

STRONG CHILDREN'S RESEARCH CENTER

Summer 2014 Research Scholar

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ABSTRACT

Title: PRMT1 as a Novel Therapeutic Target in Chemoresistant Neuroblastoma

Background: Neuroblastoma (NB) is one of the most common childhood cancers, stemming from the neural crest, and most often diagnosed in or before the second year of life. High-risk or chemoresistant incidences account for a large percentage of cases and are a significant obstacle to clinical treatment. There are several key oncogenes which have been linked to the development of NB and the poorer prognoses, including MYCN (22% of NB) and ALK (10%).

Amplified MYCN activity has been linked to consistently worse patient outcomes through a complex pathway involving several gene/protein and protein-protein interactions. MYCN is a transcription factor that acts as a growth promoter and is a target of epigenetic agents. It has been further shown in leukemia cell lines that PRMT1 is a target of epigenetic agents.

Objectives: Determine the effect of PRMT1 inhibition on cell behavior. We hypothesize that treatment with PRMT1 inhibitors increases sensitivity to genotoxic drugs. We will test PRMT1, EYA1, and methyl-EYA1 in patient samples with patient treatment.

Results: We examined PRMT1 inhibition in three NB cell lines, two with and two without non-amplified MYCN. Treatment with specific PRMT1 inhibitors suppressed cell viability, and induced cell death in both MYCN-amplified lines but not in non-amplified lines. We also investigated the effects of PRMT1 inhibition on sensitivity to etoposide. We found possible synergistic effects of PRMT1 inhibitors and etoposide and will test the therapeutic effects of genotoxic agents in NB through the use of PRMT1 inhibitors in MYCN-amplified cells.

Conclusion: While PRMT1 may still have a role in preserving cell viability in non-amplified cells, it is not to the critical degree as seen in MYCN-amplified lines. This research has demonstrated a clear link between amplified MYCN and the poor patient response to chemotherapeutic treatment. PRMT1 inhibition may have clinical importance if effective disruption of the PRMT1 pathway is achieved.