<table>
<thead>
<tr>
<th>Title</th>
<th>The Expression Level of Human Thymidine Phosphorylase in Urinary Tract Cancer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Author(s)</td>
<td>Sawase, Kenji</td>
</tr>
<tr>
<td>Citation</td>
<td>Acta medica Nagasakiensia. 1998, 43(1-2), p.29-32</td>
</tr>
<tr>
<td>Issue Date</td>
<td>1998-06-30</td>
</tr>
<tr>
<td>URL</td>
<td><a href="http://hdl.handle.net/10069/16101">http://hdl.handle.net/10069/16101</a></td>
</tr>
<tr>
<td>NAOSITE</td>
<td><a href="http://naosite.lb.nagasaki-u.ac.jp">http://naosite.lb.nagasaki-u.ac.jp</a></td>
</tr>
</tbody>
</table>

This document is downloaded at: 2018-12-14T23:14:26Z
The Expression Level of Human Thymidine Phosphorylase in Urinary Tract Cancer

Kenji Sawase

Department of Urology, Nagasaki University School of Medicine

Human thymidine phosphorylase (dThdPase) catalyses reversible phosphorylation of thymidine to deoxyribose-1-phosphate and thymine, and is identical to Platelet-derived endothelial cell growth factor (PD-ECGF), which is an angiogenic factor purified from human platelet. In this study, we determined dThdPase expression levels in urinary tract cancer by enzyme-linked immunosorbent assay and determined whether they correlated with tumor stage and grade in bladder cancer. The mean level of dThdPase expression in cancer tissue was higher than in normal tissue in bladder cancer (41.1 ± 50.7 unit/mg protein vs 17.6 ± 17.8 unit/mg protein) and in upper urinary tract cancer (52.4 ± 53.1 unit/mg protein vs 17.6 ± 17.8 unit/mg protein). dThdPase expression level was correlated with tumor grade and stage in bladder cancer. These data suggest that dThdPase/PD-ECGF is an important angiogenic factor for growth and extension of urinary tract cancer.

Key words: human thymidine phosphorylase (dThdPase); platelet derived endothelial cell growth factor (PD-ECGF); transitional cell carcinoma

Introduction

Tumor angiogenesis is the formation of new vessels toward and within a tumor, resulting in tumor growth and metastasis. Recently, there have appeared several reports concerning angiogenesis in bladder cancer. Tumor angiogenesis was reported as an independent prognostic indicator for patients with invasive transitional cell carcinoma of the bladder in a microvessel density study. Increased expression of basic fibroblast growth factor and vascular endothelial cell growth factor, which are well-known angiogenic growth factors, have been recognized in bladder cancer.

Human thymidine phosphorylase (dThdPase), an enzyme involved in pyrimidine nucleotide metabolism, is known to be identical with Platelet-derived endothelial cell growth factor (PD-ECGF), an angiogenic factor. PD-ECGF is expressed in macrophages,stromal cells, and glial cells of normal tissue and is not expressed in normal gastrointestinal epithelium, bladder epithelium, or smooth muscle by the immunohistochemical method. The PD-ECGF/dThdPase expression levels in several kinds of cancer (colon, breast, and gastric) were higher than those in the surrounding normal tissues. In this study, we investigated PD-ECGF/dThdPase expression levels and sites of dThdPase/PD-ECGF in urinary tract cancer and surrounding normal tissues using enzyme-linked immunosorbent assay (ELISA) and immunohistochemical methods.

Patients and methods

Patients

Specimens were obtained from 13 patients (11 men, 2 women) with upper urinary tract transitional cell carcinoma (TCC) and 35 patients (27 men, 8 women) with bladder TCC. The pathological stage and grade of the tumor were diagnosed by special pathologists according to TNM criteria.

Reagent

Mouse monoclonal antibody MoAb 104B, MoAb 232-2 and MoAb 654-1, which recognizes human dThdPase, was kindly provided by Nippon Roche Co. Ltd., Tokyo, Japan. These monoclonal antibodies were prepared using dThdPase purified from human colon cancer xenograft HCT 116 in mice.

ELISA

Mouse monoclonal antibody MoAb 104B, MoAb 232-2 and MoAb 654-1, which recognizes human dThdPase, was kindly provided by Nippon Roche Co. Ltd., Tokyo, Japan. These monoclonal antibodies were prepared using dThdPase purified from human colon cancer xenograft HCT 116 in mice.
centrifuged at 105,000 xg for 90 min. The supernatant was
dialyzed overnight against 20 mM potassium phosphate
buffer (pH 7.4) and 1 mM 2-mercaptethanol, and was then
used as a source of crude dThdPase. The protein concentra-
tion was determined by the method described by Lowry et
al. The amount of dThdPase was calibrated with that
measured for standard solutions, and was evaluated as
unit/tissue protein volume (mg)9.

A 96-well microtiter plate (Nunc-immuno-plate Maxi-
sorp, Nunc, Roskilde, Denmark) was incubated at 4°C
overnight with 10 μg/ml of the dThdPase MoAb 104B in 10
mM phosphate buffered saline solution (PBS, pH 7.6). The
plate was coated with 3% (w/v) skim milk in PBS (block-
ing buffer) for 1 hour at room temperature. The plate was
washed with PBS containing 0.05% Tween 20 and 0.05%
sodium azide and kept at 4°C until use. Test samples and
standard solutions of dThdPase, which are HCT 116 tumor
homogenates serially diluted with a blocking buffer, were
dispensed onto the plate coated with antibody. The plate
was incubated [1] at 37°C for 1 hour and then washed with
0.05% Tween 20 in PBS ; [2] incubated with MoAb 232-2 at
1 μg/ml in blocking buffer for 1 hour at 37°C and washed ;
[3] incubated with 2000-fold diluted anti-mouse IgG
conjugated with horseradish peroxidase (Bio-Rad,
Hercules, CA) for 30 min at 37°C and washed ; [4] incu-
bated with a substrate solution containing 3,3',5,5'-
tetramethylbenzidine (TMB) and H2O2 (TMB microwell
peroxidase substrate system, KPL, Goithersgurs, MD) for
10 to 20 min at room temperature. The peroxidase reaction
was stopped by the addition of 1 M phosphate solution,
and the amount of dThdPase sandwiched with the two
anti-dThdPase MoAb was estimated by measuring its
absorbency at 450 nm with a plate reader (Bio-Rad, model
3550).

Results

PD-ECGF/dThdPase expression in transitional cell carci-
noma and surrounding normal tissue

PD-ECGF/dThdPase expression of bladder cancer tissue
was higher than that of the normal tissue (41.1 ± 50.7
unit/mg protein vs 17.6 ± 17.8 unit/mg protein). The
expression level in upper urinary tract cancer tissue was
also higher than that of the normal tissue (52.4 ± 53.1
unit/mg protein vs 17.6 ± 17.8 unit/mg protein) (Fig. 1).
There was a significant difference between cancer and
normal tissue.

<table>
<thead>
<tr>
<th></th>
<th>bladder cancer tissue</th>
<th>bladder normal epithelium</th>
<th>upper urinary tract cancer tissue</th>
<th>upper urinary tract normal epithelium</th>
</tr>
</thead>
<tbody>
<tr>
<td>dThdPase expression level (unit/mg protein)</td>
<td>41.1 ± 50.7</td>
<td>17.6 ± 17.8</td>
<td>52.4 ± 53.1</td>
<td>13.9 ± 8.6</td>
</tr>
<tr>
<td>p-value</td>
<td>p=0.01</td>
<td>p=0.03</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Fig. 1 dThdPase expression level in normal epithelial tissue and cancer tissue.

Relationship between dThdPase expression level and pathological stage and grade in bladder cancer

The mean expression levels were 94.8 ± 80.5 unit/mg
protein in invasive tumor, 30.5 ± 22.6 unit/mg protein in
T1 tumor, and 9.9 ± 7.7 unit/mg protein in Ta tumor (Fig.
2). Thus, the level of dThdPase expression was increased in
progressing stages of bladder cancer. There was a signifi-
cant difference in dThdPase expression level between Ta
and T1 (p = 0.04), as well as between Ta and invasive
tumor (p = 0.02). The level of dThdPase expression in G3
bladder cancer (61.9 ± 64.9 unit/mg protein) was 3 times as
high as in G1 (20.4 ± 12.9 unit/mg protein) and twice as
high as in G2 (34.7 ± 47.0 unit/mg protein). There was a
significant difference in dThdPase expression between G1
and G2 or G3. Elevation of dThdPase expression was found
to parallel increases in histologic grade and progression of
bladder cancer (Fig. 3).
Fig. 2  dThdPase expression level in superficial (stage Ta and T1) and invasive (stage T2-T4) bladder cancer.

Fig. 3  dThdPase expression level in bladder cancer of different grades.

Immunohistochemistry

The usual pattern of PD-ECGF/dThdPase expression was primarily seen in cytoplasm and sometimes in both the nucleus and cytoplasm in cancer cells (Fig. 4-a). Normal epithelial cells were not stained for PD-ECGF/dThdPase. The interstitial cells and the endothelial cells in tumor vessels were positively stained for PD-ECGF/dThdPase in several patients (Fig. 4-b). Furthermore, dThdPase immunoreactivity in interstitial cells was observed in patients with highly dThdPase expression.

Discussion

There are 2 previous studies about the relationship between PD-ECGF/dTdrPase expression and tumor grade and stage in bladder cancer. Kubota et al. examined...
dThdPase activity by enzyme assay, and Mizutani et al. examined levels of PD-ECGF expression by high performance liquid chromatography and enzyme-linked immunosorbed assay. As in our study, their findings suggested a correlation between PD-ECGF/dThdPase expression and tumor stage and grade. In the present study, the author demonstrated that the expression of dThdPase was increased in urinary tract cancer compared with surrounding normal tissue. In bladder cancer, stage progression and increased pathological grade correlated with dThdPase expression. Furthermore, the expression of dThdPase in T1 bladder cancer was significantly higher than that in Ta bladder cancer, and there were no significant differences between Ta cancer tissue and normal epithelium. These results suggested that submucosal infiltration of cancer cells may be the first step in inducing the expression of dThdPase. However, further studies are needed to clarify the relationship between dThdPase expression and tumor extension.

Angiogenesis is induced by various angiogenic factors produced by cancer cells or non-malignant cells that infiltrate the cancer. In this study, dThdPase immunoreactivity was observed not only in cancer cells but also in interstitial cells in patients with highly dThdPase expressing. These results suggest that dThdPase/PD-ECGF may be produced by cancer cells and interstitial cells in urinary tract cancer.

5'-Deoxy-5-fuluorouridine (5'-dFUrd : Furtulon®) exhibits antitumor activity through its conversion to 5-fluorouracil by dThdPase. Clinically, high stages and grades of urinary tract cancer have more malignant potential, and a high incidence of recurrence and progression is a serious problem. In this study, a high-stage and high-grade tumor expressed a high level of dThdPase. Therefore, treatment with 5'-dFUrd may be effective in these tumors.

In conclusion, the current study demonstrated that the expression of dThdPase/PD-ECGF was increased in urinary tract cancer compared with normal tissue, and elevation of dThdPase/PD-ECGF expression correlated with progression stage and grade increase in bladder cancer.

Acknowledgment

The author thanks Dr. Koichiro Nomata and Prof. Yutaka Saito for their helpful direction and review of this study, and also thanks Dr. Naoki Nishimura, Dr. Shuji Yamashita and Dr. Tsutomu Sakuragi for their kind gift of the specimens.

References