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TITLE: Pim-1: A Molecular Target to Modulate Cellular Resistance to Therapy in

**Prostate Cancer** 

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#### 14. ABSTRACT

The contract supports studies to define the role of the PIM1 kinase in acquired resistance to chemotherapy by prostate cancer cells. Data to date for specific aim #1 define a signaling pathway induced by docetaxel, involving sequential steps of STAT3 activation, expression of PIM1, and activation of NFkB signaling. Blockade of this pathway by expression of dominant negative PIM1proteins blocks drug-induced upregulation of NFkB activity, and sensitizes cells to docetaxel. Other studies (specific aim #2) focus on identifying a mechanism through which PIM1 activates NFkB. We have unambiguously identified S937 as the major PIM1 phosphorylation site on the NFKB1/p105 precursor protein, through use of LCM/MS/MS analysis. Interestingly PIM2 is only a weak kinase for this site. Additional data (specific aim #3) have been generated to characterize a small molecule inhibitor of PIM1.

## 15. SUBJECT TERMS

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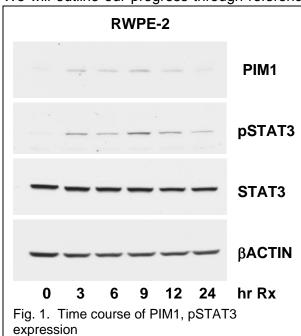
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#### INTRODUCTION

Studies under this funded activity are focused on characterizing the role of the PIM1 gene in acquired resistance to chemotherapy drugs, by prostate cancer cells. The proposal included three specific aims: 1) to define a novel signal transduction pathway activated by docetaxel, 2) to characterize the mechanism through which PIM1 activates and regulates NFkB signaling, and 3) to explore genetic and pharmacologic means of inhibiting PIM1 activity or expression to enhance the sensitivity of prostate cancer cells to docetaxel and other chemotherapy drugs. Substantial progress has been made in each of these areas during the 01 year of support.

### **BODY**

We will outline our progress through reference to the specific aims described above. The first

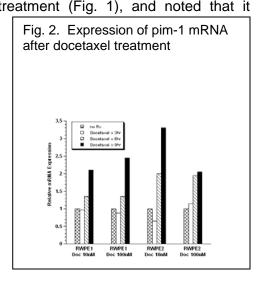


specific aim was to outline a signal transduction pathway activated by docetaxel and involving upregulation of PIM1 expression. This pathway has been substantially defined. Using RWPE1 and RWPE2 (not shown) prostate cells, we noted that docetaxel treatment rapidly leads to an increase in expression of the PIM1 serine/threonine kinase. Expression becomes apparent at 3hrs after drug addition, peaks at 9-12hrs, and returns to baseline by 24hrs (Fig. 1). This increase in expression is accompanied by an increase in pim-1 mRNA, as shown by real time-PCR analysis (Fig. 2). Thus the effects of docetaxel are primarily transcriptional or posttranscriptional.

We next wanted to define mechanisms through transcriptionally which pim-1 could be upregulated. Transcription of pim-1 is known to be activated by STAT transcription factors and by NFkB transcription factors. We examined

the time course of STAT3 activation after docetaxel treatment (Fig. 1), and noted that it paralleled the course of *pim-1* expression. We therefore suspected that docetaxel increased pim-1 expression in a STAT3-dependent manner. This was directly demonstrated by use of decoy oligonucleotides (Fig. 3). Double-stranded DNA oligonucleotides matching a known STAT3 binding site blocked the drug-induced upregulation of pim-1 expression, while a decoy based on a mutated (non-binding) STAT3 site did not. These data therefore establish a linear relationship among the following events: docetaxel treatment→ STAT3 activation → *pim-1* expression.

We hypothesized that NFkB transcriptional activation would be a downstream event in this signal transduction pathway, because many chemotherapy drugs and other stressors are known to activate NFkB. We engineered

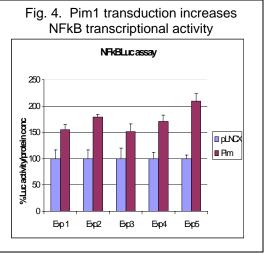


RWPE2 cells to constitutively express a NFkB-dependent promoter/luciferase plasmid, and

found that docetaxel treatment increased NFkB transcriptional activity. We then transiently infected these cells with a *pim-1*-encoding retrovirus. *Pim-1* expression also consistently increased NFkB transcriptional activity (Fig. 4). To determine if the drug-induced increase in

Fig. 3. STAT3 decoy oligonucleotide blocks pim1 increase after docetaxel treatment Oligo М WT М WT Tax 0 0 PIM<sub>1</sub> pStat3 Total Stat3 pERK1,2 B-actin RWPE1

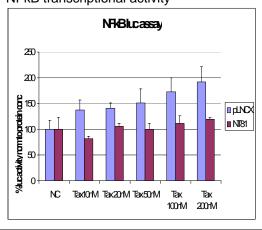
NFkB activity occurred in a *pim-1*-dependent manner, we then infected the reporter cell line with a retrovirus encoding a dominant-negative form of *pim-1*, pimNT81. The



dominant negative *pim-1* cDNA completely blocked the drug-induced upregulation of NFkB activity, demonstrating that *pim-1* expression is a necessary upstream step in the drug-induced activation of NFkB (Fig. 5). In aggregate these studies establish a signal transduction pathway

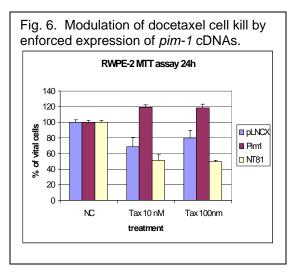
triggered by docetaxel treatment of RWPE2 prostate cancer cells.

Fig. 5. Dominant negative PIM1 (NT81) blocks docetaxel-induced activation of NFkB transcriptional activity



cDNA markedly reduced cell death. In contrast, expression of the dominant negative NT81 cDNA enhanced cell death after docetaxel treatment. These data demonstrate that *pim-1* expression can modulate drug-induced cell death, and demonstrate that the survival pathway described above is a legitimate target for pharmacologic intervention. These data will be presented at the 2006 AACR meeting in poster form (1).

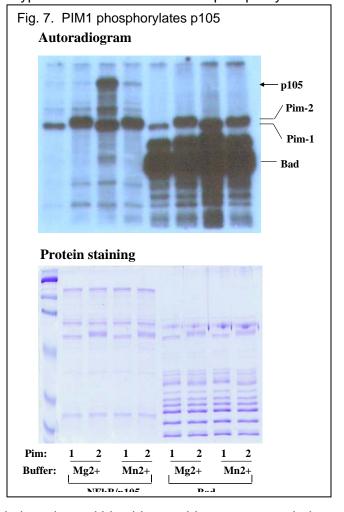
To determine if this pathway modified drug toxicity, we examined the effects of enforced expression of wild-type or NT81 *pim-1* cDNAs of docetaxel cell kill (Fig. 6). Docetaxel produced dose-dependent cell kill in RWPE1, 2 cells. Enforced expression of wild-type *pim-1* 



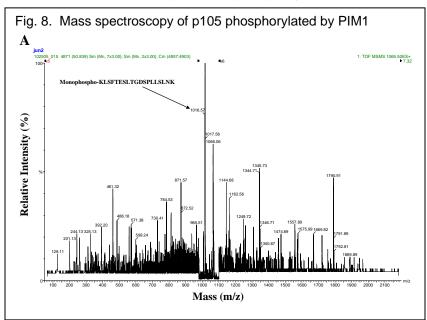
The goal of specific aim #2 was to define pathways through which the PIM1 kinase could activate NFkB transcriptional activity. We had hypothesized that PIM1 would phosphorylate the

NFKB1/p105 precursor protein on serine-937, leading to proteolytic cleavage of the protein with release of active p50 protein as well other sequestered **NFkB** as components and the TPL2 kinase. A major goal of this specific aim was to identify the phosphorylation site on p105. We have used a variety of biochemical methods to accomplish the unambiguous identification. We initially expressed the full-length p105 protein in bacteria. This was reacted in a variety of in vitro kinase reactions with recombinant PIM1 or PIM2 enzymes. PIM1 strongly phosphorylated p105, but only in presence of manganese, magnesium. PIM2 was a much weaker kinase (Fig. 7).

To demonstrate the site of phosphorylation we used mass spectroscopy of tyrpsindigested fragments of p105 that had been phosphorylated in vitro. We had previously PIM1-dependent demonstrated that phosphorylation happens exclusively on serine. Fragments were separated by LC/MS/MS analvsis and mass/charge The predicted rations were determined. peptide fragment that would result from phosphorylation serine-937 at was recovered, with a mass of 1016 (Fig. 8).

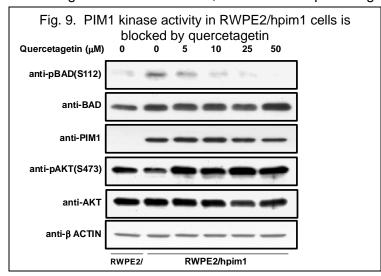


Since there are several potential phosphorylation sites within this peptide, we proceeded to



sequence the peptide with mass spectroscopy. the fragment corresponding to phosphoserine-937 was not recovered. These data unambiguously demonstrate that the maior phosphorylation site of PIM1 on p105 is serine-937. We also found evidence MALDI-MS that serine-851 may also be phosphorylated by PIM1. These data have not vet been confirmed by LC/MS/MS analysis.

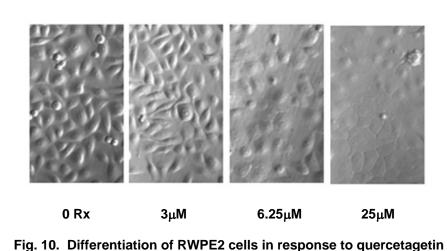
The third specific aim proposed to use small molecule inhibitors of the PIM1 kinase as molecular probes to determine their effect on docetaxel sensitivity. We have submitted a report describing one such molecule, the flavonol quercetagetin (2). We have demonstrated that



quercetagetin in a moderately potent  $(IC_{50} = 340 \text{nM}, \text{ specific, and cell-})$ permeable inhibitor of PIM1 activity in prostate cancer cells. Key data include the demonstration that quercetagetin in competitive with ATP. A crystal structure of PIM1 in complex with quercetagetin, or with three other flavonoids, has been determined. We have also shown that quercetagetin is able to inhibit the activity of the PIM1 kinase in prostate cancer cells at an IC50 of about 5.5μM. Interestingly the activity of the AKT kinase is not inhibited at all under

RWPE2 prostate cancer cells treated with guercetagetin develop conditions (Fig. 9). morphologic changes consistent with differentiation or senescence, accompanied by profound

growth inhibition, at concentrations that inhibit PIM1 kinase activity (Fig. 10).



#### **KEY RESEARCH ACCOMPLISHMENTS**

- Definition of a novel survival pathway activated by docetaxel treatment, and involving sequential activation or expression of STAT3, PIM1, and NFkB components.
- Identification of serine-937 as the major phosphorylation site for PIM1 on the p105/NFKB1 precursor protein
- Identication of quercetagetin as a moderately potent and specific, cell-permeable PIM1 kinase inhibitor
- Abstract accepted for presentation at the annual AACR meeting, Washington DC, April, 2006

## REPORTABLE OUTCOMES

None in 01 year

## **CONCLUSIONS**

Our data demonstrate that PIM1 is a critical component of a survival/stress pathway activated by docetaxel treatment of prostate cancer cells. This pathway leads to activation of NFkB-dependent transcription, possibly by phosphorylation of p105/NFKB1 by PIM1 at serine-937. Targeting PIM1 kinase activity with quercetagetin, or other PIM1 kinase inhibitors, may lead to additive or synergistic cell kill following docetaxel treatment.

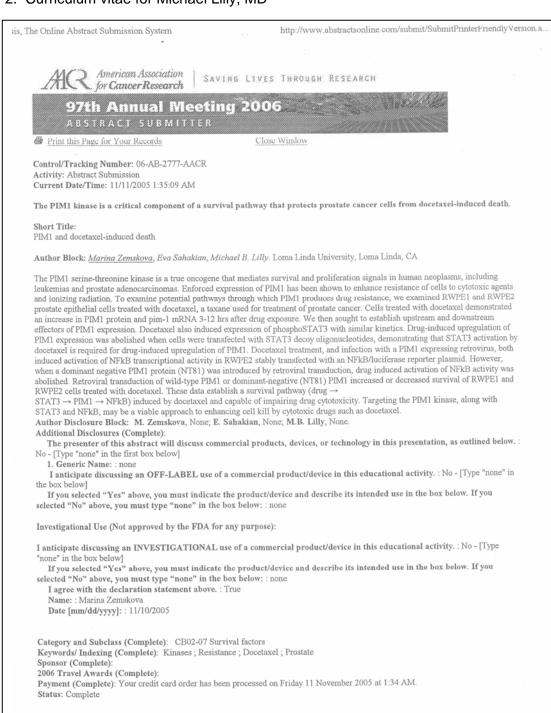
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- Zemskova M, Sahakian E, Lilly M: The PIM1 kinase is a critical component of a survival pathway that protects prostate cancer cells from docetaxel-induced death (abstract #2777), approved for presentation at 97<sup>th</sup> Annual Meeting of AACR, Washington, DC, April 2006.
- 2. Holder S, Zemskova M, Bremer R, Neidigh JW, Lilly MB: Characterization of a potent and selective small-molecule inhibitor of the PIM1 kinase (submitted to Molecular Cancer Therapeutics, 2006).

#### **APPENDIX**

Research data are presented throughout the body of this report. The appendix contains two items:

- AACR abstract #2777, approved for presentation at the 97<sup>th</sup> Annual Meeting, April, 2006, entitled "The PIM1 kinase is a critical component of a survival pathway that protects prostate cancer cells from docetaxel-induced death" by M. Zemskova, E. Sahakian, M. Lilly.
- 2. Curriculum vitae for Michael Lilly, MD



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Updated 1/2006

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1978-1981

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6/82-10/88 Assistant Professor of Medicine.

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6/89-9/98 Associate Professor of

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4/96-10/96 Visiting Scientist, The Walter and Eliza Hall Institute for Medical Research, Melbourne,

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9/98 – present Professor of Medicine & Microbiology

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**Hospital Positions:** 

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1981-1988 Attending Physician, University of

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1981-1988 Staff Oncologist, Birmingham VA Medical

Center, Birmingham, AL

1989-1998 Staff Oncologist, Seattle VA Medical Center, Seattle, WA

1998-present Attending Physician, Loma Linda University Medical Center, Loma Linda, CA

Honors: 1974 Alpha Omega Alpha

1980 National Research Service Fellow

1981 Fellow, American College of Physicians

**Board Certification:** 1979 American Board of Internal Medicine

1980 ABIM Subspecialty Exam, Hematology 1981 ABIM Subspecialty Exam, Med. Oncology

Licensure: Alabama Medical License #7730 (3/77-12/91)

Washington State License #27864 (12/91 – 12/00) California Medical License #G84932 (12/98 – present)

**Organizations:** Fellow, American College of Physicians

Member, American Society of Hematology Member, American Society for Bone Marrow

Transplantation

Member, American Society for Gene Therapy

**National** Member, ad hoc study sections for NIH:

**Professional** 1987 Diagnostic Radiology

**Responsibilities** 1988 Experimental Therapeutics

Member, site visit team for program project

Dr. George Hahn, PI; Stanford University 1988, 1989

Member, site visit team for program project
Dr. Bayard Clarkson, Pl, Memorial-Sloan
Kettering Inst. 1007

Kettering Inst., 1997

Special Local Responsibilities

Member, Scientific Review Subcommittee

SVAMC, 1993, 1994, 1997

Member, Research & Development Committee

SVAMC, 1994, 1995

Member, Hospice Advisory Committee

SVAMC, 1994, 1995

Board Development Committee, Leukemia & Lymphoma Society (Southern California Chapter),

2003

**Consultant** Cetus Corporation (1986)

EncorePharma (2001-present) Myriad Genetics (2002-present)

Exelixis Pharmaceuticals (2005-present)

**GRANTS & CONTRACTS (PRINCIPAL INVESTIGATOR)** Note: This listing does not include multicenter clinical trials in which Dr. Lilly was the local principal investigator.

National Institutes of Health F32CA27980 *Hyperthermia of animal and human tumors*; 7/80-6/82

National Institutes of Health R01CA18138-11 Prediction of thermal tolerance by in vivo NMR spectroscopy; 7/82-6/83

National Institutes of Health R01CA36790 Assessment of hyperthermia by in vivo <sup>31</sup>P-NMR spectroscopy; 9/84-9/87

Cetus Corporation Characterization of a human granulocyte CSF; 7/85-6/86

National Institutes of Health R01CA45672 *Cytokine signaling in myeloid leukemia*; 9/87-10/98

VA Merit Review Award Non-protein hematopoietic agents; 10/90-4/97

March of Dimes Birth Defects Foundation Characterization of a 28kd protein related to G-CSF; 7/93-6/96

Lymphoma Research Foundation of America *Mechanism of action of the pim-1 oncogene*; 7/95-7/96

Roche Pharmaceuticals Preclinical study of Roferon and bryostatin 1 in a melanoma model; 1/98-12/99

Department of Defense, National Medical Technology Testbed #76-FY99: *Cell-permeable proteins for cell regulation*. 12/99 – 7/02

Leukemia Society of American Translational Award *Propionic Acid Analogues for CLL*. 9/1/01 – 8/31/05

Celgene Corporation, *Phase I-II trial of combined GM-CSF (sargramostim) and thalidomide for hormone-refractory prostate cancer* (5/02-5/04).

National Institutes of Health R03CA107820 *Molecular Targets of NSAIDs in Prostate* Cancer; (5/1/04 – 4/30/07)

Department of Defense, CDMRP Prostate Cancer Program PC040635 *Pim-1: A Molecular Target to Modulate Cellular Resistance to Therapy in Prostate Cancer* (10/04 – 10/07)

Pharmion Corporation, Use of azacytidine to reverse silencing of GST-p1 in early prostate cancer. (10/05 – 10/07)

## **GRANTS and CONTRACTS (Co-investigator)**

National Institutes of Health R01CA097043 *Molecular pathology of 2-deoxy-5-azacytidine*; L. Sowers, PI; Michael Lilly, co-investigator (10% FTE). 7/1/03 – 6/30/08

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