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Analysis of 11q22–q23 deletion target genes in B-cell chronic lymphocytic leukaemia: Evidence for a pathogenic role of NPAT, CUL5, and PPP2R1B

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ABSTRACT

Deletion of 11q22–q23 is associated with an aggressive course of B-cell chronic lymphocytic leukaemia (B-CLL). Since only in a subset of these cases biallelic inactivation of ATM was observed, we sought to identify other disease-associated genes within 11q22–q23 by analysing NPAT (cell-cycle regulation), CUL5 (ubiquitin-dependent apoptosis regulation) and PPP2R1B (component of the cell-cycle and apoptosis regulating PP2A) for point mutations and their expression in B-CLL by single-strand conformation polymorphism/sequence analysis of the transcripts and real-time polymerase chain reaction. Though none of the genes were affected by deleterious mutations, we observed a significant down-regulation of NPAT in B-CLL versus CD19+ B cells and of CUL5 in 11q deletion versus non-deletion B-CLL samples and measured reduced PPP2R1B transcript levels in a subset of B-CLL cases. Alternative splicing of PPP2R1B transcripts (skipping of exons 2/3, 3, 9) was associated with a reduced activity of protein phosphatase 2A. Together, these results implicate deregulation of the cell-cycle and apoptosis regulators NPAT, CUL5 and PPP2R1B and a role for these genes in the pathogenesis of B-CLL.

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1. Introduction

B-cell chronic lymphocytic leukaemia (B-CLL) is the most common leukaemia in adults presenting with a highly variable clinical course. Since in B-CLL genomic aberrations are important independent predictors of disease progression and survival, the identification of the involved genes has implications for the design of risk-adapted treatment strategies.¹ Deletion of chromosome region 11q22–q23 represents the second most common chromosome aberration in B-CLL and defines a subgroup of patients characterised by poor sur-

vival.² B-CLL tumour cells show increased survival rates, possibly due to inhibited apoptosis and genetic alteration of genes involved in cell-cycle control and cell survival.³ The consensus 11q deletion region comprises the tumour suppressor gene ATM, but biallelic inactivation of ATM was detected only in about one-third of B-CLL cases with 11q22–q23 deletion, which is in marked contrast to the situation in mantle cell lymphoma, where ATM inactivation was identified as a frequent genetic alteration.^{4–8} To identify a second disease-associated gene, we investigated three candidate genes within the 11q22–q23 consensus deletion region

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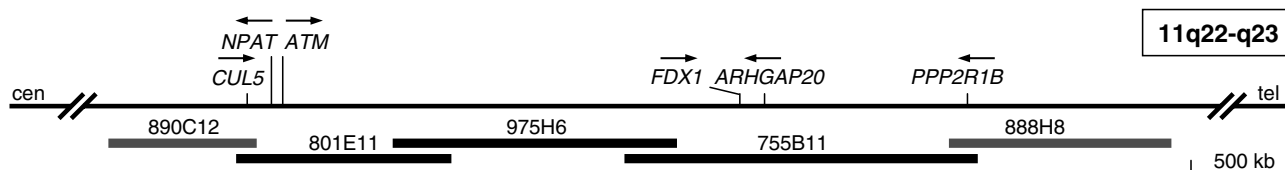


Fig. 1 – Schematic illustration of the critical region within chromosomal bands 11q22–q23. Genetic map with genes and YAC contig: YAC clones (black) 801E11, 975H6, and 755B11 represent the consensus deletion region in B-CLL.¹⁶

(Fig. 1): (i) PPP2R1B was found mutated in sporadic cases of lung, colon^{9,10} and breast cancer.¹¹ PPP2R1B (PP2A- α) encodes the beta isoform of the constant regulatory subunit A of the protein phosphatase 2A (PP2A), which is implicated in the regulation of many cellular processes including cell-cycle progression and apoptosis by controlling the activity of at least 50 kinases.^{12,13} (ii) NPAT plays a critical role in promoting cell-cycle progression and contributes to cell-cycle regulated histone gene expression.¹⁴ (iii) CUL5 is a component of E3 ubiquitin ligase complexes and is thereby involved in the ubiquitin-dependent degradation and control of the p53 tumour suppressor protein.¹⁵ In order to assess the pathogenic role of PPP2R1B, NPAT and CUL5 in B-CLL, we analysed the genes with respect to their expression and the presence of point mutations in a series of B-CLL cases.

2. Materials and methods

2.1. Patient and control material

The study comprised 66 patients with B-CLL that were diagnosed according to established morphological and immunophenotypical criteria of the German CLL study group. Dual-colour interphase FISH with YACs 801E11, 975H6 and 755B11 detected 11q22–q23 deletions in 42 B-CLLs and 11q23 translocations (not affecting NPAT, CUL5 and PPP2R1B) in two B-CLLs.¹⁶ Sorted peripheral blood B-cells from six unrelated healthy donors (CD19 antibody-coupled beads; Miltenyi, Bergisch Gladbach, Germany) and peripheral blood cells from 51 unrelated healthy probands served as control material. Samples were collected with the patients' consent.

2.2. RNA and DNA preparation

RNA and genomic DNA were extracted from lymphocytes of B-CLL patients, from sorted peripheral blood B-cells, and from mononuclear cells of healthy controls with Trizol reagent according to the manufacturer's instructions (Gibco BRL, Eggenstein, Germany).

2.3. Mutation analyses

By use of gene specific primers, the coding regions of the NPAT and CUL5 transcripts were analysed by SSCP and sequence analysis of RT-PCR products as described previously,⁴ whilst the coding region of PPP2R1B was searched for mutations by direct sequencing of RT-PCR products. All detected nucleotide alterations were verified by analysing the corresponding genomic DNA by PCR amplification and sequence

analysis of the affected exons as described previously.⁴ Primer sequences are shown in Table 1.

2.4. Real-time polymerase chain reaction

After DNaseI digestion, real-time RT-PCR was carried out as described previously.¹⁷ As internal standards, the housekeeping genes lamin B1 (LMNB1; GDB512284), phosphoglycerokinase (PGK; CAA23835), and cyclophilin (PPI; EC5.2.1.8) were used, which had been proven to represent suitable internal controls for normalising B-CLL samples.¹⁸ Each cDNA sample was analysed in triplicate. Primer sequences are shown in Table 1.

2.5. PP2A activity assay

Cell extracts used for the phosphatase assay were prepared as described by Yan and Mymby.¹⁹ Protein phosphatase activity was determined with the Serine/Threonine Phosphatase Assay System (Promega, Mannheim, Germany) according to the manufacturer's instructions. PP2A activity was assessed by 5 nM okadaic acid inhibition; as a control, protein phosphatase activity was also measured in the presence of 5 μ M okadaic acid, which completely inhibits both PP1 and PP2A. Each sample was analysed in triplicate.

3. Results and discussion

Based on FISH analysis, 17 B-CLL cases with monoallelic deletions of chromosome region 11q22–q23 were selected for mutation screening in the remaining copy of the PPP2R1B gene. By direct sequencing of RT-PCR fragments, a silent nucleotide change (216T > C; Y72Y) was detected in one B-CLL and in 1/13 controls, but no deleterious mutation was found. This confirms the results by Zhu and colleagues,²⁰ who did not detect deleterious mutations in B-CLL. Quantitative expression analysis of the gene, however, revealed lower transcript amounts as compared with sorted B cells from probands in about half of 31 B-CLLs analysed (on average, a 3-fold down-regulation), whilst the other half showed expression levels comparable to control cells. The down-regulation was independent of the copy number of the gene (Fig. 2a).

In addition to correctly spliced PPP2R1B transcripts, 7/16 B-CLLs showed alternative splice variants: Skipping of exon 9 from 20% to 50% of the transcripts in five B-CLLs, skipping of exon 3 (60%) and of exons 2/3 (50%) each in one B-CLL. Transcripts lacking exon 3 or exon 9 were previously found in 1/10 B-CLL and two breast tumour samples, respectively.^{11,20} However, the expression of those splicing variants

Table 1 – Oligonucleotide primers for PCR amplifications, sequence and expression analyses

Primer	Gene	Oligonucleotide sequence (5' → 3')
<i>Mutation analysis (RT-PCR, PCR)</i>		
NPAT_REF1A	NPAT (Exon 1)	TTTGCTTTAACTGAGTCTTG
NPAT_REF1B	NPAT (Exon 11)	ATGCTGGGTCTGATCTGTGC
NPAT1	NPAT (Exon 11)	CTGAAGAAGCTATACAGGAC
NPAT2	NPAT (Exon 13)	AGTAGAAGACAGCGAATCTC
NPAT_REF3A	NPAT (Exon 13)	GTGAAATACTACCTGTGTCTG
NPAT_REF3B	NPAT (Exon 16)	AACTGAATGACCTGACGAATC
NPAT_REF4A	NPAT (Exon 15)	AGCACCTGTATGCAATAGAAG
NPAT_REF4B-4	NPAT (Exon 17)	AGGACGAGAGTTTCGCTCAC
PPP_2A	PPP2R1B (Exon 1)	CGCATCAGAGCTCGGGACCG
PPP_2B	PPP2R1B (Exon 15)	TCTCCACCCAGTTAAGAAC
PPP_4A	PPP2R1B (Exon 1)	GAGCAGCGGGTGGAGATG
PPP_4B	PPP2R1B (Exon 15)	GTGACAAGAATCTAGTAAAGG
PPP_NPCR_2	PPP2R1B (Exon 17)	TAAATCTGGGGTATTAGTCTG
PPP_NPCR_4	PPP2R1B (Exon 14)	CAAAAGATTGGACCAATTCTAG
CUL_REF1_1	CUL5 (Exon 1)	GGAGCGCCACGAATTCTCG
CUL_REF1_4	CUL5 (Exon 12)	GCAACATGTCACAGTAATTGG
CUL_REF2_1	CUL5 (Exon 10)	CGTTGAGCAGTTACTTAGAC
CUL_REF2_4	CUL5 (Exon 19)	ATGCTAACTAATGTGATTGGC
CUL_Ex3_4	CUL5 (Intron 3)	TGACAGAAGTATCACTGTGG
CUL_Ex3_5	CUL5 (Intron 2/Exon 3)	ATTCACAGGGATGTGCATGC
<i>Mutation analysis (sequence analysis)</i>		
NPAT_S1	NPAT	CCTTCTAGCAACAACTCAG
NPAT_S2	NPAT	CTGAGTTGTTGCTAGAAGG
NPAT_S3	NPAT	GTGACTGATCCAACAGCG
NPAT_S4	NPAT	CGCTGTTGGATCAGTCAC
NPAT_S5	NPAT	ACCATACACTTTCTCAGAT
NPAT_S6	NPAT	ATCTGAGAAAGTGTATGGTC
NPAT_S7	NPAT	GTCATTCTGCTGCTCAG
NPAT_S8	NPAT	CTGAGCACCAGGAATGAC
NPAT_S9	NPAT	AGCAACAACCATGATGTGC
NPAT_S10	NPAT	GCACATCATGGTTGTTGCT
NPAT_S11	NPAT	CTGATCAGCCTGATATACC
NPAT_S12	NPAT	GGTATATCAGGCTGATCAG
NPAT_S13	NPAT	CCAATGTGTCTCCACCT
NPAT_S14	NPAT	AGGTGGAGGACACATTGG
NPAT_S15	NPAT	TATACAGAGGCACAGCTC
NPAT_S16	NPAT	GAGCTGTGCCTCTGTATA
PPP_S1	PPP2R1B	TTACCTCTCGCACATCTG
PPP_S2	PPP2R1B	GACTGTGAAGCTGAAGTCC
PPP_S3	PPP2R1B	TATGGCTTGGCTCGTGGAC
PPP_S4	PPP2R1B	GGACTTCAGCTTCACAGTC
PPP_S7	PPP2R1B	TATGGCTTGGCTCGTGGAC
PPP_S8	PPP2R1B	GTCCACGAGCCAAGCCATA
CUL_S1	CUL5	AGTACTGAGCCATCAAGATG
CUL_S2	CUL5	TTTCGAACAATACTGTCTTCC
CUL_S3	CUL5	GCAATGAAGCTGGTACATGC
CUL_S4	CUL5	GCATGTACCAGCTTCATTGC
<i>Real-time polymerase chain reaction</i>		
209NPATp2959fwd	NPAT	CCTCGGCAGGTTCTTCATATG
210NPATp3113rev	NPAT	TGACCTGACGAATCCACCAA
211NPATp990fwd	NPAT	TGAAGAAGCTATACAGGACATATTGGAA
212NPATp1165rev	NPAT	CTAGATTAGTTTCATCTGCTAAGACTATACTGG
ATM_TM_1	ATM	TAAGTTTACAGGATCTTCTC
ATM_TM_2	ATM	GTTCTGATGCTAGTAATGG
ATM_TM_3	ATM	GGAGCATTTTGGCATCTAAC
ATM_TM_4	ATM	ATAAGGATCAGCCTCAAGC
191KIAA	ARHGAP20	GAGCGCTCCATCTCTTATCCTG
192KIAA	ARHGAP20	TCAACACTAGCAGAAGGACTGTCC
KIAA_TM_2	ARHGAP20	GGACTGTCCCTGGTAGTAGG
KIAA_TM_5	ARHGAP20	AGGCAGCTGCACCAAGAAG

Table 1 – continued

Primer	Gene	Oligonucleotide sequence (5' → 3')
<i>Real-time polymerase chain reaction</i>		
PPP_TM_1	PPP2R1B	CAGACAGCAATTCCGTTTC
PPP_TM_3	PPP2R1B	AAGGAGGCGCACTGAATC
PPP_TM_2	PPP2R1B	TTCCACTGTTCACTAGTC
PPP_TM_5	PPP2R1B	CCAAAGTCTCAAGGTCATC
CUL_TM_13	CUL5	GCACCCTCGTATTTACAAC
CUL_TM_14	CUL5	TCCATGAGTGCTTCAACG
CUL_TM_15	CUL5	CTGCTTGCCAATTACTGTG
CUL_TM_18	CUL5	AATGAGCTTTATGATACCTC
84CYCLOPHILINfwd	Cyclophilin	GCTCGTGCCGTTTTGCA
85CYCLOPHILINrev	Cyclophilin	GCAAACAGCTCAAAGGAGACG
55PGKfwd	PGK	AAGTGAAGCTCGGAAAGCTTCTAT
56PGKrev	PGK	TGGGAAAAGATGCTTCTGGG
13LAMIN_B1efwd	LaminB1	GCTGCTCCTCAACTATGCTAAGAA
14LAMIN_B1e2rev	LaminB1	TCTTTCGAATTCAGTGCTGCTTC

seems not to be restricted to tumour cells: skipping of exon 3 and exons 2/3 was reported by Baysal and colleagues²¹ for samples of control cases as well, and traces of transcripts with skipped exon 9 were found in 2/13 of our control cases. Possibly, the relative amount of alternative transcripts is critical for a pathogenic effect. All three splicing variants are expected to interfere with the binding properties of PP2A-A β , which coordinates the assembly of the regulatory subunit B and the catalytic C subunit, thereby preventing the assembly of functional trimeric PP2A holoenzymes: (i) in case of skipping of exon 2/3 or exon 9, subunit B cannot be bound to the PP2A holo-enzyme complex, because different parts of the subunit B binding domain of PP2A-A β are lost, though heterodimers of subunits A and C still may be formed; (ii) loss of exon 3 results in premature translation termination and thereby to the loss of the domains for interaction with subunits B and C. To answer the question of whether the expression of altered PP2A-A β protein disturbs the function of the holoenzyme, the activity of PP2A was measured in five B-CLLs with PPP2R1B exon skipping (three cases with exon 9 skipping; one case with exon 2/3 and exon 3 skipping each) and compared to three B-CLLs without exon skipping and also to sorted control B cells. The analysis of these B-CLL cases revealed (i) a lower PP2A activity in most of the analysed tumour samples as compared to non-malignant B lymphocytes and (ii) reduced PP2A activities in all cases with alternative transcripts as compared to the activity in B-CLLs expressing intact transcripts (Fig. 3a). The reduced PP2A activities in the cases with exon skipping are attributable either to the altered function of the variant proteins (most obvious for B30) or at least partly caused by reduced transcript amounts that we observed in 4/5 cases (B3, B19, B14, B15; Fig. 3b). In addition, regulatory mechanisms acting posttranscriptionally/posttranslationally cannot be excluded. The latter mechanisms could also be responsible for a non-correlation of the PP2A activity with the amount of PPP2R1B transcript as observed for the non-skipping cases.

Recent investigations have identified PP2A as a regulator of multiple signalling pathways (including cell division and apoptosis) and as a tumour suppressor: (i) inactivation of PP2A plays a crucial role in the experimental transformation of human cells (induced by SV40 or okadaic acid); (ii) several

studies found alterations of subunits PP2A-A α (PPP2R1A), PP2A-A β (PPP2R1B) and PP2A-B' (PPP2R5C) in human cancers (for review see ¹²). Our data indicate that not mutational inactivation but down-regulated gene expression and alternative splicing of PPP2R1B and PP2A inactivation are associated with the tumourigenesis of B-CLL in a subset of cases. Recently, PPP2R5C was identified as a progression marker in B-CLL down-regulated in progressive as compared to stable B-CLL.²² To elucidate a potential involvement of PPP2R1B deregulation and PP2A inactivation in the progression of B-CLL and to confirm the results of this small-sample sized study, an extended study including clinical data is called for.

In addition to PPP2R1B, the candidate genes NPAT and CUL5 were investigated for point mutations and their expression in B-CLL. By mutation analysis of NPAT in 32 and CUL5 in 20 B-CLL cases with monoallelic 11q22–q23 deletions, several nucleotide substitutions were detected; mutations of obvious deleterious character, however, were not found: in NPAT, three polymorphic changes with comparable allele frequencies in B-CLL ($n = 32$) and healthy controls ($n = 51$) were observed, which are, thus, not regarded to be disease associated: 1620 A/T (L540F; allele A: 0.81 in B-CLL, 0.80 in controls), 1723 A/G (I575V; allele A: 0.56 in B-CLL, 0.59 in controls), 2997 C/A (N999K; allele C: 0.94 in B-CLL, 0.92 in controls). In CUL5, we detected the known polymorphism 225G/A (Q75Q) with a frequency of allele A of 0.35 in B-CLL ($n = 29$) and of 0.38 in healthy controls ($n = 47$), indicating that this genetic variant is not disease associated and not B-CLL predisposing as well. In addition to correctly spliced CUL5 transcripts, all B-CLLs expressed transcripts that lacked exon 4. Although this alternative transcript variant comprised a high proportion of the CUL5 transcripts (50–80% in 18/20 B-CLLs, 10–20% in 2/20 B-CLLs), it is regarded to be rather B cell than tumour specific, since it was found expressed at comparable levels (60–80%) in 4/4 samples of sorted normal B lymphocytes. In addition, the removal of amino acids 79–137 from the protein caused by skipping of exon 4 is not supposed to inactivate CUL5, since several N-terminal internal deletion mutants (e.g. deletion of amino acids 65–93) did not affect the normal (HIV-1 Vif) function of Cul5.²³

Whilst disease associated structural alterations of the NPAT and CUL5 transcripts were not detected in this study,

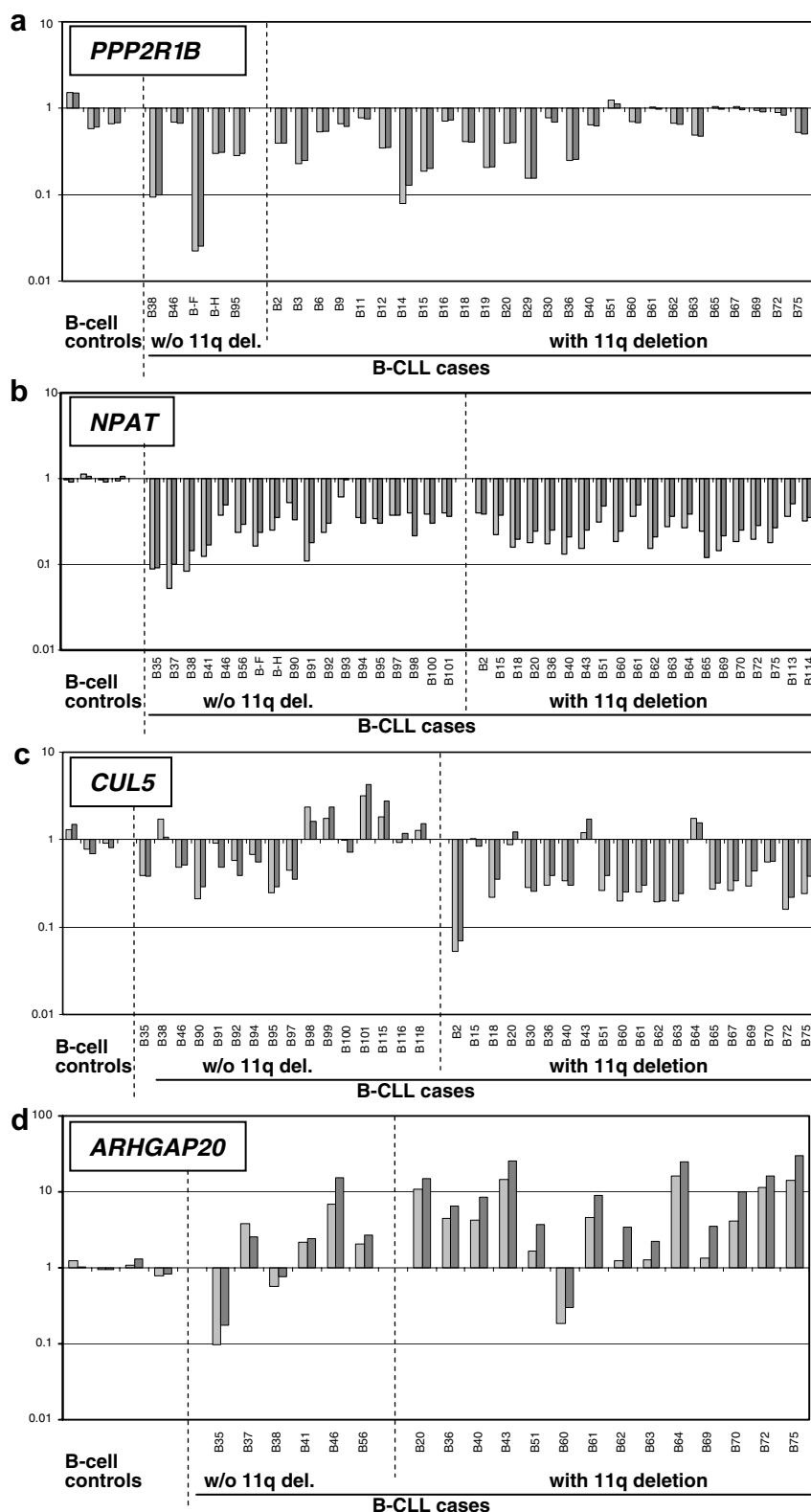


Fig. 2 – Quantitative expression analysis of *PPP2R1B*, *NPAT*, *CUL5*, *ARHGAP20*, and *ATM* in B-CLL. Expression measured by real-time RT-PCR, normalised to three housekeeping genes, where the height of the bars represents the relative gene expression for individual patient and control samples (CD19+ B cells) on a logarithmic scale. From each sample, two regions of *PPP2R1B* (a), *NPAT* (b), *CUL5* (c), *ARHGAP20* (d) and *ATM* (e) were amplified.

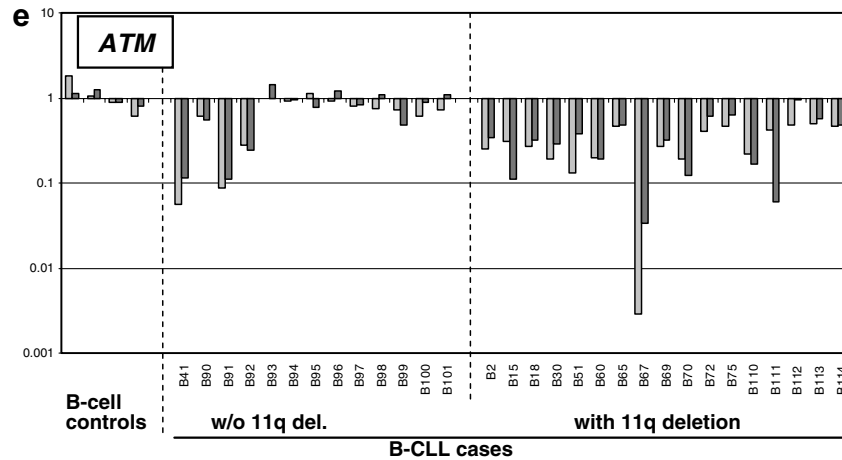


Fig. 2 – continued

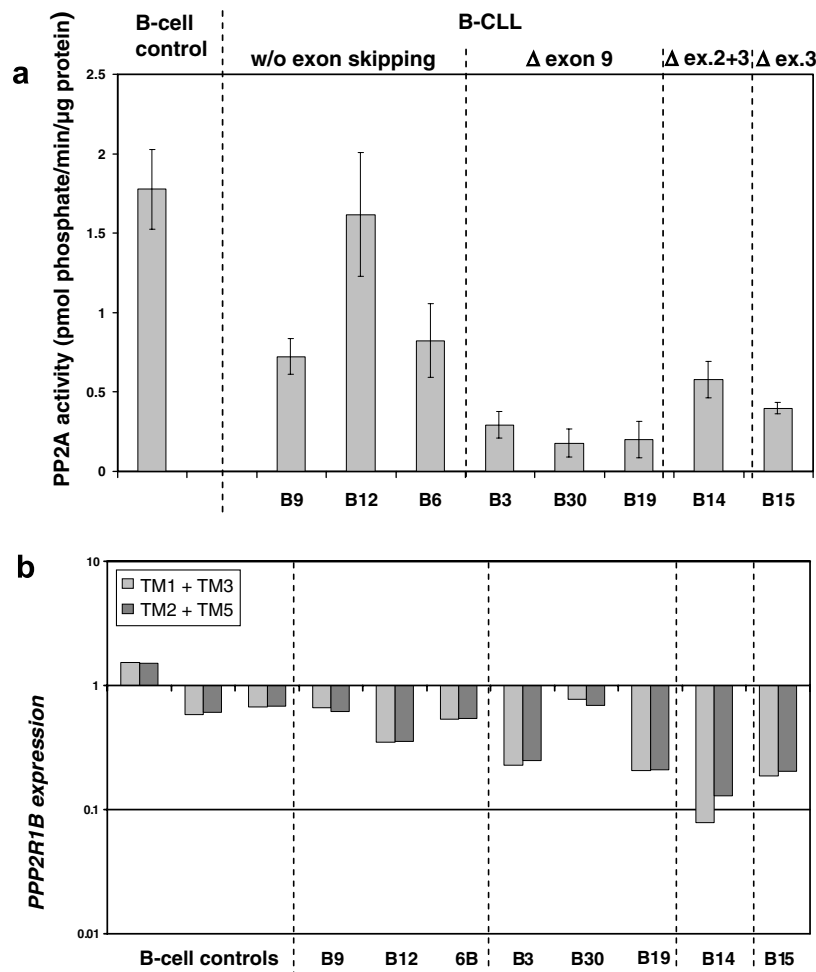


Fig. 3 – Effects of PPP2R1B exon skipping on the activity of the holoenzyme PP2A. (a) PP2A activity was determined in cell extracts of five B-CLL samples that expressed PPP2R1B transcripts lacking exon 9 (B3, B30, B19), exons 2/3 (B14), or exon 3 (B15) in comparison with three B-CLLs expressing intact PPP2R1B transcripts (B9, B12, B6) and with sorted B cell controls. The data shown represent means \pm SD of triplicate assays. (b) PPP2R1B gene expression measured by real-time RT-PCR, where the height of the bars represents the relative gene expression for individual patient and control samples (CD19+ B cells) on a logarithmic scale. Two regions of PPP2R1B were amplified (primer pairs PPP_TM_1/PPP_TM_3; PPP_TM_2/PPP_TM_5). The relative amount of alternatively to correctly spliced transcripts was about 20% in B3 and B19, 20–30% in B30, 40% in B11, 50% in B16 (all Δ exon 9), 50% in B14 (Δ exon 2 + 3), 60% in B15 (Δ exon 3).

the expression of both genes was found to be altered in B-CLL cells: (i) NPAT was highly significantly down-regulated in B-CLL cells as compared with sorted normal B cells ($n = 38$; Mann-Whitney U statistic, $p = 0.0006$); the down-regulation was independent of the copy number of the gene ($p = 0.77$; Fig. 2b). (ii) In most patients with monoallelic loss of *CUL5*, this gene was expressed at a lower level than in control B cells ($p = 0.034$) and in B-CLLs biallelic for *CUL5* ($p = 0.0017$; Fig. 2c). A comparative expression analysis of *ARHGAP20* and *ATM* as two further genes within the critical 11q22–q23 deletion region revealed a general, gene-dosage independent up-regulation of *ARHGAP20* ($p = 0.015$; Fig. 2d) and a down-regulation of *ATM* ($p = 0.0081$; Fig. 2e) in B-CLL versus control B cells. Though sharing a common promoter region with NPAT, the expression of *ATM* was gene-dosage dependent ($p = 0.0024$) and not independent from the copy number as observed for NPAT, which points to an independent regulation of both genes. Together, the expression data of this study indicate, that the observed down-regulation of *PPP2R1B*, NPAT and *CUL5* is, obviously, not caused by a general lowering of expression from all genes in the deletion region, but is the result of gene specific regulation.

Whilst the down-regulation of the cell-cycle regulator NPAT seems to be a common mechanism of B-CLL leukaemogenesis, decreased expression of *CUL5* might contribute to the characteristic tumour progression in patients with 11q22–q23 deletions: as component of E3 ubiquitin ligase complexes, *CUL5* is involved in the regulation of the stability of p53 and in the ubiquitin-dependent control of the apoptotic cell death of normal human lymphocytes.^{15,24} The change in the expression of *CUL5* may conceivably contribute to the impaired response of B-CLL lymphocytes to apoptotic death activation and in particular to the tumour progression in high-risk B-CLL. Thus, together with *PPP2R1B*, NPAT and *CUL5* constitute novel candidate genes potentially involved in the tumorigenic development of B-CLL cells via deregulation of cell cycle and apoptosis.

Conflict of interest statement

None declared.

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