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# Gene expression in human thyrocytes and autonomous adenomas reveals suppression of negative feedbacks in tumorigenesis

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The cAMP signaling pathway regulates growth of many cell types, including somatotrophs, thyrocytes, melanocytes, ovarian follicular granulosa cells, adrenocortical cells, and keratinocytes. Mutations of partners from the cAMP signaling cascade are involved in tumor formation. Thyroid-stimulating hormone (TSH) receptor and  $G_{\alpha}$  activating mutations have been detected in thyroid autonomous adenomas,  $G_{\alpha}$  mutations in growth hormone-secreting pituitary adenomas, and PKAR1A mutations in Carney complex, a multiple neoplasia syndrome. To gain more insight into the role of cAMP signaling in tumor formation, human primary cultures of thyrocytes were treated for different times (1.5, 3, 16, 24, and 48 h) with TSH to characterize modulations in gene expression using cDNA microarrays. This kinetic study showed a clear difference in expression, early (1.5 and 3 h) and late (16–48 h) after the onset of TSH stimulation. This result suggests a progressive sequential process leading to a change of cell program. The gene expression profile of the long-term stimulated cultures resembled the autonomous adenomas, but not papillary carcinomas. The molecular phenotype of the adenomas thus confirms the role of long-term stimulation of the TSH–cAMP cascade in the pathology. TSH induced a striking up-regulation of different negative feedback modulators of the cAMP cascade, presumably insuring the one-shot effect of the stimulus. Some were down- or nonregulated in adenomas, suggesting a loss of negative feedback control in the tumors. These results suggest that in tumorigenesis, activation of proliferation pathways may be complemented by suppression of multiple corresponding negative feedbacks, i.e., specific tumor suppressors.

cyclic AMP | microarrays | papillary tumors | thyrotropin

**T**ight regulation of the second messenger cAMP is of crucial importance for cells because it regulates function, differentiation, and proliferation (1). In cells in which cAMP stimulates growth, activating mutations in partners of this pathway induce uncontrolled growth. In most benign thyroid autonomous adenomas, activating mutations have been found in the thyroid-stimulating hormone (TSH) receptor (TSHR) (2) and, to a lesser extent, in the  $G_{\alpha}$  protein, an activator of the cAMP-producing adenylyl cyclase (1, 3). These mutations result in a TSH-independent growth and lead to hyperfunction (1). In addition, activating mutations of the  $G_{\alpha}$  protein have been detected in growth hormone-secreting pituitary adenomas (4) and inactivating mutations in the type I- $\alpha$  regulatory subunit inhibiting protein kinase A (PKAR1A) in Carney complex, a multiple neoplasia syndrome (5).

Our knowledge of the genes regulated by the cAMP–protein kinase A cascade and its uncontrolled activation is still sketchy (6). To gain more insight into the cAMP-activated signal transduction cascade in tumors, human primary cultures of thyrocytes treated for different times with the TSH growth and differentiation stimulus

were used as a model. Thyrocytes in primary culture are expected to be better models than immortalized cell lines that are already well on the way to transformation. Cells under prolonged stimulation by TSH should be an informative model of the thyrocytes chronically stimulated by the same cascade in autonomous adenomas (7). First, these cultures contain only thyrocytes, and therefore thyrocyte-specific gene expression is studied without interference of other cell types (8). Second, cell-culture conditions are strictly controlled. The cells are submitted to a single stimulus at a time, and the exposure to the stimulus can be exactly timed. Third, TSH-treated and untreated cells are handled identically at all time points; hence, artifacts related to specimen handling are greatly reduced.

In this study, primary thyrocytes were stimulated by TSH for various times, and their gene expressions were analyzed by using microarrays. The results demonstrate a sequential program of gene expression after TSH stimulation and a similarity of gene expression between cells submitted to prolonged TSH stimulation and autonomous adenomas, but not with papillary tumors. Interestingly, a number of genes that were up-regulated in the cultures treated with TSH are involved in negative feedback mechanisms demonstrating the importance of the natural brakes of the activating pathway, some of which disappear in adenomas.

## Materials and Methods

**Primary Culture of Human Thyrocytes.** Thyroid tissue was obtained from seven human subjects undergoing surgery for Graves' disease, solitary or multiple nodules (either hyperfunctioning or hypofunctioning). Nodules were always removed for pathology, and only separate, healthy tissues were used for the preparation of the cell cultures. Protocols were performed according to the rules of the ethic committees of the institutions. Follicles were prepared as described in ref. 9. Cultures then were stimulated with 0.3 milliunits/ml bovine TSH (Sigma) during 1.5, 3, 16, 24, or 48 h or were treated for 24 h with  $10^{-5}$  M forskolin. At each time point, controls were included.

**Tissue Samples.** Diagnosis of autonomous adenomas was based on the low TSH serum levels, the demonstration by scintigraphy of a highly radioactive nodule with poorly radioactive surrounding and contralateral tissue, and on postsurgical histological analysis demonstrating encapsulation. Validation of the diagnosed identity of the analyzed tumors was made by measuring the increase in sodium/iodide symporter mRNA expression (10).

For the papillary thyroid carcinomas, paired samples of nontu-

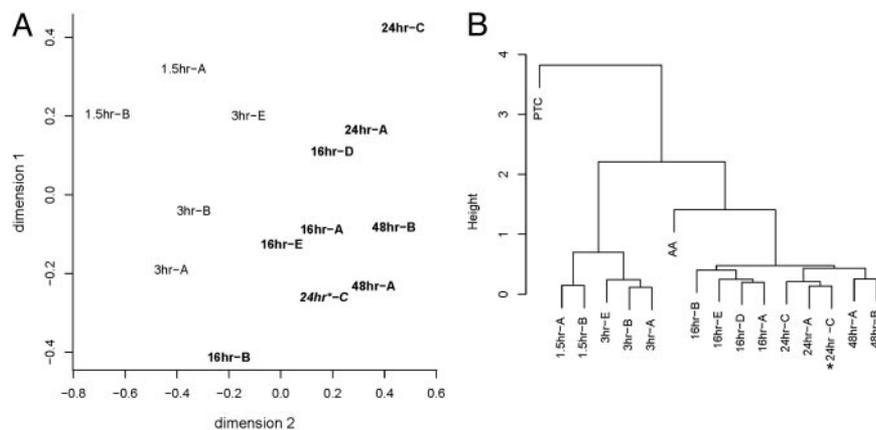
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Abbreviations: MDS, multidimensional scaling; qRT-PCR, quantitative real-time PCR; SAM, Significance Analysis of Microarray; TSH, thyroid-stimulating hormone; TSHR, TSH receptor.

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**Fig. 1.** Visualization of gene expression data. (A) MDS based on five independent human primary thyroid cell cultures, labeled A–E, treated with 0.3 milliunits/ml TSH for 1.5, 3, 16, 24, and 48 h or with  $10^{-5}$  M forskolin for 24 h (24h\*). The MDS is based on all of the genes present on the array. The distortion of distances (stress) between the MDS 2D space and the actual gene space is 13.4%. (B) Hierarchical clustering of the microarray data from five independent human primary thyroid cultures. Labeling is identical to that in A. In addition, shown is the expression profile of a pool of autonomous adenomas (AA) and from a group of papillary tumors (PTC). Clustering was made based on considering only differentially expressed genes in the primary thyroid cell cultures selected by SAM ( $q < 0.05$ ). 24h\* still clusters at 24 h if excluded from SAM analysis (data not shown).

mor and tumor thyroid tissues were obtained from patients undergoing surgery for thyroid disease at the Ambroise Pare Hospital (Boulogne, France) ( $n = 10$ ) or at the Institute of Oncology and Metabolism (Kiev, Ukraine) ( $n = 6$ ). The protocol was approved by the ethics committees of the institutions. All tissues were immediately dissected, placed on ice, snap-frozen in liquid nitrogen, and stored at  $-80^{\circ}\text{C}$  until processing.

**RNA Purification.** Total RNA was extracted from thyroid samples by using a TRIzol Reagent kit (Invitrogen) followed by a purification on RNeasy columns (Qiagen, Hilden, Germany). The RNA concentration was spectrophotometrically quantified, and its integrity was verified by visualization of intact 18S and 28S ribosomal RNA bands after gel migration. For the adenoma samples, equal quantities of total RNA were pooled from the tumors of five different patients and from their normal adjacent tissues. Papillary thyroid tumors were individually analyzed by comparing each tumor with its corresponding adjacent tissue.

**cDNA Synthesis, Labeling, and Microarray Hybridization.** From 3  $\mu\text{g}$  of total RNA, double-stranded cDNA was synthesized followed by production of antisense RNA using an Ampliscribe T7 high-yield transcription kit (11). Next, samples were incubated with 5-(3-aminoallyl)-dUTP (Sigma–Aldrich), followed by a labeling with Cy3 and Cy5 (Amersham Pharmacia Biosciences). Samples were hybridized onto in-house-manufactured slides containing 23,232 spots with 7,541 different identified cDNAs (see *Supporting Materials and Methods*, which is published as supporting information on the PNAS web site).

**Data Analysis. Data acquisition and preprocessing.** Microarrays were scanned with a GenePix 4000B scanner (Axon Instruments, Union City, CA). Expression levels were quantified with GENEXIP PRO 5.0 (Axon Instruments). Each array was scanned at three different photomultiplier gains to achieve a broader range of measurement (12). After merging the multiple scans (12), background fluorescence intensities were subtracted, and negative intensity probes were removed. Spatial- and intensity-based LOESS normalizations (13) were carried out by using functions of the MARRAY 1.6.3 package (14) for the R 2.1.0 language (15). All hybridizations were replicated with dyes swapped.  $\text{Log}_2$  ratios averaged over replicates were considered in subsequent analysis.

**Search for regulated genes.** Regulated genes were selected by a threshold method (see Tables 2 and 3, which are published as supporting information on the PNAS web site) and the Significance Analysis of Microarray (SAM) (15) method as implemented in the SIGGENES package (Version 1.2.17) (16) for R (see Table 4, which is published as supporting information on the PNAS web site). In Tables 2 and 3 (threshold method), features above a tumor/control  $\text{log}_2$ -ratio of 1 in at least two biological replicates at one time point

at least were selected as up-regulated (below  $-1$  defined as down-regulated). For Table 4, SAM was run with  $10^4$  permutations and a moderated five-classes F-statistic, one class per time point. Genes with a  $q$  value of  $<0.05$  were considered regulated.

**Nonsupervised analysis.** Nonsupervised analysis was performed on the basis of between-sample correlation distances. In Fig. 1A, multidimensional scaling (MDS) (as implemented by the isoMDS function in R) was performed on all of the features. In Fig. 1B, average linkage was used for hierarchical clustering (as implemented by the hclust function in R) on the features selected by SAM (Table 4).

**Validation of Gene Expression by Quantitative Real-Time PCR (qRT-PCR).** Bradykinin receptor B2 (*BDKRB2*), dual-specificity phosphatase 2 (*DUSP2*), growth arrest- and DNA damage-inducible gene *GADD45- $\beta$*  (*GADD45B*), homogentisate 1,2-dioxygenase (*HGD*), heat shock 70-KD protein 5 (*HSPA5*), regulator of G protein signaling 2 (*RGS2*), *RGS16*, and SNF1/AMPK-related protein kinase (*SNARK*) mRNA expressions were investigated in four independent cultures per time point and in autonomous adenomas by using qRT-PCR (SYBR Green) (Eurogentec, Liege, Belgium) (see *Supporting Materials and Methods* and also Table 5, which is published as supporting information on the PNAS web site).

## Results

**Human Thyrocytes Treated with TSH Show a Progression in Overall Gene Expression Through Time with a Separation into an Early and Late Program on a Subset of Genes.** Gene expression in thyrocytes was investigated in human primary thyrocyte cultures treated with 0.3 milliunits/ml TSH for 1.5, 3, 16, 24, and 48 h, compared with their nontreated controls for the corresponding time points. Treatment of human thyrocytes with 0.3 milliunits/ml TSH stimulates essentially the cAMP pathway and has a strong effect on differentiation and proliferation (9). Primary thyrocytes were also treated with the adenylate cyclase activator forskolin ( $10 \mu\text{M}$ ) for 24 h. Differentially expressed genes were searched for by using two approaches. First, a gene was considered differentially expressed at a given time point if it was at least 2-fold up or down in two cultures or more (Tables 2 and 3). This threshold method detected 468 regulated spots, representing 141 genes. Second, the F test-based SAM (17) method was used. SAM detects genes with highly consistent regulation among cultures within one time point but shows widely contrasted expression between different time points [ $q < 0.05$ ; i.e., the  $q$  value is a measure of statistical confidence taking into account multiple testing (18)] (Table 4). SAM detected 316 differentially expressed spots, representing 109 genes. SAM takes into account multiple testing, the fact that tens of thousands of genes are being tested at once. Another advantage is that even genes that did not reach the conventional 2-fold modulation could be detected. Genes such as *RGS16* or *BDKRB2*, up-regulated in all





Our analysis of gene expression in primary culture of TSH-stimulated human thyrocytes shows (i) a remarkable congruence of microarray results derived from independent cultures confirmed by qRT-PCR and also with results from reported studies on thyroid cells; (ii) a clear distinction between an early and a late program of gene expression after TSH stimulation; (iii) genes modulated by the TSH-cAMP pathway in thyrocytes with their kinetics and in particular negative feedback modulators of the cAMP pathway; and (iv) a number of genes modulated in both the TSH-treated cultures and the adenomas in a similar or an inverse way.

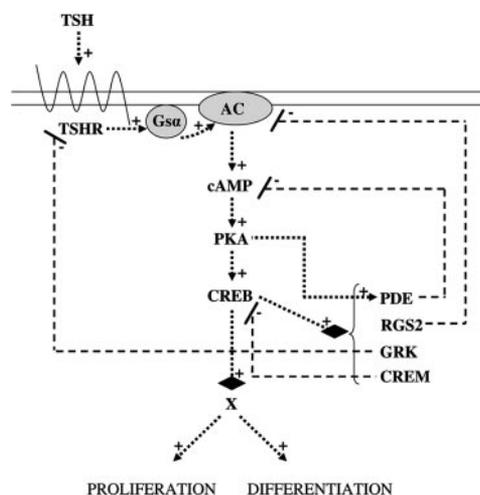
Besides the confirmation by the literature and qRT-PCR, validation of microarray data and the model was done in several ways. (i) Clustering showed that the time course of TSH treatment could be completely recovered even though SAM gene selection and hierarchical clustering operate in a time-independent order. (ii) Clustering of the results of forskolin-treated cells, a known activator of the adenylyl cyclase, further confirmed that the TSH-induced expression profile of the primary cultures reflects cAMP action. In addition, the fact that it grouped with the 24-h TSH-treated cells further shows a similar activation kinetics by TSH and forskolin. (iii) Genes characteristic of TSH stimulation detected by SAM produce a clustering in which TSH-treated cultures are grouped with autonomous adenomas, but far apart from papillary thyroid tumors. Indeed, the latter tumors are malignant and characterized by an activation of growth factor pathway, not the cAMP cascade (35).

A large number of genes that are modulated by cAMP in the primary cultures also were modulated in the autonomous adenomas. Many early up-regulated genes were down-regulated in adenomas, whereas the longer the TSH stimulus, the more genes that were up-regulated in the adenomas. However, this relation was not found for the down-regulated genes. Nevertheless, hierarchical clustering shows that on the whole, autonomous adenomas are the closest to long-term stimulated cultures.

Although the cAMP pathway is activated in TSH-treated cultures and in adenomas, there are discrepancies when comparing both expression profiles. Many discrepancies can be explained by the existence of nonthyrocyte cell populations in the *in vivo* tumor (36). On one hand, the purity of the thyrocyte cultures reveals regulations operating in the thyrocytes themselves independently of the possible variations in gene expression in the different cell populations present in the tissue specimens. On the other hand, a drawback of the model is that the tissue organization and the effect of other cell types on thyrocytes was not studied. In addition, the presence of different cell types in tissues explains the clustering of adenomas with papillary tumors, but not with the TSH-treated cultures, when clustering is based on the overall gene expression (data not shown).

Recently, we showed that a change in cell population occurs in the autonomous adenomas with greatly decreased lymphocytes, macrophage infiltration, and increased endothelial cell content when compared with normal tissue (10). Such changes cannot be studied in our model, but our data show that thyrocytes in culture treated with TSH produce lymphocyte attractants/stimulators such as *IL8* (33), *CXCL2*, or *IRF4*, which are down-regulated in the autonomous adenomas, in line with our previous findings (10). In addition, thyrocytes could be modified by the culturing itself, and the model does not fully mimic the years of stimulation of the cAMP pathway in adenomas. Nevertheless, genes regulated in both models may reflect more the primary physiopathological mechanisms involved.

The gene-expression data reported here relate the molecular and biological phenotypes of stimulated thyroid cells. The profiles show a sharp distinction between early and late effects of TSH. Successive waves of very early, early, and late genes suggest a sequential process induced by the stimulus. Accordingly, the predominance of transcription factors among the very early up-regulated genes likely induce genes responsible for a sustained activation state. Some early down-regulated genes such as *SNARK*, which inhibits biosyntheses, fall in the same category. Conversely, some of the early up-



**Fig. 4.** TSH-cAMP signaling pathway in thyrocytes and its negative feedback regulators. AC, adenylyl cyclase; CREB, cAMP response element binding protein; PKA, cAMP-dependent protein kinase. Data on GRK are from ref. 46. .... $\blacklozenge$ , activation; --- $\flat$ , inhibition; .... $\blacklozenge$ , gene induction.

regulated genes remain up-regulated. These genes, as well as the late up-regulated genes, code for signal-transduction and functional proteins reflecting the passage from one phenotype to another and an on/off regulation between two different states of the system. Similarly, early depressed genes code for transcription factors and signal-transduction proteins, whereas late depressed genes code for signal-transduction, functional, and structural proteins.

The main consequence of TSH action is cAMP accumulation, which induces cell activation, proliferation, and differentiation. Unsurprisingly, genes of proteins involved in specialized (*DIO2*, *ELMO1*, *VAPA*) or general metabolism (mitochondrial, *CYCS*, *ATP5B*; other, *TSPYL4*), transport (*SLC7A7*, *SLC39A14*), protein export (*VAPA*, *SNX1*), and chaperoning (*HSPA5*, *TRAI*, *CANX*, *HSPA9B*) were up-regulated in accordance with the known positive effect of TSH and cAMP on the function, growth, and differentiation of these cells (1). The protein export and chaperoning mediators would certainly help the increased thyroglobulin secretion and turnover by the stimulated cells. The decreased expression of three proapoptotic genes (*DAXX*, *PMAIP2*, *GADD45B*) and the increased expression of two antiapoptotic genes (*HSPA9B*, *BCL2L1*) give some indication about the mechanisms of the antiapoptotic effects of TSH on such cultured thyroid cells (1). There is no clear trend in the regulation of positive and negative regulators of cell mitogenesis.

Comparing gene expression in TSH-treated cultures, autonomous adenomas, and papillary tumors sheds light on the biological function of the genes. Genes regulated in a similar direction in cultured thyrocytes and autonomous adenomas, but that are regulated in the inverse way in papillary carcinomas, might reflect the differentiating action of the TSH-cAMP pathway [*DIO2* (26, 37), *HGD* (38), *FHL1* (39), *ITPR1* (39, 40), *CRABP1* (40, 41), and *ADM* (40)], whereas common expression in the TSH-stimulated thyrocytes, autonomous adenomas, and papillary carcinomas concerns possibly proteins involved in the control or support of cell growth [*EFHD2*, *IER2*, *KLF6* (10), *EGRI* (10), *GADD45B*, and *JUN*]. One puzzling common property of autonomous adenomas and papillary carcinomas is the down-regulation of a number of immediate early genes [*NR4A1*, *JUNB* (10), *KLF10*, and *ZFP36*]. Absence of up-regulation may reflect the relatively low rate of cell proliferation in both tumors (42, 43) and thus the low fraction of cells in early G<sub>1</sub>, but down-regulation is more difficult to explain.

One striking result is the importance of the negative feedbacks induced by the stimulating cascade itself (Fig. 4), leading to the

self-limitation of the effects of this cascade. The enhancement of cAMP accumulation is itself later counteracted by multiple negative feedbacks resulting from the increased transcription of genes such as phosphodiesterases (*PDE1A*, *PDE4B*) (24) and *RGS2*, which inhibits some cyclases [e.g., the III and VI, which are well expressed in human thyroid cells (44, 45)]. These genes are already up-regulated at 1.5 h and are still up-regulated after 48 h of TSH treatment; however, some are down-regulated in the adenomas. In autonomous adenomas, increased transcription of G protein-coupled receptor kinase 3 (*GRK3*) (46) and decreased transcription of some adenylate cyclases have similarly been reported (47). Together with the well described direct activation of some phosphodiesterases by cAMP-dependent kinases (48, 49), these negative feedbacks, already described separately in various thyroid and other cell models (25, 50), account for the well known biphasic character of the cAMP accumulation (1). The induction of a repressor of cAMP-induced genes (*CREM*) (31) operates in the same direction.

The remarkable induction or activation of negative feedbacks on cAMP accumulation and action explains not only the decrease of cAMP levels after the first day (9, 51) but also the brief duration of early immediate gene expression and the one-shot nature of the mitogenic effect in thyrocytes in primary culture (9). It explains why chronic stimulation by TSH in pituitary TSH hypersecretion or by stimulating thyroid receptor antibodies leads only to mild hyperplasia and goiter (52). Conversely, it suggests that the important mitogenesis necessary to generate an autonomous adenoma of 1 g, i.e.,  $\approx 5 \times 10^8$  cells from one mutated cell (>30 divisions), requires additional events besides the initial constitutive activation of the TSHR. The most obvious supplementary events would be the relief of some of the negative feedbacks, i.e., the silencing of the genes involved, thus qualifying as tumor suppressor genes. It is therefore interesting that the up-regulations of *RGS2* and *CREM* observed in

TSH-treated thyrocytes were not found in autonomous adenomas. Also, other negative regulators of cell growth induced by TSH *in vitro* were not modulated or were down-regulated in autonomous adenomas: *IGFBP4*, *RGS16*, *DUSP2*, *PTP4A1*, and *JUNB*. When reviewing the consequences of TSHR-constitutive activation in the genesis of autonomous adenomas, Derwahl *et al.* (53) suggested that other complementary mechanisms must be involved. The suppressed negative feedbacks would be good candidates.

The induction of negative feedbacks by signal-transduction pathways, in particular those of cell growth, is a general, well recognized phenomenon. cAMP induces specific phosphodiesterases; ERK induces *DUSP*, which then inactivates it; NFkB induces its inhibitor IKB; and STATs induce *SOCS*. The main result of this study is that one specific activated signal transduction pathway (cAMP) induces a multiplicity of negative feedbacks, some of them being lost or not regulated in the tumor. It would be interesting to compare mitogenic pathways in primary cultures of other cell types treated with their specific growth-stimulating factor and to investigate whether multiple negative feedbacks also exist and whether they are affected in corresponding tumors. Inactivation of multiple negative feedbacks induced by one specific pathway might be part of the relief of tumor suppressor action in cancer cells (54).

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