

Oncogenes & Tumor Suppressor genes

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Lecture overview

- What are oncogenes
- How do oncogenes function in cancer cells?
- How are oncogenes “turned on”?
- What are tumor suppressor genes?
- How do TSG function in cancer cells?
- How is TSG function lost?

Oncogenes and Tumor Suppressor genes

Oncogenes

- Genes that promote cell growth and/or motility which, when upregulated or deregulated, imbue cells with the cancerous properties of unregulated growth and motility

Tumor suppressor genes

- Genes which normally suppress cell growth and/or motility which are frequently downregulated in tumor cells, allowing for unchecked growth/motility

***Cancer is a genetic disease**

Gain of oncogene(s)

+

Loss of TSG

=

CANCER

Oncogenes

- The term “oncogene” was coined in 1969 by R. Huebner & G. Todaro
- Genes that have the potential to cause cancer (proto-oncogenes)
- Transform healthy cells – cause them to gain “hallmarks of cancer”
- **First discovered in viruses**, later in cells

Src – the first oncogene

- *The first oncogene was discovered before we understood what oncogenes really are!*



Peyton Rous, 1911 – cell-free extract from chicken tumors can cause new tumors when injected into healthy chickens



v-Src = oncogenic retrovirus

Rous Sarcoma – a form of cancer which infects chickens

Rous Sarcoma Virus (RSV) – a retrovirus which generates a cDNA that inserts into the chickens' DNA

v-Src – the gene which gets expressed by RSV

Other viral oncogenes

- Rous Sarcoma src
- Abelson leukemia abl
- Avian erythroblastosis erbB
- McDonough feline sarcoma fms
- H-Z feline kit
- Murine sarcoma 3611 raf
- Simian sarcoma sis
- Harvey sarcoma H-ras

- Many oncogenes identified in viruses
- *But... **Most human cancers are not viral in origin***
- Cellular versions of oncogenes = **proto-oncogenes**

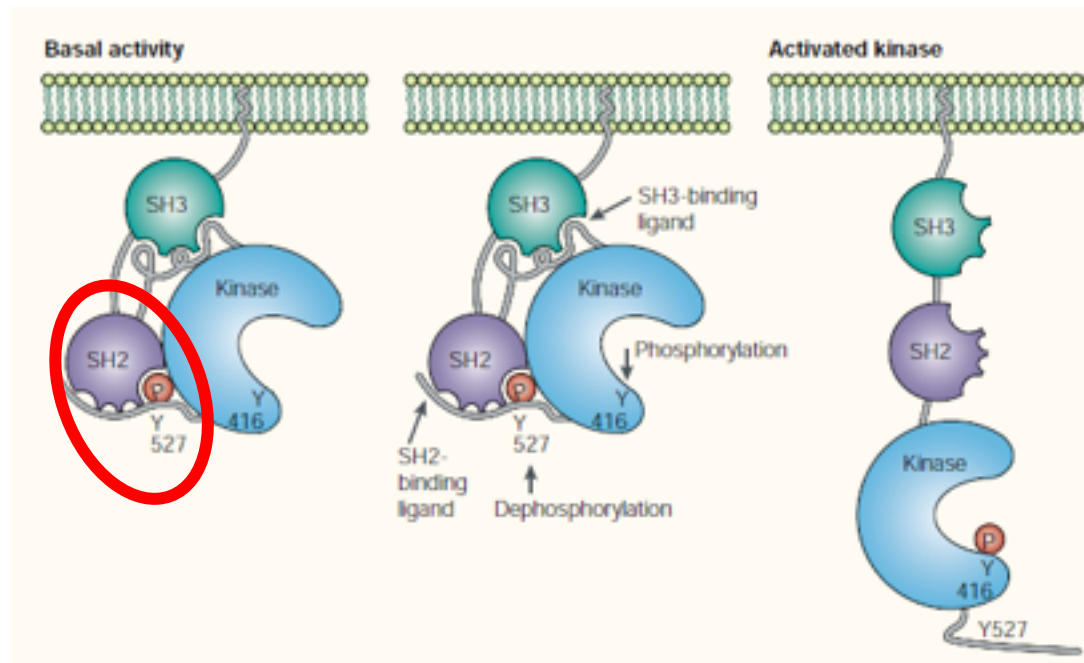
Src in human tumors

Src expression/activity upregulated in:

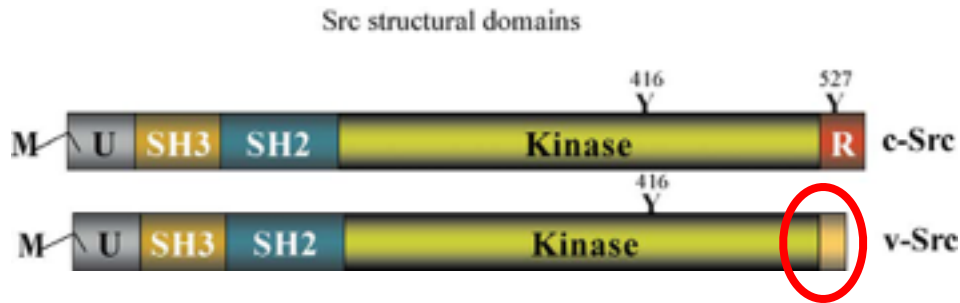
- Breast ca
- Pancreatic ca
- Ovarian ca
- Head & Neck ca
- Lung ca
- Gastric ca
- Colon ca – C-terminal truncation identified

c-Src

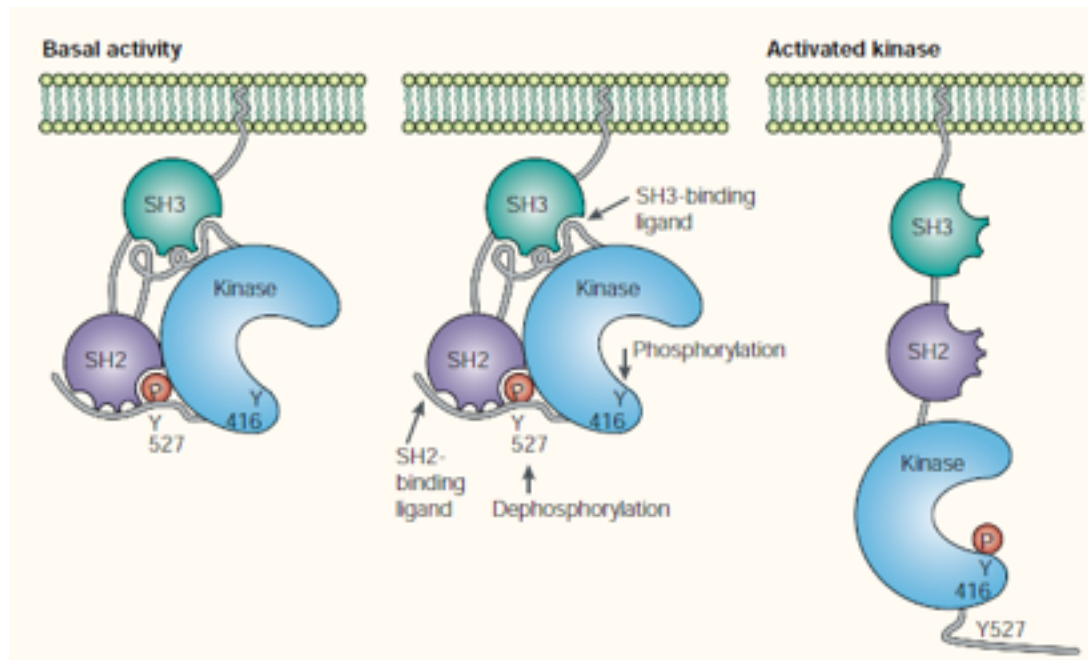
- A kinase
- Cell motility, growth, morphology, proliferation
- The first proto-oncogene
- **Activity is tightly regulated**
 - po-Y527



v-Src is a CA version of c-Src

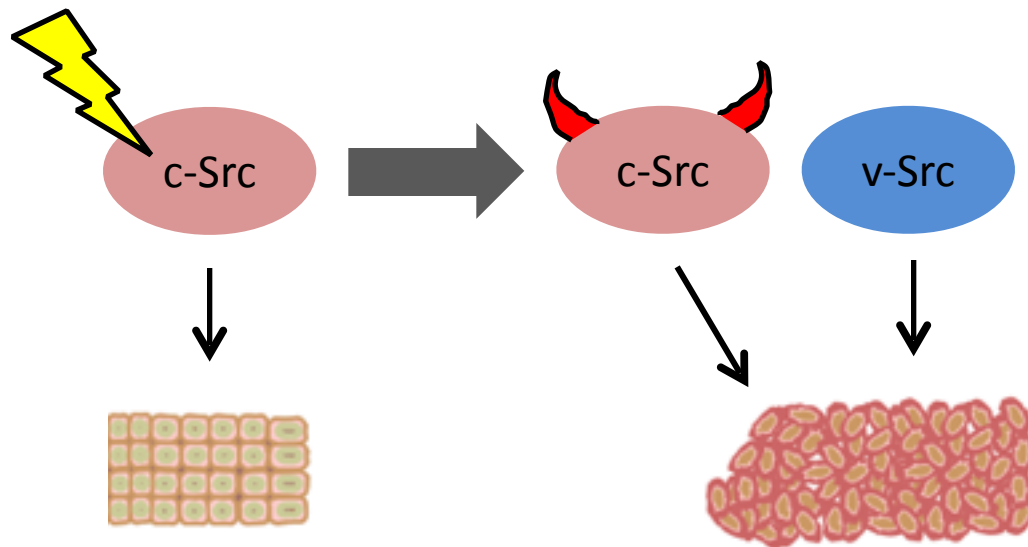


- c-Src – interaction between po-Y527 and SH2 domain hold c-Src in a kinase inactive state
- Dephosphorylation of Y527 releases the interaction
- v-Src lacks regulatory Y527 → constitutively active



Src – the first (proto)oncogene

- 1976 – v-Src is the viral version of c-Src
- c-Src is a **proto-oncogene**

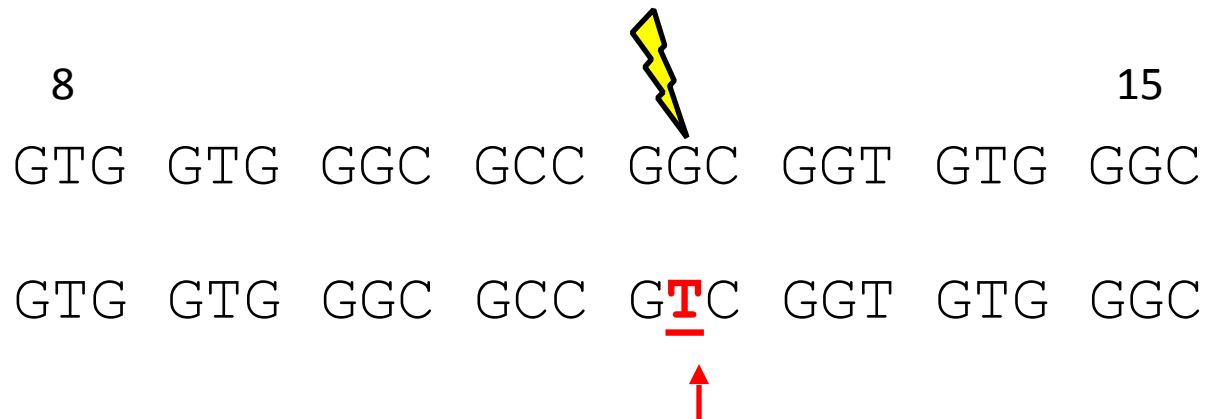


Activation of proto-oncogenes

Proto-oncogenes are tightly regulated in healthy cells

- **Mutation**
 - H-ras, K-ras, N-ras
 - EGFR
- **Gene amplification**
 - Myc
 - ErbB2/HER2
- **Chromosomal translocations**
 - Myc
 - Bcr/Abl

Activation of Ras by mutation



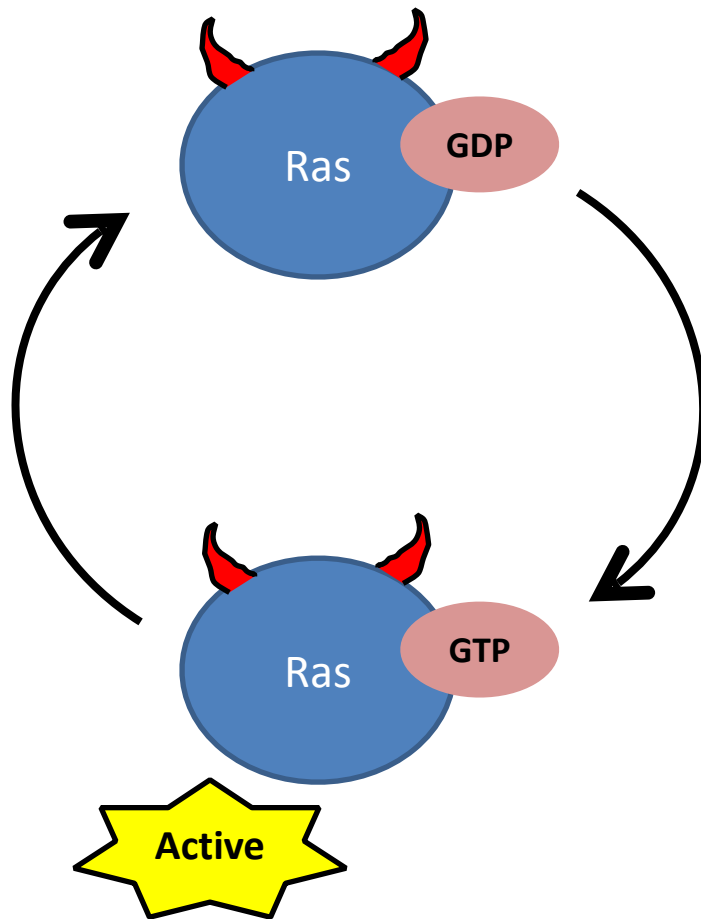
Oncogenic H-Ras mutation in bladder ca:

**Glycine → Valine
(G12V)**

Common point mutations found in oncogenic Ras:

- aa 12
- aa 13
- aa 61

The effect of oncogenic point mutations on Ras signaling



- Ras is a GTPase – binds to and hydrolyzes GTP
- In the GTP-bound form, Ras is active
- Hydrolysis of GTP kills Ras activity
- G12V mutant Ras loses GTPase activity, remains active

Table 4.2 A list of point-mutated *ras* oncogenes carried by a variety of human tumor cells

Tumor type	Proportion (%) of tumors carrying a point-mutated <i>ras</i> gene ^a
Pancreas	90 (K)
Thyroid (papillary)	60 (H, K, N)
Thyroid (follicular)	55 (H, K, N)
Colorectal	45 (K)
Seminoma	45 (K, N)
Myelodysplasia	40 (N, K)
Lung (non-small-cell)	35 (K)
Acute myelogenous leukemia	30 (N)
Liver	30 (N)
Melanoma	15 (N)
Bladder	10 (H, K)
Kidney	10 (H)

^aH, K, and N refer to the human *H-RAS*, *K-RAS*, and *N-RAS* genes, respectively.

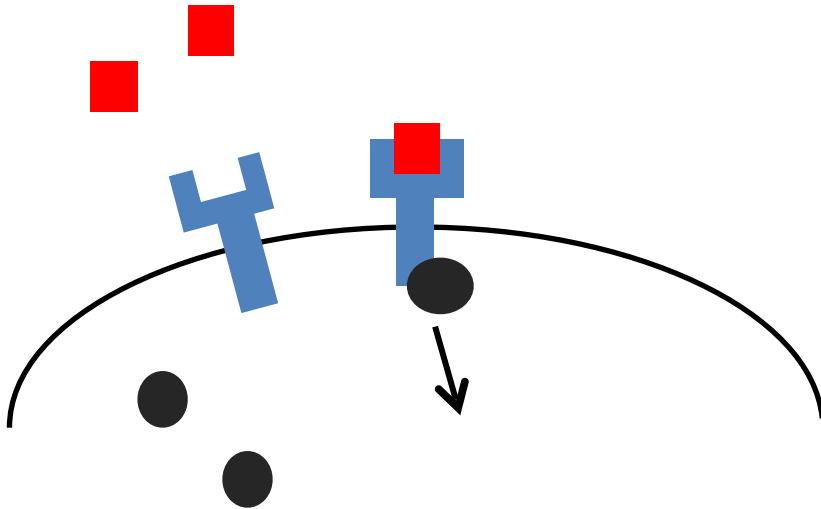
Adapted from J. Downward, *Nature Rev. Cancer* 3:11–22, 2003.

Table 4.2 The Biology of Cancer (© Garland Science 2014)

Oncogene activation by mutation

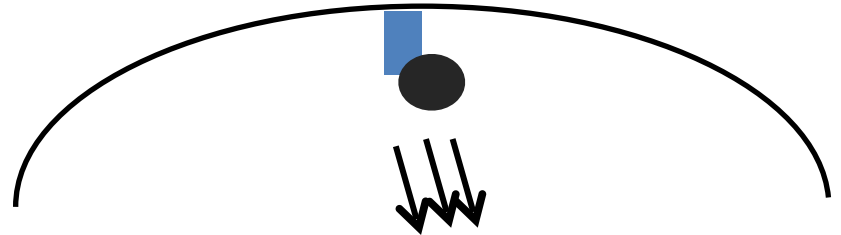
WT EGF Receptor (EGFR)

– ligand binding
stimulates activation



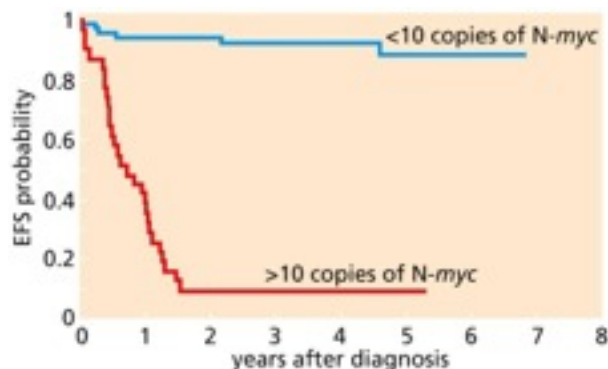
Mutant EGFR –

Constitutive activation

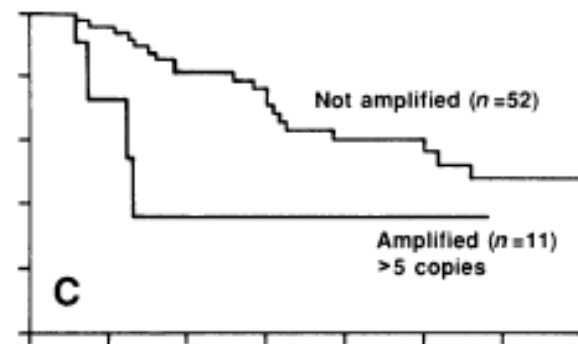
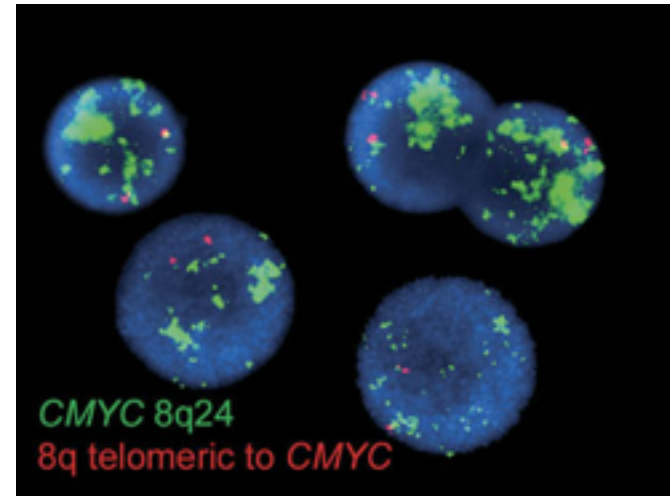


Oncogene activation by gene amplification

- Multiple copies of Myc, ErbB2 → greater expression
- Pro-growth advantage of tumor cells with greater expression



Fluorescence in Situ Hybridization (FISH)



Breast ca survival based on Her2/neu expression (Slamon et al, 1987)

Table 4.3 Some frequently amplified chromosomal regions and the genes they are known to carry

Name of oncogene ^a	Human chromosomal location	Human cancers	Nature of protein ^b
<i>MDM4/MDMX</i>	1q32	breast, colon, lung, pre-B leukemias	p53 inhibitor
<i>PIK3CA</i>	3q26.3	lung SCC, ovarian, breast	PI kinase
<i>erbB1/EGFR</i>	7q12–13	glioblastomas (50%); squamous cell carcinomas (10–20%)	RTK
<i>cab1-erbB2-grb7</i>	17q12	gastric, ovarian, breast carcinomas (10–25%)	RTK, adaptor protein
<i>k-sam</i>	7q26	gastric, breast carcinomas (10–20%)	RTK
<i>FGF-R1</i>	8p12	breast carcinomas (10%)	RTK
<i>met</i>	7q31	gastric carcinomas (20%)	RTK
<i>K-ras</i>	12p12.1	lung, ovarian, colorectal, bladder carcinomas (5–20%)	small G protein
<i>N-ras</i>	1p13	head and neck cancers (30%)	small G protein
<i>H-ras</i>	11p15	colorectal carcinomas (30%)	small G protein
<i>c-myc</i>	8q24	various leukemias, carcinomas (10–50%)	TF
<i>L-myc</i>	1p32	lung carcinomas (10%)	TF
<i>N-myc-DDX1</i>	2p24–25	neuroblastomas, lung carcinomas (30%)	TF
<i>akt-1</i>	14q32–33	gastric cancers (20%)	ser/thr kinase
<i>akt-2</i>	19q13	ovarian carcinomas	ser/thr kinase
<i>cyclin D1-exp1-hst1-ems1</i>	(11q13)	breast and squamous cell carcinomas (25–50%)	G1 cyclin
<i>cdk4-mdm2-sas-gli</i>	12q13	sarcomas (10–30%), HNSCC (40%), B-cell lymphomas (25%)	CDK, p53 antagonist
<i>cyclin E</i>	19q12	gastric cancers (15%)	cyclin
<i>akt2</i>	(19q13)	pancreatic, ovarian cancers (30%)	ser/thr kinase
<i>AIB1, BTAK</i>	(20q12–13)	breast cancers (15%)	receptor co-activator
<i>cdk6</i>	(19q21–22)	gliomas (5%)	CDK
<i>myb</i>	6q23–24	colon carcinoma (5–20%), leukemias	TF
<i>ets-1</i>	11q23	lymphoma	TF
<i>gli</i>	12q13	glioblastomas	TF

^aThe listing of several genes indicates the frequent co-amplification of a number of closely linked genes; only the products of the most frequently amplified genes are described in the right column.

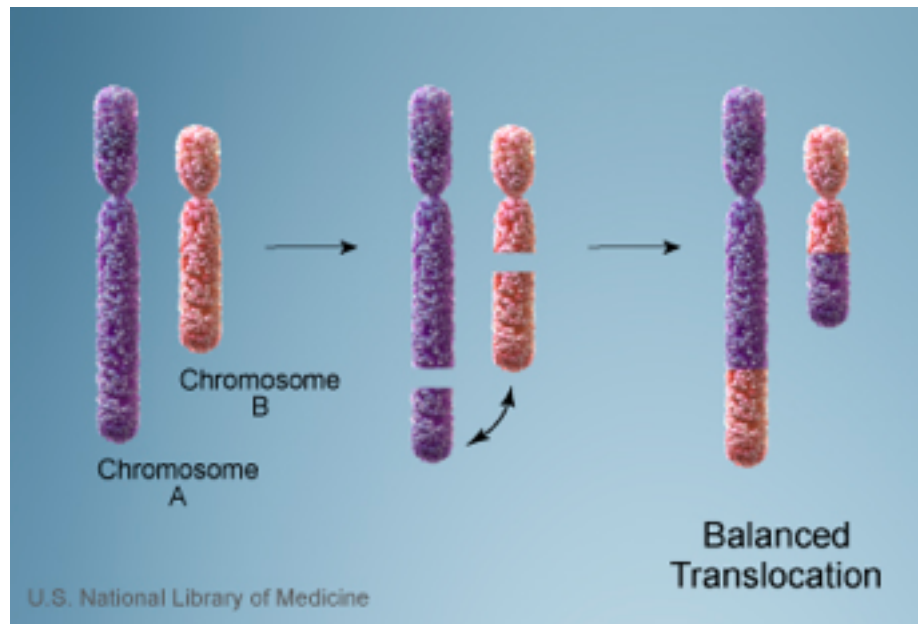
^bAbbreviations: TF, transcription factor; RTK, receptor tyrosine kinase; CDK, cyclin-dependent kinase; G protein, guanine nucleotide-binding protein; HNSCC, head-and-neck squamous cell carcinomas.

Courtesy of M. Terada, Tokyo, and adapted from G.M. Cooper, *Oncogenes*, 2nd ed. Boston and London: Jones and Bartlett, 1995.

Table 4.3 The Biology of Cancer (© Garland Science 2014)

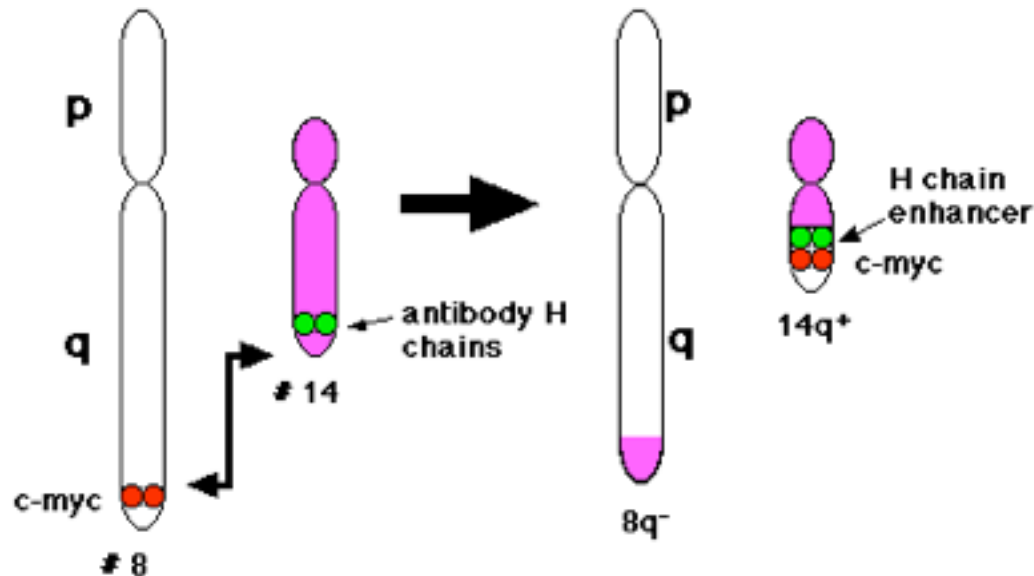
Chromosomal rearrangement

- Genetic instability
 - Place strong promoter in front of an oncogene
 - formation of novel hybrid proteins



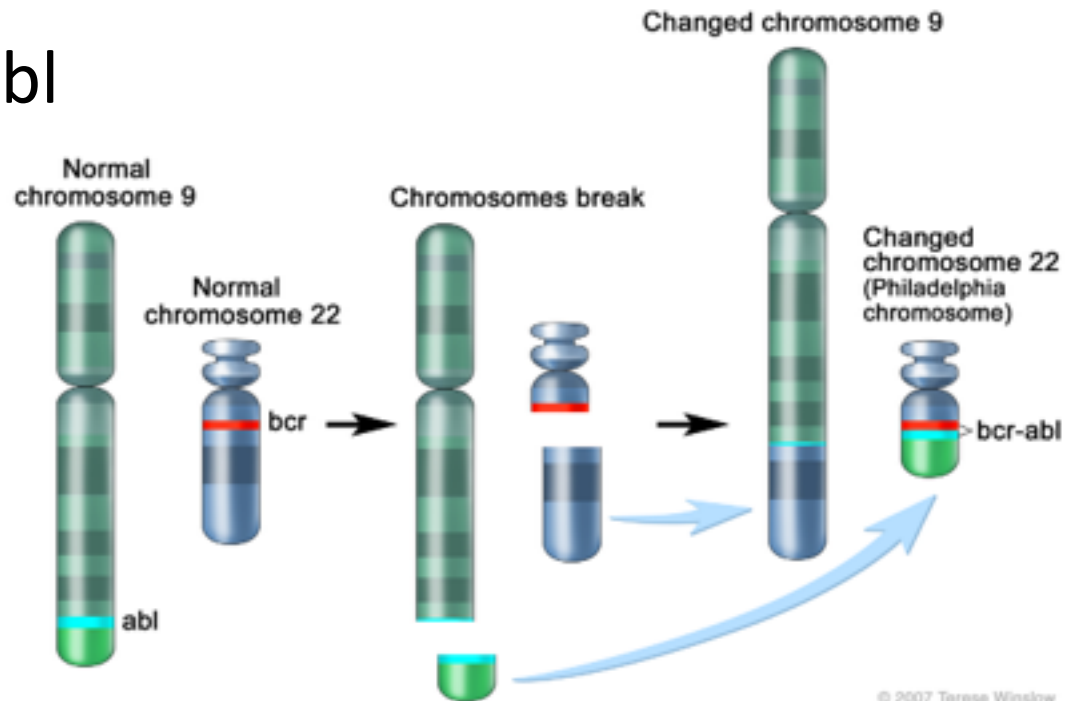
t(8;14)

- Burkitt's Lymphoma
- Fusion of chromosomes 2, 14, or 22 to chromosome 8
- Place Myc under the Ig promoter



Bcr-Abl

- Chronic myelogenous leukemia (CML)
- Abl – oncogene (TK) located on cr 9
- Breakpoint cluster region – cr 22
- t(9;22)
- Result: CA version of Abl

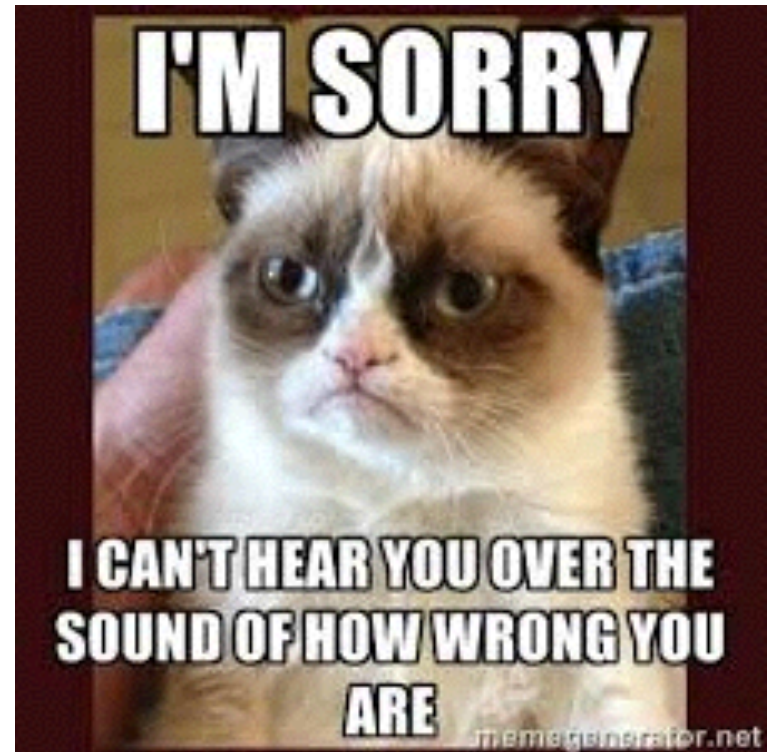


Summary so far

- Oncogenes were first discovered in the DNA of tumor-causing viruses
- Activation of proto-oncogenes drive tumorigenesis
- Oncogenes are activated by gene amplification, activating mutations, and chromosomal rearrangements

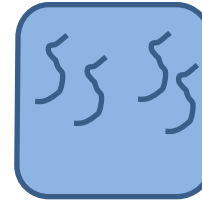
Oncogenes → cancer, end of story, right?!

WRONG

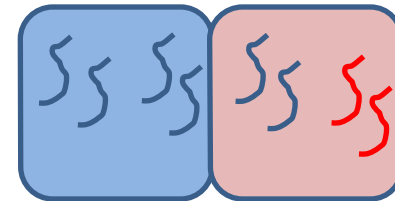
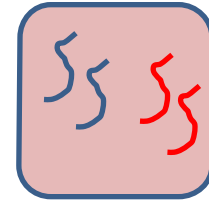


- Scientists expected oncogenes to be genetically dominant
- BUT – fusion of cancer and normal cells create non-tumor forming hybrid

Normal cell



Cancer cell



Fused cell

Inject into ms

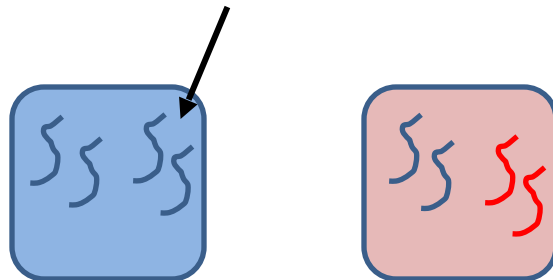


NO TUMOR!



Results of fusion studies

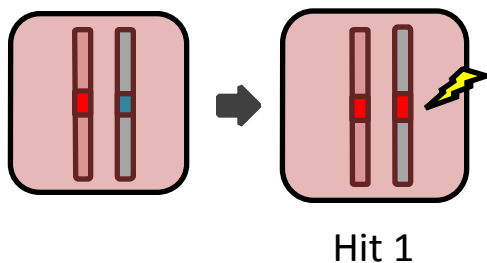
- Tumor phenotype is recessive to normal phenotype
- Normal cells have properties which suppress tumorigenesis
- **Tumor suppressor genes**



Additional support for TS theory: Retinoblastoma

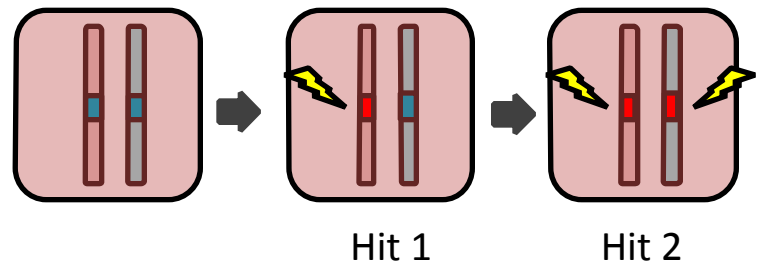
- **Familial**

- Parent previously had the disease (carry one disease allele)
- More likely to get sporadic “second hit”
- Presents in both eyes



- **Sporadic**

- Requires two hits per cell (one per allele)
- Less frequent
- Presents in one eye

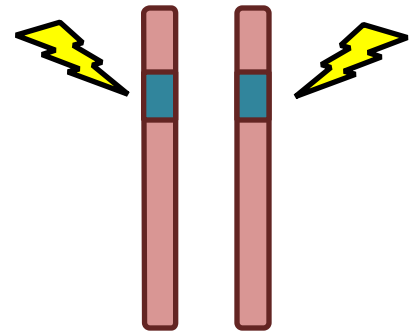


Tumor Suppressor genes

- Tumor suppressor genes function as growth suppressors in healthy cells
- **The loss of tumor suppressor genes causes cancer**
- Cancer = gain of oncogenes + loss of TSG

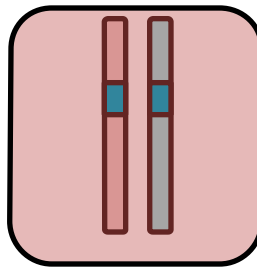
How to TSG get lost?

- Direct inactivating mutations
 - Rare (10^{-6} per cell generation)
 - 2 alleles \rightarrow even more rare (10^{-12} per cell generation)
- Mutations during mitosis
 - Not all that rare
 - **Loss of heterozygosity (LOH)**

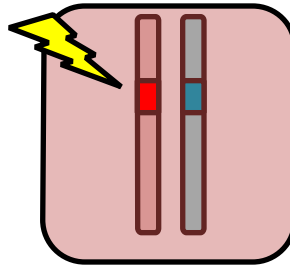


Loss of Heterozygosity

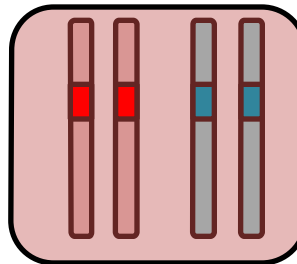
Normal cell



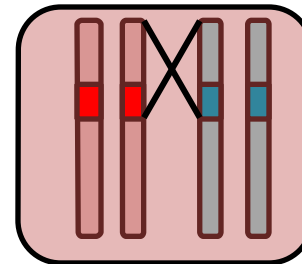
Cell with 1 mutant allele



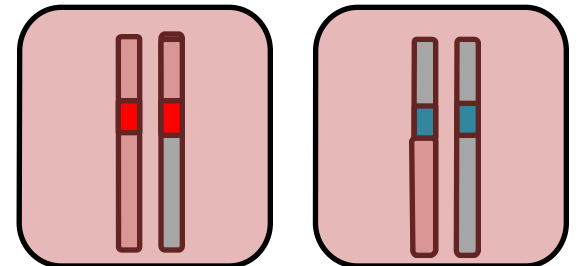
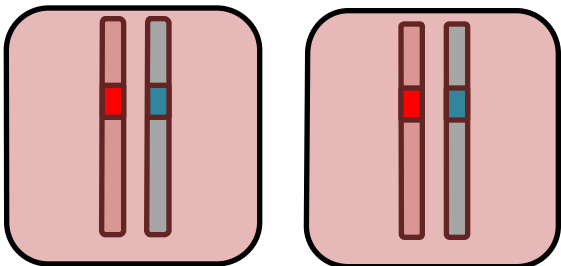
(S phase)



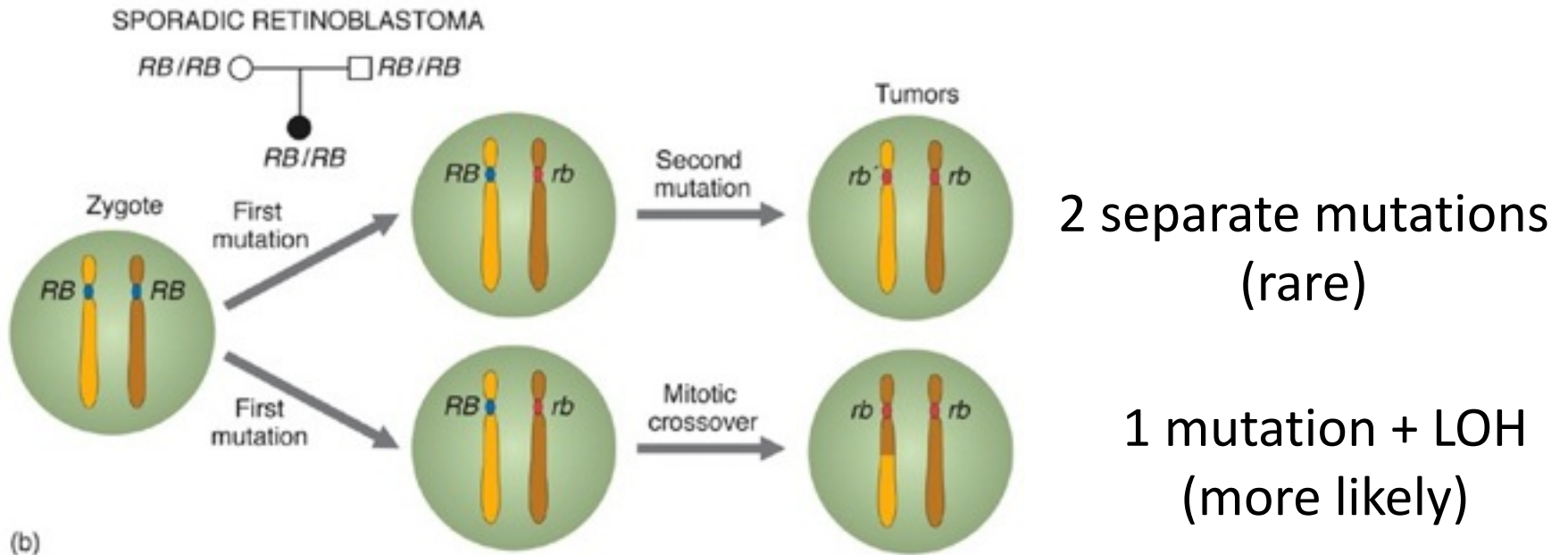
Abnormal mitosis



Normal mitosis



Loss of Heterozygosity

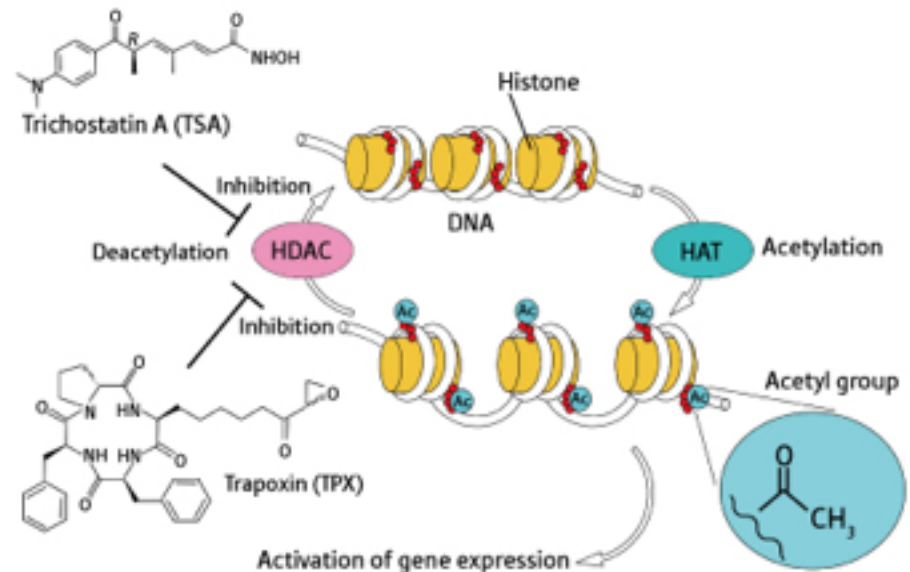
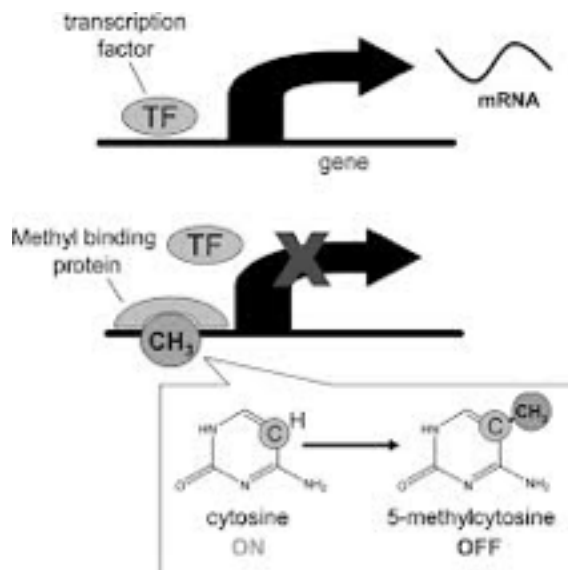


Mechanisms of TSG inactivation

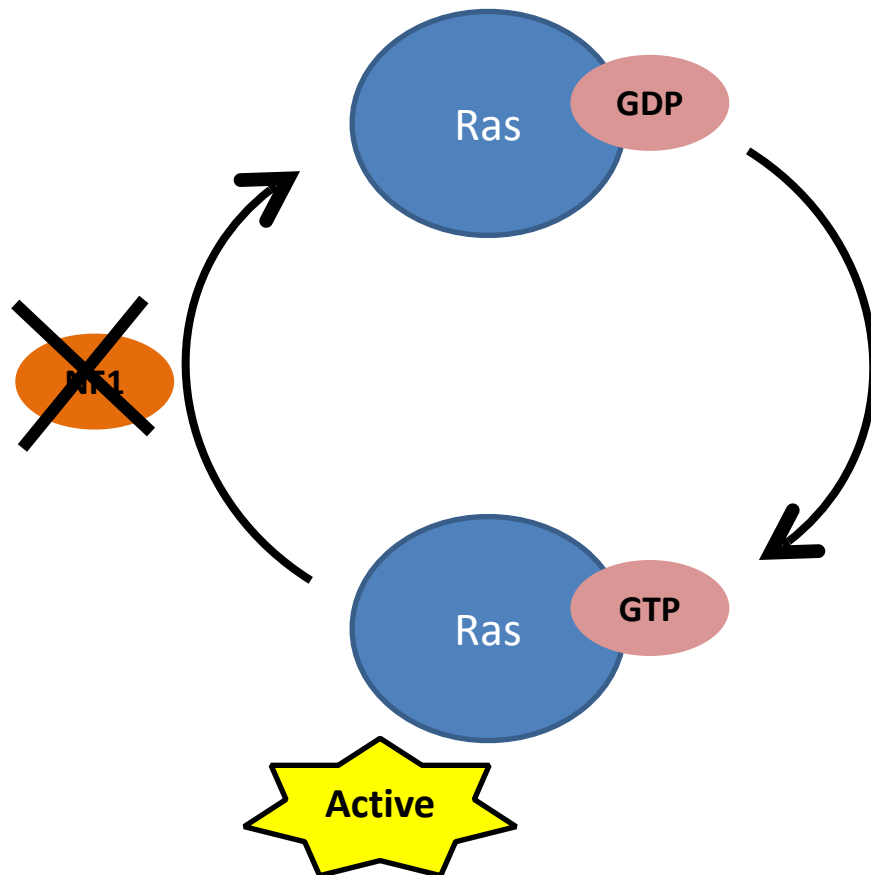
- Gene deletion
- Direct mutation
- Loss of Heterozygosity
- **Epigenetic silencing (promoter methylation)**

Promoter methylation

- Promoters rich in the sequence cytosine-guanosine (CpG)
- Cytosine gets methylated
- HDAC protein complexes recognize methyl-CpG
- HDAC removes histone acetylations
- Histones instigate “closed” DNA conformation
- → turn off transcription



NF1 as a tumor suppressor



NF1

- Lost in neurofibromatosis
- A GTPase Activating Protein
 - Induces hydrolysis of GTP
 - inactive Ras
- Loss of NF1 functionally mimics hyperactivation of Ras

Genetic changes → Cancer

Oncogenes

- Gene amplification
- Insertion of powerful (viral) promoters
- Activating mutations

Tumor suppressors

- Gene deletion
- Silencing mutations
- Loss of heterozygosity
- Promoter hypermethylation