \pm s$ , n=3)

Group	OD value	Colony formation number	Apoptosis rate %
Control	1.16±0.09	118.67±5.73	6.81±0.37
MTE-L	1.16±0.08	117.33±6.34	6.81±0.24
MTE-M	0.98±0.06 <sup>ab</sup>	86.67±3.86 <sup>ab</sup>	13.00±0.67 <sup>ab</sup>
MTE-H	0.63±0.03 <sup>abc</sup>	64.67±2.49 <sup>abc</sup>	21.27±1.08 <sup>abc</sup>
F	39.426	86.466	311.200
P	0.000	0.000	0.000

Note: <sup>a</sup> $p < 0.05$ , <sup>b</sup> $p < 0.05$ , and <sup>c</sup> $p < 0.05$  relative to control, MTE-L, and MTE-M group, respectively

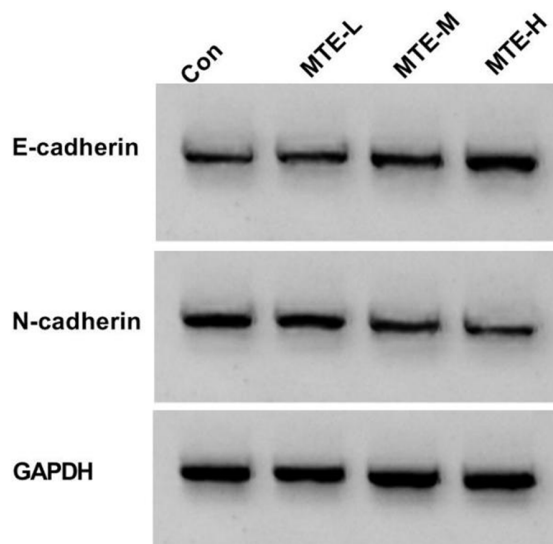


Fig. 2: MTE affected E-cadherin, N-cadherin protein expressions

TABLE 2: EFFECTS OF MTE ON CAL-27 CELL MIGRATION ( $\bar{x} \pm s$ , n=3)

Group	Scratch healing rate (%)	E-cadherin	N-cadherin
Control	59.92±2.14	0.20±0.02	0.74±0.06
MTE-L	59.81±2.28	0.22±0.02	0.72±0.06
MTE-M	49.00±2.15 <sup>ab</sup>	0.39±0.03 <sup>ab</sup>	0.47±0.04 <sup>ab</sup>
MTE-H	33.31±1.73 <sup>abc</sup>	0.71±0.05 <sup>abc</sup>	0.26±0.02 <sup>abc</sup>
F	108.813	159.048	67.598
P	0.000	0.000	0.000

Note: <sup>a</sup>p<0.05, <sup>b</sup>p<0.05, and <sup>c</sup>p<0.05 compared with control, MTE-L, and MTE-M group, respectively

As shown in Table 3, hsa\_circ\_0003645 content was gradually reduced with increasing dose of MTE, but miR-335 expression was improved (p<0.05).

Data from fig. 3 and Table 4 displayed that hsa\_circ\_0003645 expression, cell OD value, colony formation number, scratch healing rate, and N-cadherin were obviously repressed after si-hsa\_circ\_0003645 introduction, while miR-335 expression, apoptosis rate, and E-cadherin expression were improved (p<0.05).

Compared with MTE+pcDNA, hsa\_circ\_0003645 level, OD value, colony formation number, migration, and N-cadherin were clearly increased in the MTE+pcDNA-hsa\_circ\_0003645 group, however, miR-335 expression, apoptosis, and E-cadherin were blocked (fig. 4 and Table 5).

Based on circRNA interactive prediction, existence of complementary sequences between hsa\_circ\_0003645 and miR-335 was found (fig. 5). In addition, miR-335 upregulation led to an apparent enhancement in the luciferase activity of

WT-hsa\_circ\_0003645, rather than the MUT group (Table 6)

As a TCM, *M. tenacissima* is rich in alkaloids, organic acids and polysaccharides, and other active ingredients, with anti-inflammatory, anti-tumor, and other pharmacological activities. Of note, convincing evidence has suggested that MTE exerts a potent potential tumor-suppressor effect in various human cancers. It has been reported that MTE might repress hematological tumor cell proliferation by boosting Poly ADP-Ribose Polymerases (PARP) expression and repressing p-Protein Kinase B (AKT) expression<sup>[17]</sup>. Beyond that, MTE might induce non-small cell lung cancer cell apoptosis *via* improving caspase-3 activity<sup>[18]</sup>. In addition, it has been reported that MTE might retard melanoma cell growth through regulating Phosphoinositide 3-Kinase (PI3K)/AKT/mammalian Target of Rapamycin (mTOR) pathway<sup>[19]</sup>. Previous studies have described that excessive cell proliferation and impaired apoptosis are principal reasons for tumor development<sup>[20]</sup>.

**TABLE 3: EFFECTS OF MTE ON HSA\_circ\_0003645 AND miR-335 ( $\bar{x}\pm s$ , n=3)**

Group	hsa_circ_0003645	miR-335
Control	1.00±0.00	1.00±0.00
MTE-L	0.98±0.02	1.06±0.04
MTE-M	0.66±0.04 <sup>ab</sup>	1.57±0.09 <sup>ab</sup>
MTE-H	0.21±0.02 <sup>abc</sup>	3.40±0.14 <sup>abc</sup>
F	682.458	517.853
P	0.000	0.000

Note: <sup>a</sup>p<0.05, <sup>b</sup>p<0.05, and <sup>c</sup>p<0.05 vs. control, MTE-L, and MTE-M group, respectively

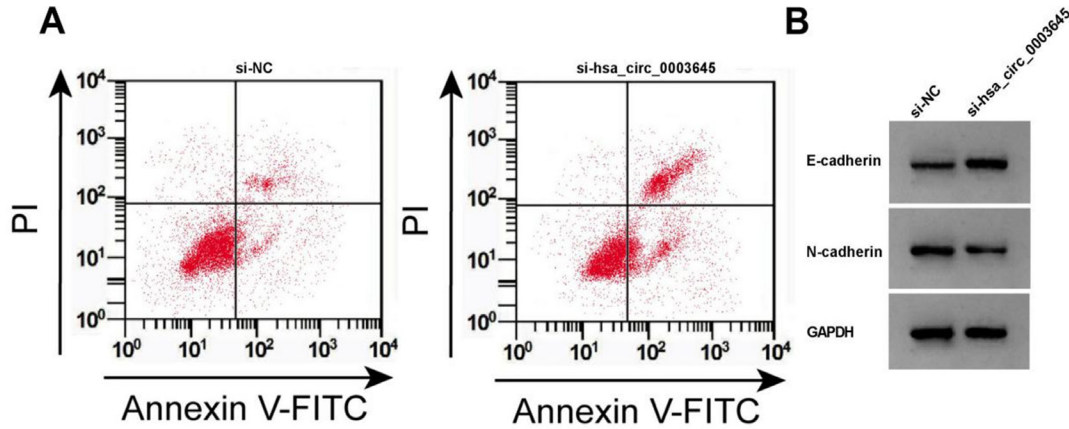


Fig. 3: hsa\_circ\_0003645 knockdown affected apoptosis, and the expression of E-cadherin and N-cadherin, (A): Effect of hsa\_circ\_0003645 absence on apoptosis and (B): Effect of hsa\_circ\_0003645 silencing on E-cadherin and N-cadherin protein expression

**TABLE 4: HSA\_circ\_0003645 DOWNREGULATION REGULATED PROLIFERATION, APOPTOSIS AND MIGRATION ( $\bar{x}\pm s$ , n=3)**

Group	hsa_circ_0003645	miR-335	OD value	Colony formation number	Apoptosis rate (%)
si-NC	1.00±0.0	1.00±0.00	1.16±0.09	118.33±5.73	6.87±0.38
si-hsa_circ_0003645	0.11±0.01 <sup>a</sup>	4.55±0.16 <sup>a</sup>	0.54±0.03 <sup>a</sup>	55.67±2.05 <sup>a</sup>	23.14±1.27 <sup>a</sup>
t	154.153	37.889	11.320	17.834	21.258
p	0.000	0.000	0.000	0.000	0.000

Note: <sup>a</sup>p<0.05 vs. si-NC

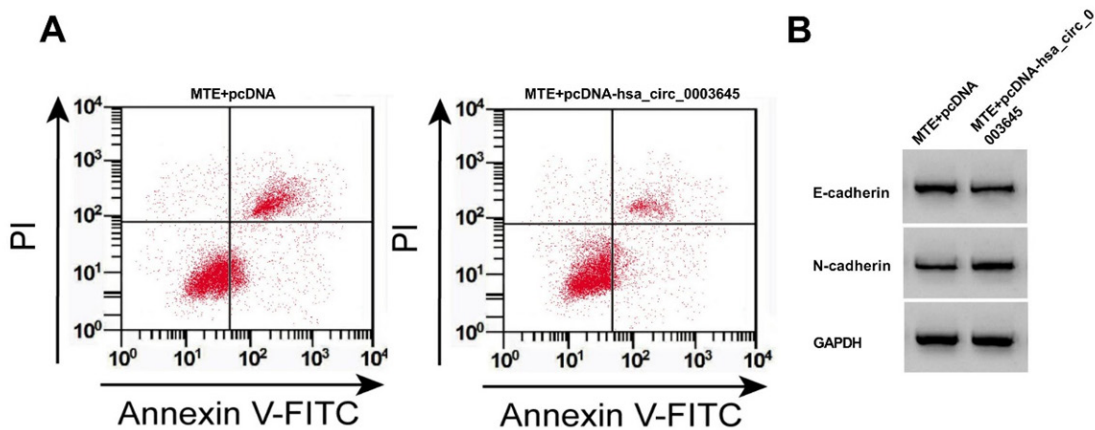


Fig. 4: hsa\_circ\_0003645 ameliorated MTE-triggered apoptosis and the expression of E-cadherin, N-cadherin, (A): hsa\_circ\_0003645 overturned MTE-induced CAL-27 cell apoptosis and (B): hsa\_circ\_0003645 abolished MTE-mediated E-cadherin, N-cadherin expression

**TABLE 5: HSA\_circ\_0003645 REVERSED THE INFLUENCE OF MTE ON CAL-27 CELL MALIGNANT BEHAVIORS ( $\bar{x}\pm s$ , n=3)**

Group	hsa_circ_0003645	miR-335	OD value	Colony formation number	Apoptosis rate (%)
MTE +pcDNA	0.20±0.02	3.40±0.16	0.63±0.05	64.67±2.87	6.87±0.38
MTE +pcDNA-hsa_circ_0003645	0.86±0.06 <sup>a</sup>	1.26±0.06 <sup>a</sup>	1.04±0.09 <sup>a</sup>	101.33±5.44 <sup>a</sup>	23.14±1.27 <sup>a</sup>
t	18.075	21.691	6.897	10.324	21.258
p	0.000	0.000	0.002	0.000	0.000

Note: <sup>a</sup>p<0.05 compared with MTE+pcDNA

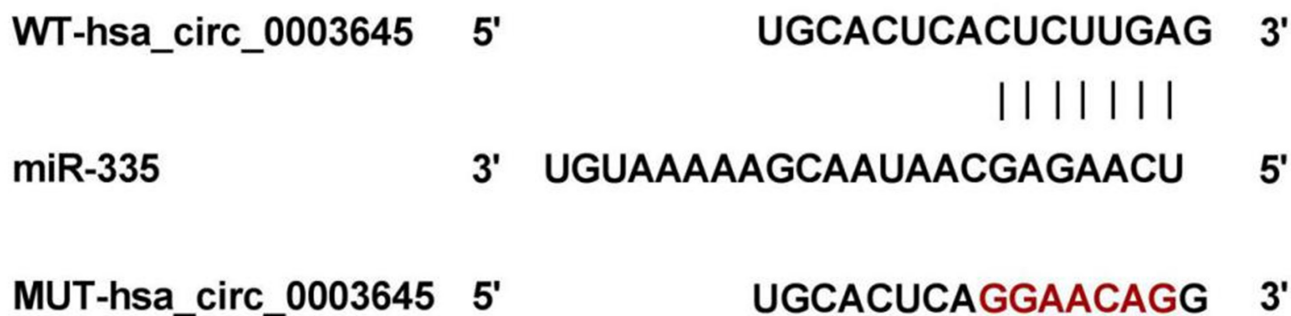


Fig. 5: Nucleotide sequence of hsa\_circ\_0003645 complementary to miR-335

**TABLE 6: RESULTS OF DUAL LUCIFERASE REPORTER EXPERIMENTS ( $\bar{x}\pm s$ , n=3)**

Group	WT-hsa_circ_0003645	MUT-hsa_circ_0003645
miR-NC	0.95±0.06	0.95±0.05
miR-335	0.22±0.02 <sup>a</sup>	0.96±0.06
t	19.992	0.222
p	0.000	0.835

Note: <sup>a</sup>p<0.05 relative to miR-NC

Herein, our data found that MTE exposure might effectively impede OSCC cell proliferative ability and boost apoptosis in a dose-dependent manner, suggesting that MTE has the underlying value of repressing OSCC development. Furthermore, tumor cell migration has been reported as the main cause of tumor recurrence and metastasis<sup>[21]</sup>. Tumor cells undergo the Epithelial-Mesenchymal Transition (EMT) process responsible for cytoskeleton alteration and intercellular adhesion reduction, which makes tumor cells easy for migrate<sup>[22]</sup>. In the current work, applying MTE decline scratch healing rate and N-cadherin and enhance E-cadherin, supporting the repression of MTE on OSCC cell migration ability.

It has been widely accepted that circRNAs might

target miRNAs to control OSCC cell growth and metastasis. For example, circFNDC3B might accelerate OSCC migration and invasion by driving EMT<sup>[23]</sup>. Moreover, circCDR1as overexpression might elevate OSCC cell autophagy, proliferation, motility, and decrease apoptosis<sup>[24]</sup>. Herein, hsa\_circ\_0003645 absence might hinder OSCC cell proliferation, migration, and facilitate apoptosis, verifying the suppressive role of hsa\_circ\_0003645 silencing on OSCC development and that hsa\_circ\_0003645 might be used as a target for OSCC treatment. Consistent with lncRNA<sup>[7]</sup>, our data validated that MTE exposure might block hsa\_circ\_0003645 expression in OSCC cells. Functional experiments presented that hsa\_circ\_0003645 knockdown-

mediated OSCC cell proliferation and migration inhibition and apoptosis promotion were partly abrogated after MTE treatment, validating that applying MTE might retard OSCC progression *via* modulating hsa\_circ\_0003645.

In terms of molecular mechanisms, our data discovered that hsa\_circ\_0003645 directly targeted miR-335. Several researches have indicated that miR-335 acted as a tumor-suppressor role by dampening cell proliferation and migration in different tumors<sup>[25-27]</sup>. Meanwhile, it has been confirmed that Platycodin D (PD) might diminish bladder cancer cell growth, invasion, and EMT<sup>[28]</sup>. In the present work, hsa\_circ\_0003645 upregulation might partially counteract MTE treatment-evoked miR-335 content enhancement in OSCC cells, further supporting MTE exposure might dwindle OSCC cell malignant phenotypes *via* targeting hsa\_circ\_0003645/miR-335.

In summary, applying MTE suppressed OSCC progression *via* decreasing hsa\_circ\_0003645 and increasing miR-335, contributing to the theoretical basis for MTE against OSCC.

#### Conflict of interests:

The authors declared no conflict of interests.

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