

Comparative morphology and tumourigenicity of human hepatocellular carcinoma cell lines in athymic rats and mice

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Summary. Four human hepatoma cell lines PLC/PRF/5, Hep G2, Sk-Hep 1 and Mahlavu were inoculated subcutaneously into athymic Balb/c nude mice and N/NIH outbred nude rats, producing well encapsulated tumours. The 4 hepatoma tumour types in the athymic rodents differ morphologically. PLC/PRF/5 and Hep G2 cells are well differentiated polygonal cells which resemble normal hepatocytes. Tumour arrangement is characterized by solid masses and trabeculae while stromal support is minimal. In contrast, Mahlavu and Sk-Hep 1 tumours have a sarcomatous appearance and consist of spindle shaped cells arranged in solid masses with a rich stromal support. Tumourigenicity of hepatoma cells in the athymic rodents was dependent on injected cell type, inoculation density, relative immunocompetence of the host and the species of animals used. In nude mice, Sk-Hep 1 cells were the most tumourigenic, while Hep G2 cells were tumourigenic only at very high inoculation densities. In nude rats, which were more resistant to tumour formation, PLC/PRF/5 cells were the most tumourigenic. Pre-treatment of athymic mice and rats with total body irradiation resulted in enhanced tumourigenicity for all hepatoma cell lines tested. This was manifested as increased “take” rates, a decreased latency from tumour cell injection to tumour detection, increased tumour weight, and for PLC/PRF/5 cells an increased invasiveness to adjacent body cavities. Furthermore, following irradiation, the minimal number of injected cells required to produce subcutaneous tumours was markedly reduced in both animal species, regardless of tumour cell type. The protocols described enable the reproducible

growth of human hepatoma tumours in athymic rodents.

Key words: Hepatoma – Athymic mice – Athymic rats

Introduction

Several human hepatocellular carcinoma (HCC) cell lines have been established in culture (Aden et al. 1979; Chang 1954; Chen 1964; Das et al. 1980; Doi et al. 1975; Fogh et al. 1977a; Macnab et al. 1976; Nakabayashi et al. 1984; Owens et al. 1976; Prozesky et al. 1972; Watanabi et al. 1983) and represent a spectrum of transformed cells of hepatic origin with varying grades of differentiation. Growth of such HCC cells as subcutaneous (s.c.) solid tumours in athymic mice has been only partially successful due to relatively low tumourigenicity of hepatoma cells in these animals (Hirohashi et al. 1977; Hirohashi et al. 1979; Knowles and Aden 1980; Shouval et al. 1981; Shouval et al. 1983). Experimental model systems utilizing HCC tumours in athymic mice have provided a tool for the study of HCC, especially with regard to its association with persistent hepatitis B virus infection (Shouval et al. 1981; Shouval et al. 1983). The purpose of the present communication is to characterize and compare the morphology and tumourigenicity of 3, as yet unreported, human HCC cell lines in athymic rats and mice and to compare the data with those obtained in the previously described human hepatoma cell line PLC/PRF/5 (Shouval et al. 1983).

Materials and methods

A colony of athymic nude rats (N:NIH strain) was established from a breeding nucleus obtained from Dr. Carl T. Hansen, the Veterinary Resources Branch, Division of Research Services, National Institute of Health, Bethesda, MD. Homozygous NIH rnu/rnu males were bred with heterozygous NIH rnu/+ females as described for athymic mice (Shouval 1981). Animals were kept in isolation within barrier quarters, under positive air pressure, with HEPA filtered air. Rats were housed in cages with individual filter bonnets for a period of up to 2 years. Twenty-eight to 50 day old animals were used for tumour transplantation.

A breeding colony of athymic Balb/c mice was obtained from Bomholtgaard Ltd., Denmark. Mice were bred and maintained as described (Shouval 1981). Four to six week old mice were used for experiments.

Human hepatoma cell lines PLC/PRF/5 (Alexander et al. 1978; Sk-Hep 1 (Fogh et al. 1977a) and Mahlavu (Prozesky et al. 1972) were grown in culture using RPMI 1640 supplemented with L-Glutamine, non essential amino acids, penicillin, streptomycin, Fungizone® and 10% fetal bovine serum (FBS), referred to as complete medium as previously described (Shouval et al. 1981). The 3 hepatoma cell lines were at passage 100–200, have a human karyotype and were originally double cloned in our laboratories. Hep G2 cells at passage 25–55 in our hands, obtained from Dr. B. Knowles (Wistar Inst., Philadelphia, PA, USA) were grown in Delbeco's Modified Eagles medium containing 10% FBS and supplements as described for RPMI 1640 medium (Shouval et al. 1981).

Subconfluent cultures were treated by trypsin-EDTA and suspended in complete medium (Shouval et al. 1981). Viable cells, as determined by trypan blue exclusion, were injected s.c. at the desired concentration in 0.2 ml serum free medium into the flank of athymic rats and mice as described (Shouval et al. 1981).

Athymic mice and rats were irradiated with 400 and 600 rad respectively (Orthovoltage X-ray source, 175 KVP, HVL 0.2 mm copper, Philips FRG), 10 days before tumour cell injection (Shouval et al. 1983).

Animals were examined every 48 h for tumour appearance. At the end of experiments, they were exsanguinated under tribromoethanol anesthesia (Shouval et al. 1981) and weighed. Tumour, liver, spleen, lungs, kidneys and lymph nodes were excised and weighed. Organ and tumour weights were expressed in mg/g body weight. Tissues were fixed in 10% buffered formaldehyde and embedded in paraffin. Sections (5 micron) were stained with haematoxylin eosin. Tumour sections were also stained for reticulin (Gomori), connective tissue (Masson trichrome), glycogen (PAS, PAS Diastase), iron (Prussian blue), mucin (Mucicarmine), fat (oil red), bile (Fouchet), copper (rubeanic acid), HBsAg (anti-HBs) and alpha fetoprotein (anti-AFP). All specimens were examined by 3 independent observers.

For electron microscopy tumour tissue was fixed in 4% formaldehyde – 1% glutaraldehyde solution (McDowell 1978). Samples were rinsed in 0.1 M cacodylate buffer containing 8.5% sucrose and post fixed in 2% OsO₄ in veronal acetate buffer, pH 7.4. En block staining with uranyl acetate was then carried out followed by dehydration through graded ethanol solutions and embedding in Epon 812. Thin sections were cut with an LKB Ultratome III, mounted on bare grids and stained with lead citrate. Specimens were examined and photographed at 80 KV using a Jeol 1000 CX electron microscope.

Blood was collected from mice by retrobulbar puncture and from rats through the ventral tail vein. It was allowed to clot over night at 4° C. HBsAg, anti-HBs, HBeAg, anti-HBe,

anti-HBc and alpha fetoprotein (AFP) were measured in serum by RIA (Abbott Laboratories, N. Chicago, Ill. and Serrono, Italy) (Shouval et al. 1981).

Results

Subcutaneous injection of hepatoma cells of the various types into athymic mice and rats produced well encapsulated tumours with a similar morphological appearance of the same tumour in both animal strains. Only tumour sections from athymic mice were examined, since tumours from athymic rats usually showed extended necrosis.

With PLC/PRF/5 cells the tumour was predominantly of trabecular patterns and resembled normal liver parenchyma (Fig. 1A). Most of the trabeculae consisted of 2 or 3 cell layers. Solid areas were also observed. The component cells were polygonal or cuboidal with vesicular nuclei containing one or two eosinophilic nucleoli. There was much pleomorphism and a few cells were multinucleated. Mitoses were numerous and often atypical. A characteristic histological feature was the presence of spaces filled with blood and debris. These spaces had no endothelial lining and resembled the findings in peliosis hepatis (Fig. 1B). These findings were further corroborated by the macroscopic recognition of such foci at autopsy. Between the trabeculae there was a delicate network of sinusoids with very few reticulin fibers (Fig. 1C). Necrotic areas, randomly distributed, were common and apoptotic bodies were also occasionally found. Fine droplets of fat were present in many of the tumour cells, especially around the necrotic areas. Inflammatory infiltration of the fibrotic capsule was almost absent. Ultrastructural analysis of PLC/PRF/5 tumours in nude mice revealed cells with numerous short microvilli filling bile canaliculi. Junctional complexes were seen between the lumen forming cells (Fig. 1D).

With Hep G2 cells the tumour presented a uniform, solid pattern. The component cells were pleomorphic but resembled hepatocytes (Fig. 2A). Most cells showed a large, hyperchromatic nucleus while in the remainder the nucleus was vesicular with a prominent nucleolus. A few cells were multinucleated. Mitoses were numerous and often atypical. Scattered cells contained neutral mucus. Random areas of necrosis as well as apoptotic bodies were observed. Intracellular fat was common near necrotic areas. The stromal support consisted of strikingly few fine septa composed of fibers which stained for collagen and reticulin (Fig. 2C). There were also areas reminiscent of peliosis as seen in PLC/PRF/5 tumours (Fig. 2B). Foci of in-

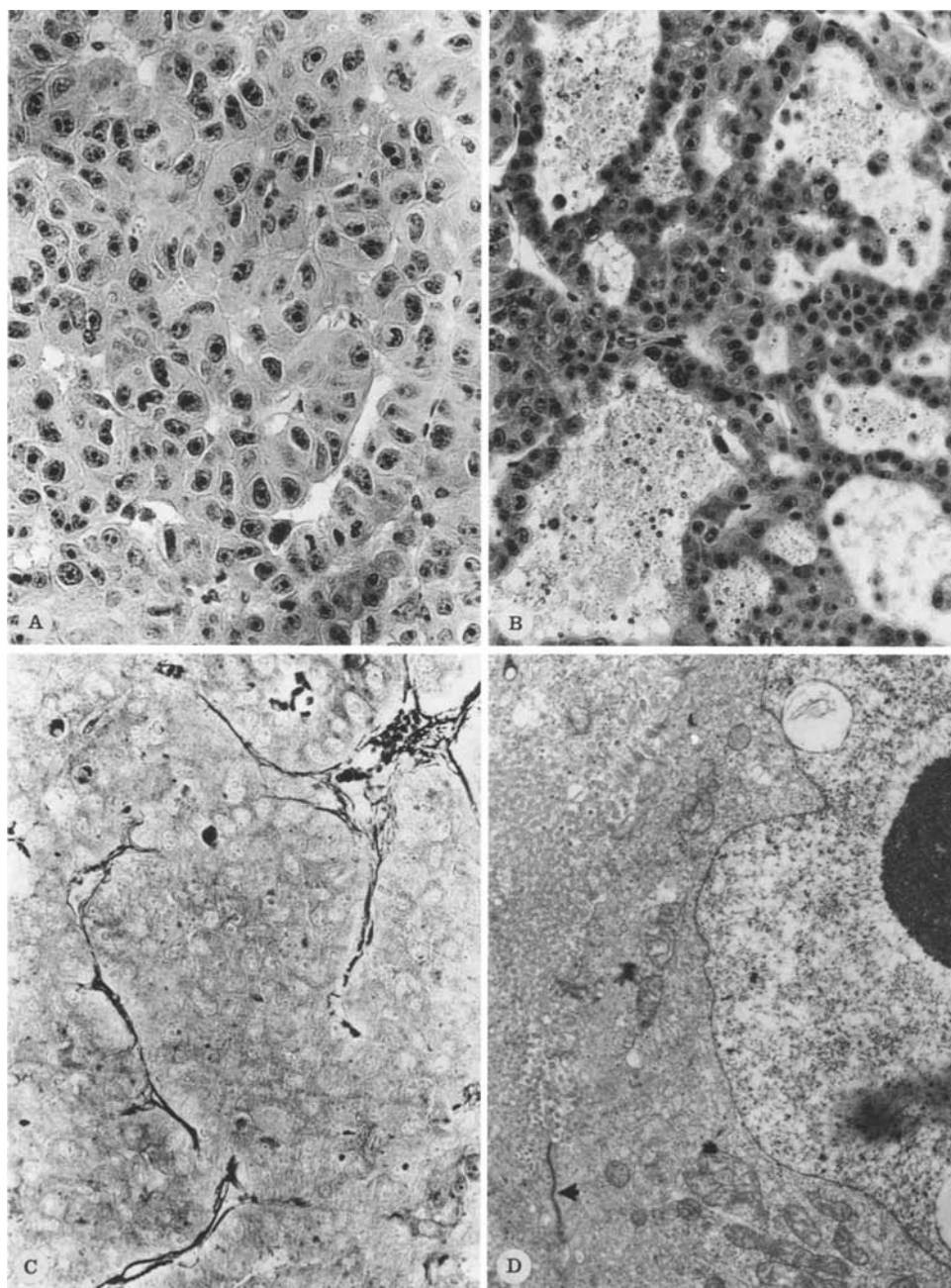


Fig. 1. PLC/PRF/5. **A** Well differentiated tumour cells with a trabecular pattern. Trabeculae are separated by compressed sinusoids lined by endothelium (H&E $\times 280$); **B** Tumour cell trabeculae surrounding spaces filled with blood and cell debris. Spaces are devoid of endothelial lining with a resemblance to peliosis hepatis (H&E $\times 112$); **C** The tumour is poor in supportive stroma consisting of a small number of fibers staining for reticulin (Gomori $\times 216$); **D** Electron micrograph showing a cell junction (arrowhead) and a bile duct lumen resembling an acinus ($\times 4816$)

flammatory mononuclear cells were present at the margins. Electron-microscopically there were intercellular acinar lumens formed by cells coupled by junctional complexes (Fig. 2D).

The Sk-Hep 1 cell tumours consisted of spindle shaped cells (Fig. 3A) and showed a sarcomatous appearance (Fig. 3B), with an occasional nodular

pattern (Fig. 3C1). The nuclei were ovoid or elongated. There were generally 2 or more nucleoli per nucleus, and mitoses were abundant. The stroma contained a dense network of fibers staining for reticulin (Fig. 3C2). Necrosis was present in the centre of the tumour, surrounded by fat containing cells. An inflammatory infiltrate composed of

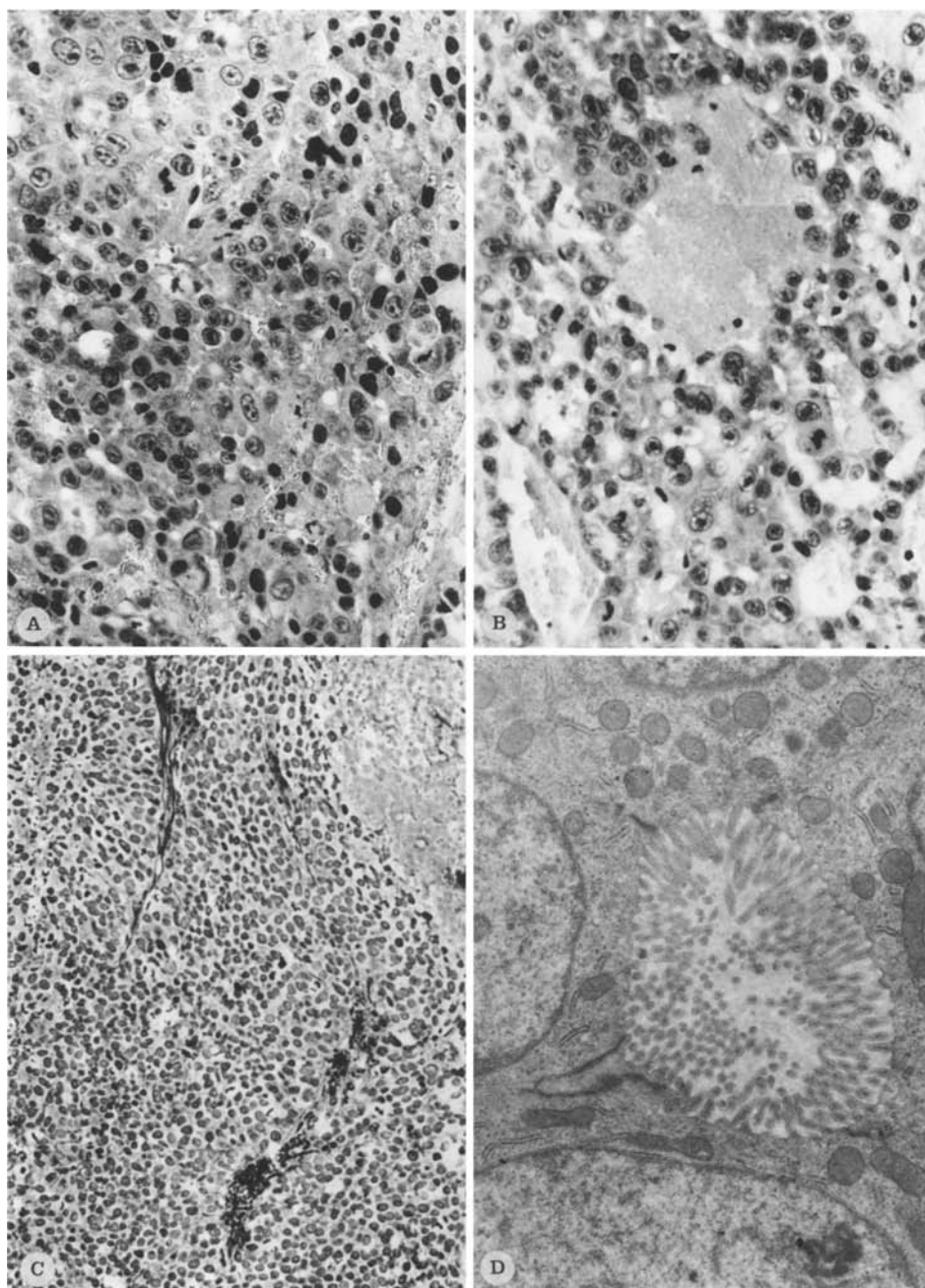


Fig. 2. Hep G2. **A** Moderately differentiated HCC cells growing in a solid pattern (H&E $\times 280$); **B** A space filled with blood and debris as shown in Fig. 1B (H&E $\times 280$); **C** Cellular area of the tumour with only minimal stromal support (Gomori $\times 96$); **D** Electron micrograph showing a tumour cell acinus with a number of intercellular junctions ($\times 8480$)

mononuclear cells and neutrophils was observed at the margins. Electron-microscopic examination regularly revealed cell junctions as well as bile canaliculi (Fig. 3D).

Tumours composed of Mahlavu cells also had a sarcomatous appearance (Fig. 4A). The cells were elongated and arranged in solid masses or bands. The nuclei were large, ovoid or elongated, uniform in size and contained one or more promi-

nent nucleoli. The cytoplasm was pale and scanty; some apoptotic bodies were present and mitoses were numerous. The supportive stroma was abundant, rich in fibroblasts and fibers staining for connective tissue and reticulin (Fig. 4A–C). Sinusoids were scanty and hardly recognizable. Necrosis, when present, occurred only in the central area of the tumour. A few cells contained large cytoplasmic fat vacuoles. A few mononuclear inflam-

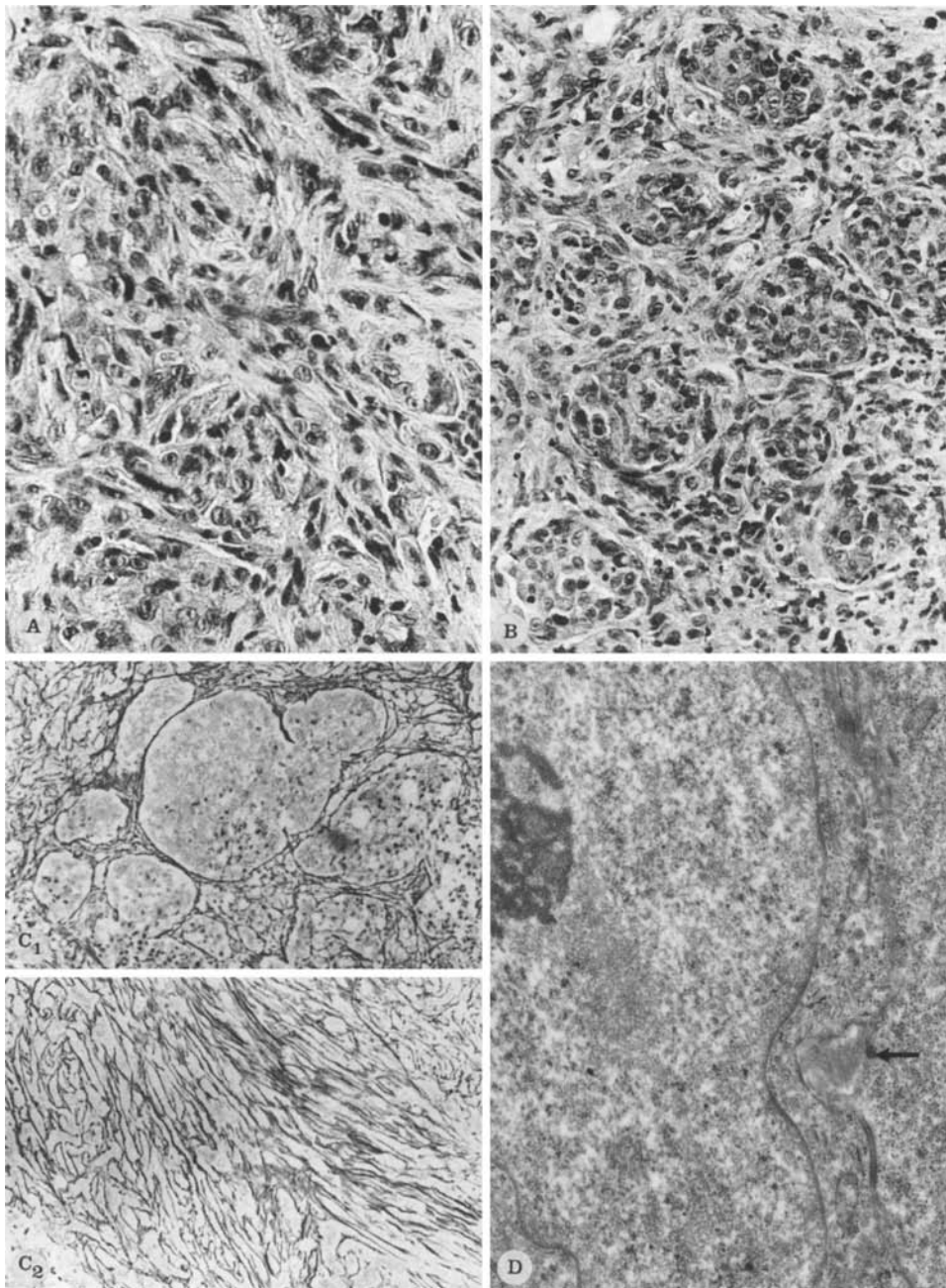


Fig. 3. *Sk-Hep 1*. **A** Poorly differentiated tumour with a sarcomatous pattern consisting of spindle cells organized in whorls (H&E $\times 280$); **B** The tumour shows areas of various degrees of differentiation where the cells are arranged in a nodular pattern (H&E $\times 216$); **C1** Fiber network surrounding tumour nodules (Gomori $\times 112$); **C2** In this part of the tumour the fibers form a dense network in a sarcomatous pattern (Gomori $\times 112$); **D** Electron micrograph showing part of tumour cells adjacent to a bile canaliculus (arrow) ($\times 13120$)

matory cells were present at the margins. Ultra-structurally, the cells contained large oval nuclei. In the cytoplasm, prominent rough endoplasmic reticulum and aggregates of glycogen particles were seen. In this tumour no acini, lumens or bile canaliculi were present, although neighbouring tumour cells were interlocked by desmosomes and

interdigitations of the plasma membranes (Fig. 4D). A comparative tabulation of the light microscopic characteristics of the 4 tumour types is presented in Tables 1 and 2.

Subcutaneous injection of hepatoma cells into athymic rodents led to the growth of localized, well encapsulated tumours in untreated animals. Tu-

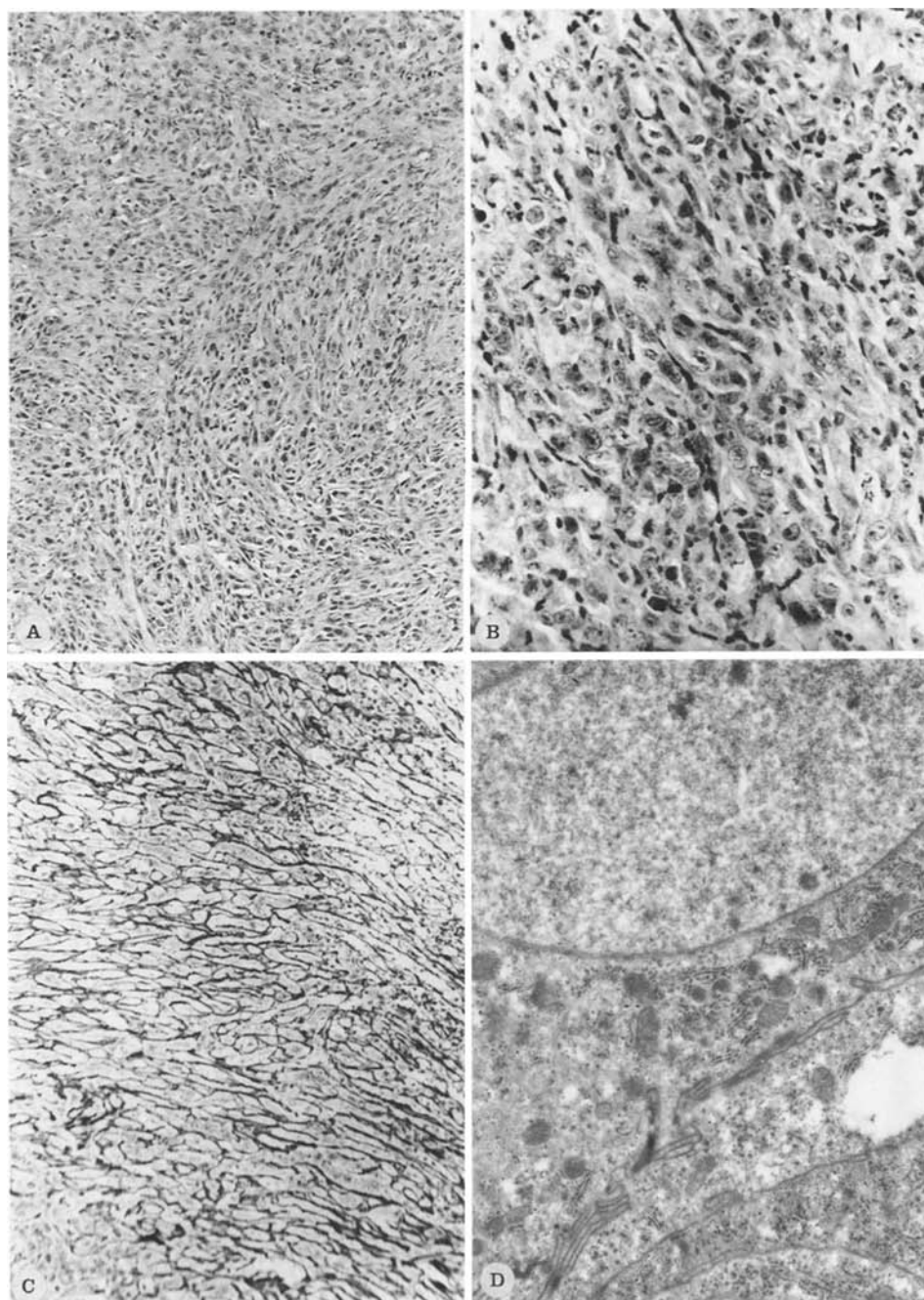


Fig. 4. Mahlavu. **A** Poorly differentiated HCC of spindle cell type with a sarcomatous pattern (H&E $\times 72$); **B** Despite the poor differentiation of tumour cells, their hepatocellular origin is still recognizable in the appearance of nuclei (H&E $\times 216$); **C** An excessively rich network of fibers extends between tumour cells and a trabecular pattern becomes apparent (Gomori $\times 112$); **D** Electron micrograph showing adjacent parts of two tumour cells. Note the interdigitations between the adjoining cell plasma membrane ($\times 7000$)

mourigenicity was however dependent on tumour cell type, number of injected cells and immuno-competence of the host. Furthermore, hepatoma cells were more tumourigenic in athymic mice when compared with athymic rats as determined by the number of injected cells required to produce

tumours and by latency from cell injection to tumour detection (Tables 3, 4). Irradiation of rats or mice 10 days prior to tumour cell injection, caused significant augmentation of tumourigenicity of hepatoma cells. This was manifested by a decreased cell inoculation density required to pro-

Table 1. Light microscopic characterization of hepatoma cell tumours in athymic rodents

	PLC/PRF/5	Hep G 2	Sk-Hep 1	Mahlavu
Tumour cell arrangement	Solid masses; trabeculae	Solid masses	Solid masses forming whorls and nodules	Solid masses
Cell shape	Polygonal monomorphic	Polygonal pleomorphic	Spindle pleomorphic	Spindle monomorphic
Fibrous stroma	Negligible	Fine septa	Coarse and fine fibers with pericellular distribution	Fine fibers with pericellular distribution
Reticulin network	Scanty	Scanty	Dense network	Dense network
Inflammatory infiltrate	Negligible	Moderate mononuclear cells	Moderate mononuclear cells, neutrophils	Scanty; mononuclear cells
Blood filled spaces	Present	Present	Absent	Absent

Table 2. Staining properties of hepatoma tumours in athymic rodents

	PLC/PRF/5	Hep G 2	Sk-Hep 1	Mahlavu
Masson Trichrome	Minimal stroma	Minimal stroma	Broad bands producing a nodular pattern	Delicate network surrounding individual cells and groups of cells
Gomori	Scarce reticulin fibers	Scarce reticulin fibers	Diffuse network surrounding single cells and groups of cells	Same as Sk-Hep 1
PAS	No PAS positive material	Scattered cells intracytoplasmic granules	Intracytoplasmic granules adjacent to necrotic areas	Foci of intracytoplasmic granules
Mucicarmin	Negative	Scattered cells with intracytoplasmic vacuoles	Negative	Negative
Oil red	Diffuse small fat vacuoles	Small and large fat vacuoles	As in Hep G 2	Few large fat vacuoles
Perl's stain	Negative for iron	Negative for iron	Negative for iron	Positive for iron in scattered macrophages
PAP technique for HBsAg	Positive	Negative	Negative	Negative
PAP technique for Alpha feto-protein	Positive	Positive	Negative	Negative

Staining for bile (Fouchet), copper (rubeanic acid), glycogen (PAS) and PAS-Diastase were all negative for the 4 tumour types

duce tumours, a decreased latency, increased "take" rates and by the increased weight of tumours in irradiated animals (Tables 3, 4). In addition, irradiation caused an increased local invasiveness of tumours, manifested by penetration of neoplasms through the fibrotic capsules and into various adjacent body cavities. This phenomenon was most pronounced in irradiated mice injected with PLC/PRF/5 cells.

In general PLC/PRF/5 cells were the most tumorigenic in untreated athymic rats, followed by Sk-Hep 1 cells. In contrast, tumours were only rarely generated by s.c. injection of Mahlavu cells, and then usually regressed. Since Hep G2 cells

were extremely difficult to grow in athymic mice (Table 4), these experiments were not performed in athymic rats. Irradiation of athymic rats caused increased "take" rates of all 3 hepatoma cell lines. In nude rats, PLC/PRF/5 cells were the most tumorigenic while Mahlavu tumours were significantly smaller and slower to grow (Table 3). In athymic mice, Sk-Hep 1 cells were the most tumorigenic, followed by PLC/PRF/5, Mahlavu and Hep G2 cells.

Metastases were rarely observed following s.c. hepatoma cell injection, regardless of tumour cell type used and irrespective of irradiation or animal strain. Even intravenous injection of $2-5 \times 10^6$

Table 3. Tumourigenicity of human hepatoma cells in nude rats

Hepatoma cell line injected	No. inj. cells $\times 10^6$	Treatment ^a	Latency ^b (days)	Tumour frequency: No. of rats with neoplasm	Mean tumour weight (g)
				No. of rats injected	
PLC/PRF/5	1-4	None	—	0/14	—
	5	None	24-31	1/5	—
	7-10	None	14-29	14/18	7.5
	20	None	16-20	2/3	—
	1-4	X-irrad	15-27	6/9	—
	5	X-irrad	15-23	4/4	—
	7-10	X-irrad	12-25	10/10	11.5
	20	X-irrad	15	2/2	—
Sk-Hep 1	1-4	None	—	0/8	—
	5	None	63	1/6 ^c	—
	7-10	None	33-36	1/14	—
	20	None	31-34	1/3	6.4
	1-4	X-irrad	36-48	3/10	—
	5	X-irrad	32-50	4/8	—
	7-10	X-irrad	14-24	8/10	18.7
Mahlavu	1-4	None	—	0/7	—
	5	None	—	0/6	—
	7-10	None	50	1/10 ^c	0.2
	1-3	X-irrad	—	0/6	—
	4	X-irrad	28-38	3/4	—
	5-10	X-irrad	24-32	6/6	0.5
Hep G2	N.D.	—	—	—	—

^a X-irrad: Rats were irradiated with 600 rad 10 days prior to tumour cell injection^b Latency from s.c. tumour cell injection to tumour detection^c Tumour regressed

N.D. = Not Done

Animals were sacrificed 2-3 weeks after tumour detection

PLC/PRF/5 and of Sk-Hep 1 cells produced pulmonary metastases in only 3/10 and 1/10 injected animals respectively. Intraperitoneal injection of 10^7 PLC/PRF/5 or Sk-Hep 1 cells caused intra-abdominal tumour growth in both mice and rats that were however, completely resistant to i.p. injection of Mahlavu and Hep G2 cells.

Tumours in treated animals (mice or rats) injected with 10^7 cells s.c., regardless of cell type, continued to grow for a period of 30-50 days and then stabilized in size. No deaths were observed among tumour bearing athymic rats within 3 months after tumour detection. Death was also rare among the athymic mice. During that period animals lost up to 30% of body weight, weight loss which was proportional to tumour size. Irradiation was generally well tolerated with development of occasional petechiae in up to 10% of animals, but with no significant mortality. At autopsy, PLC/PRF/5 tumour bearing rats showed hepatomegaly with mean liver weight of 60 ± 15 mg/g body weight ($n=5$ $p<0.05$) when compared with 34 ± 7 mg/g in control rats ($n=5$). Massive spleno-

megaly was observed in Sk-Hep 1 and Mahlavu injected non-irradiated rats and mice in which spleen size was 3-5 fold larger when compared to control animals ($p<0.05$). Histological examination of liver and spleen did not reveal a cause for this change.

HBsAg and alpha-fetoprotein were detectable in serum of PLC/PRF/5 tumour-bearing nude mice and nude rats. As expected, much higher concentrations of these proteins were detected in nude mice, who have a small blood volume when compared with nude rats. HBsAg and AFP concentrations in the serum of athymic mice peaked at 2500 ng/ml and 350 μ g/ml respectively when tumour weight was 2.3 g. Maximal HBsAg and AFP concentration in nude rats was only 370 ng/ml and 28 μ g/ml respectively when tumour weight was 7-10 g. Alpha fetoprotein was also present in serum in Hep G2 tumour bearing mice. Both HBsAg and AFP were undetectable in serum of Sk-Hep 1 or Mahlavu tumour-bearing mice or rats. In every case in which HBsAg and AFP were detected in the serum, they were also present in tumour

Table 4. Tumourigenicity of human hepatoma cells in nude mice

Hepatoma cell line injected	No. inj. cells $\times 10^6$	Treatment ^a	Latency (days)	Tumour frequency: No. of mice with neoplasm	Mean tumour weight (g)
				No. of mice injected	
PLC/PRF/5	1-3	None	—	0/8	—
	4-5	None	21-34	10/24	—
	7-10	None	14-23	9/12	1.3
	2-3	X-irrad	14-24	3/9	—
	4-5	X-irrad	10-21	20/20	2.7
Sk-Hep 1	1	None	29	1/6	—
	2	None	20-22	2/4	—
	3	None	19-25	4/4	—
	4-5	None	17-21	5/6	0.22
	1	X-irrad	21-26	3/6	—
	2	X-irrad	17-21	5/6	—
	3-5	X-irrad	14-22	9/10	0.52
Mahlavu	1-3	None	—	0/8	—
	4-5	None	—	0/6	—
	7-10	None	50	1 ^b /10	—
	20	None	45-48	2 ^b /8	0.09
	1-3	X-irrad	—	0/6	—
	4-5	X-irrad	—	1/6	—
	7-10	X-irrad	35	4/10	0.5
Hep G2	1-20	None	—	0/12	—
	20	X-irrad	60-90	2/6	0.06

^a *X-irrad*: mice irradiated with 400 rads 10 days before tumour cell injection^b tumours regressed

Animals were sacrificed 3 weeks after tumour detection except for Hep G2 bearing mice which were sacrificed at 7 weeks

tissue of the same animals as determined by immunohistological staining (data not shown). Thus HBsAg was present in over 50% of tumour cells, while AFP usually appeared in small clusters throughout the tumour tissue (Table 2). Neither HBeAg, anti-HBe, anti-HBc nor anti-HBs were detected in serum of 30 PLC/PRF/5 tumour bearing irradiated mice and rats.

Discussion

Relevant model systems are needed to assess the response to newly designed modes of treatment for human HCC. In contrast with the straightforward induction of chemical hepatocarcinogenesis in immunocompetent rodents, growth or human hepatoma tumours in immunodeficient animals is a more tedious task. Several hepatoma cell lines of human origin may now be utilized for the generation of human HCC tumours in athymic rodents. Historically, 2 of the 4 human hepatoma cell lines used to produce tumours in athymic rodents in the present study (PLC/PRF/5 and Mahlavu) were derived from HCC patients who were HBsAg carriers. Both cell lines are "persistently infected" with HBV and contain integrated HBV DNA

[Shouval et al. 1981; D. Shouval et al., *Hepatology*, 4:1089, 1984, (abs)], but only PLC/PRF/5 cells synthesize and secrete HBsAg. Sk-Hep 1 and Hep G2 cells are devoid of HBV DNA.

Morphologically, the 4 human hepatoma cell lines represent a spectrum of tumour types encountered in clinical practice (Lapis 1983). In the athymic rodents, PLC/PRF/5 and Hep G2 hepatoma cells form well differentiated tumours consisting of polygonal cells. Tumour cell arrangement is in solid or trabecular patterns. In contrast, Sk-Hep 1 and Mahlavu tumours consist of poorly differentiated, spindle-shaped carcinoma cells. The 4 types also differ in the amount and composition of stroma. PLC/PRF/5 and Hep G2 nude rodent derived tumours have a relatively scanty stroma, while Sk-Hep 1 and Mahlavu tumours are rich in intercellular connective tissue fibers. A unique quality of both PLC/PRF/5 and Hep G2 tumours is the presence of scattered spaces, often lined by tumour cells but occasionally with endothelium. These spaces (which were sometimes also recognized macroscopically) show a strong resemblance to peliosis hepatis (Zak 1950), the significance of which is not clear. The emergence of such spaces may be related to the outgrowth of the host blood

supply leading to necrosis, which is considered to be one of the aetiological factors for peliosis (Kintzen and Silney 1960; Zak 1950).

The morphological differentiation of the 4 tumour types parallels their functional differentiation. PLC/PRF/5 and Hep G2 cells are well differentiated polygonal cells that, in addition to their microscopic resemblance to normal hepatocytes, have retained their capacity to synthesize and secrete a variety of liver derived proteins (Aden et al. 1979; Knowles and Aden 1980; Shouval et al. 1981), including alpha-feto protein (Bassendine et al. 1980; Knowles 1980; Shouval et al. 1981). In contrast, the spindle-shaped Sk-Hep 1 and Mahlavu cells are morphologically as well as functionally distinct from hepatocytes. However, evidence for their hepatic origin is derived from the fact that both these cell lines express several hepatoma associated proteins (Carlson et al. 1985; Shouval et al. 1985). Furthermore, Mahlavu cells contain integrated HBV DNA and Sk-Hep 1 cells express a liver specific protein (LSP) also present in PLC/PRF/5 cells (Chisari et al. 1981). Ultrastructural analysis revealed the presence of cell junctions in all 4 tumour cell types, thus confirming the epithelial origin of these lines. In addition, microvilli were identified in PLC/PRF/5 cells, while structures resembling bile canaliculi were present in 3/4 tumour types.

One of the interesting findings in the present study is the significant difference in tumourigenicity of the various hepatoma cell lines in athymic mice and rats. A wide variety of human tumours grow readily in athymic nude mice and to a somewhat lesser extent in the nude rats (Brooks et al. 1980; Colston et al. 1981; Colston et al. 1982; Festing et al. 1978; Fogh and Orefeo 1977b). Indeed, we were able to grow the 4 hepatoma cell lines as s.c. tumours in athymic mice and excluding Hep G2, in athymic rats. However, tumourigenicity was lower in athymic rats and higher inoculation densities of tumour cells were required to establish growth when compared with athymic mice. Furthermore, established Sk-Hep 1 and Mahlavu tumours in the nude rat had a tendency to regress within 30–50 days of their appearance. This phenomenon of lower tumourigenicity of human carcinoma cell lines in athymic rats when compared with nude mice has been previously observed using a variety of human cell lines (Colston et al. 1981; Colston et al. 1982; Festing et al. 1978). The higher resistance of the congenitally athymic rats to acceptance of xenografts has been linked to an enhanced NK cell activity. Unlike the situation in the nude mouse, the NK cell activity is not age

dependent in the nude rat (Brooks et al. 1980; Lotzova et al. 1984). The tumourigenicity of hepatoma cell lines in nude rats was markedly enhanced following irradiation, thus implicating a radiation-sensitive host defense mechanism as responsible for resistance to tumour growth. Some similarities may exist with mechanisms that control tumourigenicity of PLC/PRF/5 cell lesions in nude mice (Shouval et al. 1983). We have previously shown that spleen-derived NK cells from nude mice cause PLC/PRF/5 hepatoma cell lysis *in vitro* through an interferon regulated mechanism that is probably unrelated to HBsAg expression (Shouval et al. 1983). Interestingly, Mahlavu cells which are persistently infected with HBV but do not express HBsAg had a very low tumourigenicity in non-irradiated animals. Therefore, hepatoma cell surface proteins, unrelated to HBsAg, may be responsible for generation of increased resistance of nude mice and rats to HCC cells. In this context it is interesting to note that Mahlavu and Sk-Hep 1 tumours caused significant splenomegaly in host animals.

There are marked differences of tumourigenicity among the hepatoma cell lines within the same species. One possible factor that may influence its extent is the degree of differentiation. Human carcinoma cell lines do not usually produce metastases in the nude mouse (Giovannella 1978). In contrast with a previous report (Sattler 1982), we detected a single mouse in which pulmonary metastases were present following s.c. tumour cell injection out of 100 injected with PLC/PRF/5 cells. No metastases were observed in Hep G2, Sk-Hep 1 or Mahlavu tumour-bearing mice. In athymic rats only 1/42 PLC/PRF/5 tumour-bearing animals and 1/29 Sk-Hep 1 tumour-bearing rats showed pulmonary metastases. Therefore spontaneous metastases of human hepatoma cells in athymic rodents is a rare and unpredictable event.

Finally, it seems that nude mice, which have a smaller blood volume and harbor less necrotic tumour tissues, are suitable hosts for short range testing of experimental chemo- and immunotherapy. In contrast, tumour bearing nude rats which are more resistant to infections may be maintained without laminar flow hoods for periods of 1–2 years and are more suitable for long term experiments.

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low at the Liver Research Center, Albert Einstein College of Medicine, Bronx, NY, USA.

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