MicroRNA-15 suppresses viability, migration and invasion of the human MG-63 osteosarcoma cells via inhibition of cyclin dependent kinase 6 (CDK6)

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MicroRNA-15a-3p (miR-15) acts as tumor-suppressor in different human cancers including osteosarcoma. Nonetheless, the molecular function of miR-15 in osteosarcoma via suppression of cyclin dependent kinase 6 (CDK6) is yet to be studied. The results showed significant downregulation of miR-15 in osteosarcoma tissues and cell lines. Overexpression of miR-15 inhibited the proliferation and colony formation of the MG-63 osteosarcoma cells via induction of apoptosis. Moreover, miR-15 inhibited the migration and invasion of MG-63 osteosarcoma cells. The tumor-suppressive functional role of miR-15 was shown to be exerted via suppression of CDK6. The expression of CDK6 was upregulated in osteosarcoma and its silencing could exert growth inhibitory effects on human osteosarcoma cells. However, overexpression of CDK6 could nullify the tumor-suppressive effects of miR-15 on the MG-63 osteosarcoma cells. Taken together, miR-15 negatively regulates growth, migration and invasion of osteosarcoma cells by targeting CDK6 at post-transcriptional level. These findings suggest the therapeutic potential of miR-15/CDK6 axis in human osteosarcoma.

Keywords: Osteosarcoma, micro-RNA, miR-15, CDK6, epithelial to mesenchymal transition

INTRODUCTION

Osteosarcoma is highly aggressive and lethal type of bone cancer with mesenchymal origin resulting from the osteoid producing cells (Lindsey et al., 2017). This malignancy is comparatively more prevalent among the children and young adolescents (Rojas et al., 2021). It is the most dominant type of primary bone cancer and accounting for approximately 10% of the solid tumors in young human individuals below 20 years of age (Miralbello et al., 2009). Moreover, the incidence of osteosarcoma is slightly higher in males than females (Mustafa et al., 2018). Osteosarcoma treatment generally involves surgery combined with chemotherapy and parallel adjuvant therapeutic procedures (Zhang et al., 2018). Although, this disease has an overall 5-year survival rate ranging between 60 to 70%, nevertheless in more than 20% cases, osteosarcoma exhibits metastasis to lung tissues and therefore the 5-year survival rate goes down to less than 20% (Shaikh et al., 2016; Tsiambas et al., 2017).

With the advancement of molecular biology, several genetic alterations and chromosomal abnormalities have been shown to be associated with the pathogenesis of osteosarcoma (Czarnecka et al., 2020). Characterization of such molecular irregularities might thus be fruitful in devising more efficient therapeutic measures against this deadly disorder.

Small non-coding RNAs, in particular the microRNAs (miRs), have been shown to act as potential prognostic and therapeutic targets in osteosarcoma (Czarnecka et al., 2020; Evola et al., 2017; Zhao et al., 2019). For instance, miR-210-5p has recently been reported for its oncogenic role in osteosarcoma growth and epithelial to mesenchymal transition (EMT) via PIK3R5 (Liu et al., 2020). In addition, the regulation of NOTCH1 by miR-139 has been shown to be crucial for inhibition of osteosarcoma progression by resveratrol (Xiao et al., 2020). MicroRNA-15a-3p (now onwards referred as miR-15), since its identification in chronic lymphocytic leukemia, has been deduced to act as tumor-suppressor in different human cancers like ovarian cancer, breast cancer, pancreatic cancer and non-small cell lung cancer (Calin et al., 2002; Bhattacharya et al., 2009; Luo et al., 2013; Zhang et al., 2010; Bandi et al., 2009). The negative regulatory role of miR-15 in osteosarcoma growth and proliferation through multiple regulatory targets has also been reflected by a number of studies (Cai et al., 2012; Tian et al., 2015; Leng et al., 2018; Shi et al., 2018). Additionally, the oncogenic role of cyclin dependent kinase 6 (CDK6) has been reported in osteosarcoma (Zhu et al., 2016; Yuan et al., 2017). However, the characterization of miR-15 functional role via cyclin dependent kinase 6 (CDK6) in osteosarcoma is yet to be studied. Against this backdrop, the present study was designed to study the role of miR-15/CDK6 axis in osteosarcoma proliferation and epithelial to mesenchymal transition.

MATERIALS AND METHODS

INTRODUCTION

Osteosarcoma is highly aggressive and lethal type of bone cancer with mesenchymal origin resulting from the osteoid producing cells (Lindsey et al., 2017). This malignancy is comparatively more prevalent among the children and young adolescents (Rojas et al., 2021). It is the most dominant type of primary bone cancer and accounting for approximately 10% of the solid tumors in young human individuals below 20 years of age (Miralbello et al., 2009). Moreover, the incidence of osteosarcoma is slightly higher in males than females (Mustafa et al., 2018). Osteosarcoma treatment generally involves surgery combined with chemotherapy and parallel adjuvant therapeutic procedures (Zhang et al., 2018). Although, this disease has an overall 5-year survival rate ranging between 60 to 70%, nevertheless in more than 20% cases, osteosarcoma exhibits metastasis to lung tissues and therefore the 5-year survival rate goes down to less than 20% (Shaikh et al., 2016; Tsiambas et al., 2017).
uid N₂ and –80°C temperature conditions were used for their long-term storage.

**Cell lines**

Four osteosarcoma cell lines (HOS, 143B, MG-63 and U2OS) as well as the normal human foetal osteoblastic cell line (hFOB 1.19) were procured from ATCC (American Type Culture Collection, Manassas, VA). RPMI 1640 (Sigma-Aldrich, MO, USA) carrying 10% fetal bovine serum (Thermo Fisher Scientific, Waltham, Massachusetts, United States) with 1% penicillin/streptomycin (Sigma-Aldrich) as supplementation was used for propagation and maintenance of cell lines at 37°C with 5% CO₂ in humidified CO₂ incubators.

**Cell transfection**

The MG-63 osteosarcoma cell line was transfected with miR-15 mimics (25 nM) for miR-15 overexpression with miR-NC as negative control. For the silencing of CDK6, small interfering RNA targeting CDK6 (si-CDK6) was used while si-NC served as a negative control. The miR-15 mimics/miR-NC and si-CDK6/si-NC were ordered from GenePharma (Shanghai, China). The overexpression vector construct of CDK6 (pcDNA-CDK6) was synthesized by RiboBio, Guangzhou China. The pcDNA3.1 empty vector served as a corresponding negative control. Cell line transfection was performed with the help of Lipofectamine 2000 reagent (Thermo Fisher Scientific) according to the manufacturer’s protocol.

**Expression analysis**

Total RNA from tissue and cell lines was extracted using the RNeasy Mini Kit (Qiagen, Hilden, Germany) following the manufacturer’s procedure. RevertAid First strand cDNA synthesis kit (Thermo Fisher Scientific) was used for the generation of cDNA from isolated RNA. The transcript levels of miR-15 and CDK6 were analyzed with quantitative real-time polymerase chain reaction (qRT-PCR). The qRT-PCR was performed using Power SYBRTM Green PCR Master Mix (Thermo Fisher Scientific). The cycling conditions were: 3 min at 95°C, 45 cycles of 30 sec at 95°C and 60 sec at 60°C. GAPDH, snRNA U6 and Rn18s were used for normalizing the expression levels of target genes which were quantified with 2^{-ΔΔCt} method. The sequences of the primers used in the present study are mentioned in Table 1.

**CCK-8 proliferation assay**

Cell counting kit-8 (CCK-8, Sigma-Aldrich) was used for the determination of cell viability. In brief, the transiently transfected MG-63 cancer cells were placed at a density of 10⁶ cells per well into a 96-well plate. After culturing the cells for 0, 12, 24, 48, 72 or 96 h at 37°C, 10 µL of CCK-8 solution was added to each well and cells were again incubated at 37°C for 3 h. Finally, the absorbance was obtained for each well at 450 nm with the help of a micro-plate spectrophotometer.

**Colony formation assay**

For the analysis of colony formation, 5×10³ transiently transfected MG-63 cells were plated into each well of a 6-well plate. The cells were cultured for 16 days at 37°C till colony formation. At this stage, PBS was used for washing the colonies which were then fixed with 70% ethanol and stained with 0.25% crystal violet for 35 min. Finally, the colonies were photographed and counted under microscope.

**Annexin V/PI staining assay**

A total of 3×10⁴ transfected MG-63 cells/well were plated into 96-well plates and were cultured for 24 h at 37°C. The cells were subsequently stained with propidium iodide (PI) and Annexin V fluorescein isothiocyanate (FITC) kit (Multisciences (Lianke) Biotech Co., Ltd.) and analyzed by flow cytometry. The percentage of live cells, apoptotic cells and dead cells were analyzed using FlowJo software (version 10; FlowJo LLC).

**Migration and invasion assays**

Transwell chambers (Corning, NY, USA) pre-coated without and with Matrigel (bd Biosciences, Franklin Lakes, NJ, USA) were employed for the analysis of migration and invasion of transfected MG-63 osteosarcoma cells, respectively. Briefly, 2×10⁵ transfected cells were seeded into an upper chamber of a 24-well Transwell insert plate. Lower chamber received 750 µL of serum-free culture medium only. After 24h incubation at 37°C, cells from the upper chamber were swabbed away while those migrating/invading into the lower chamber by passing through the membrane were PBS washed, methanol fixed, crystal violet stained and counted under an inverted light microscope (Olympus, Tokyo, Japan).

**Western blotting**

The extraction of total proteins from the transfected MG-63 cells was performed with the help of RIPA lysis buffer (Thermo Fisher Scientific) containing protease inhibitors cocktail (KeyGen Biotech). The protein concentrations were measured with a BCA Protein Assay kit (Beyotime Biotechnology). Around 40 µg protein from each sample were subjected to electrophoresis on

<table>
<thead>
<tr>
<th>Gene</th>
<th>Direction</th>
<th>Sequence (5’ to 3’)</th>
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<tbody>
<tr>
<td>miR-15</td>
<td>Forward</td>
<td>CGCTAGCAGCACAATATAAT</td>
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<tr>
<td></td>
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<td>GTGACAGGTCGCCAGAGGT</td>
</tr>
<tr>
<td>CDK6</td>
<td>Forward</td>
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</tr>
<tr>
<td></td>
<td>Reverse</td>
<td>CCTCGGGAGAACTGGAAAC</td>
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<td>Vimentin</td>
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<tr>
<td></td>
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<tr>
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<tr>
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<td>Rn18s</td>
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<td></td>
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<td>CCATCCAATCGTGAGTACG</td>
</tr>
</tbody>
</table>

**Table 1. Nucleotide sequences of the primers used in this study**
MicroRNA-15 suppresses viability, migration and invasion of the human MG-63 osteosarcoma cells

MiR-15 inhibits migration and invasion of MG-63 cells

The effects of miR-15 on the migration and invasion were assessed by transwell assays. The results showed that overexpression of miR-15 lead to a significant ($P<0.03$) decrease in migration and invasion of MG-63 cells compared to the normal matching tissues ($P<0.05$). Additionally, these findings suggest the tumor-suppressive role of miR-15 in osteosarcoma.

Statistical analysis

The analysis of statistical data was performed using the GraphPad Prism 7.0 offline software (San Diego Inc, CA, USA). Results were presented as mean ± standard deviation (SD). Student’s t-test (two-tailed) was carried out to make comparisons between two treatment groups. $P<0.05$ was taken to represent a statistically significant difference.

RESULTS

MiR-15 is downregulated in osteosarcoma regulates its proliferation

The results of the qRT-PCR showed that osteosarcoma tissues express significantly ($P<0.03$) lower miR-15 transcript levels than the normal adjacent tissues (Fig. 1A). Further, relative to hFOB 1.19, the normal human fetal osteoblastic cell line, the osteosarcoma cells (HOS, 143B, MG-63 and U2OS) were found to exhibit significantly ($P<0.05$) lower miR-15 transcript levels (Fig. 1B). Among osteosarcoma cell lines, MG-63 cells exhibit the lowest transcript levels of miR-15 and was thus used in further experiments. To proceed with the characterization of miR-15 role in osteosarcoma, MG-63 cells were transfected with miR-15 mimics to induce miR-15 overexpression. The RT-PCR showed more than 7-fold upregulation of miR-15 in miR-15 mimics transfected MG-63 cells (Fig. 1C). The overexpression of miR-15 in MG-63 cancer cells was shown to significantly inhibit ($P<0.02$) their viability relative to the negative control cells at different time intervals (Fig. 1D). The inhibition of viability was found to be due to the induction of apoptosis. The percentage of early and late apoptosis increased from 0.71% and 0.21% in miR-NC transfected to 20.3% and 16.5% in miR-15 mimics transfected MG-63 cells. Similarly, the invasion of the MG-63 cells was inhibited by 65%
MiR-15 exerts its tumor-suppressive effects via CDK6

The in-silico analysis showed that CDK6 acts as the potential regulatory target of miR-15 and predicted that miR-15 interacts with a specific binding site in 3′-UTR of CDK6 gene (Fig. 3A). To confirm this, the luciferase reporter plasmid of CDK6 3′-UTR with wild type (WT) or mutant (MUT) binding site was co-transfected with miR-15 mimics or miR-NC into MG-63 cells. Dual luciferase reporter assay showed that luciferase activity of host cells was significantly declined (P<0.02) only when UTR segment with wild type miR-15 binding site was used, confirming the specific interaction of miR-15 with 3′-UTR of CDK6 (Fig. 3B). Also, the osteosarcoma tissues and cell lines expectedly showed significantly higher CDK6 transcripts as compared to the normal matching tissues (D) CDK6 gene has significantly higher expression levels in HOS, 143B, MG-63 and U2OS osteosarcoma cell lines as compared to normal hFOB osteoblast cells (E) overexpression of miR-15 suppresses the expression of CDK6 as depicted by western blotting (F) CDK6 downregulating MG-63 cells show markedly lower viability than negative control transfected cells (G) silencing of CDK6 inhibits the colony formation of the MG-63 cells. The experiments were performed in triplicates and *P<0.05 is indicative of statistically significant difference between the values of two groups.

DISCUSSION

Molecular irregularities including aberrant expression of miRs have been shown to profoundly affect the tumorigenesis of human osteosarcoma (Czarnecka et al., 2020; Evola et al., 2017; Zhao et al., 2019; Liu et al., 2020). There are growing research evidence that miRs might emerge as prognostic markers and key therapeutic targets against osteosarcoma (Xiao et al., 2020). Different miRs have been shown to act as oncogenes or tumor-suppressors in osteosarcoma to regulate its growth and progression (Jin et al., 2020; Bazavar et al., 2020). MiR-15 known for its tumor-suppressive regulatory function in number of human

Figure 2. MiR-15 inhibits mobility of osteosarcoma cells.
(A) miR-15 overexpressing MG-63 cells show significantly lower migration than negative control transfected cells (B) miR-15 overexpressing MG-63 cells show significantly increased expression of E-cadherin and decreased expression of N-cadherin, Vimentin and Snail. The experiments were performed in triplicates and *P<0.05 is indicative of statistically significant difference between the values of two groups.

Figure 3. CDK6 acts as the molecular target of miR-15 in osteosarcoma
(A) Prediction of miR-15 binding site in 3′-UTR of CDK6 by in silico analysis (B) dual luciferase assay confirmed miR-15 binding with 3′-UTR of CDK6 (C) osteosarcoma tissues express significantly higher CDK6 transcripts as compared to the normal matching tissues (D) CDK6 gene has significantly higher expression levels in HOS, 143B, MG-63 and U2OS osteosarcoma cell lines as compared to normal hFOB osteoblast cells (E) overexpression of miR-15 suppresses the expression of CDK6 as depicted by western blotting (F) CDK6 downregulating MG-63 cells show markedly lower viability than negative control transfected cells (G) silencing of CDK6 inhibits the colony formation of the MG-63 cells. The experiments were performed in triplicates and *P<0.05 is indicative of statistically significant difference between the values of two groups.
cancers has been elucidated to negatively regulate diverse hallmarks of human osteosarcoma (Cai et al., 2012; Tian et al., 2015). The present study aimed at the further exploration of functional aspects and mechanism of action of miR-15 in osteosarcoma. Osteosarcoma tissues and cell lines were shown to express significantly lower transcript levels of miR-15 suggesting its possible regulatory involvement in osteosarcoma tumorigenesis. To confirm the same, miR-15 was overexpressed in osteosarcoma cells. Interestingly, the overexpression of miR-15 in osteosarcoma cells limited their growth and proliferation, in vitro, which is consistent with the previous reports (Leng et al., 2018; Shi et al., 2018). Moreover, the miR-15 overexpressing osteosarcoma cells exhibited strikingly lower migration and invasion rates which were suggestive of the anti-metastatic molecular function of miR-15 in osteosarcoma. Similar observations have been made by the contemporary researchers regarding the role of miR-15 in cancer (Tian et al., 2015; Shi et al., 2018). Guo and others (Guo et al., 2014) in 2014 revealed that miR-15 inhibits the epithelial to mesenchymal transition of pancreatic cancer cells. Increase in E-cadherin (epithelial marker) expression levels and decrease in the expression of N-cadherin, Snail and Vimentin proteins (mesenchymal markers) by miR-15 overexpression in osteosarcoma indicates that miR-15 negatively regulates EMT in osteosarcoma, which is further indicative of its anti-metastatic regulatory potential. In order to investigate the mechanism of action of miR-15 in osteosarcoma in silico analysis was used to specifically predict the potential regulatory target of miR-15. Although miR-15 has been reported to target CCND1 in osteosarcoma to induce apoptosis and cell cycle arrest (Cai et al., 2012), in the present study we, for the first time, studied cyclin-dependent kinase (CDK6) as a regulatory target of miR-15 in osteosarcoma. The results showed that miR-15 inhibits the expression of CDK6 post-transcriptionally to exert its tumor-suppressive role in osteosarcoma. These findings are in confirmation with previous studies wherein CDK6 has been shown to promote the growth of esophageal squamous cell carcinoma (Baba et al., 2014) and lymphoblastic leukemia (Rodriguez-Otero et al., 2011). The repression of miR-15 transcript levels might be one of the crucial molecular factors responsible for elevation of CDK6 protein levels in osteosarcoma. The resulting overexpression of CDK6 protein might be involved in positively regulating the growth and metastasis of osteosarcoma. Taken together, the results of the present study clarified the regulatory importance of miR-15/CDK6 molecular axis in osteosarcoma and highlighted its therapeutic utility. However, future studies directed at the evaluation of miR-15 in in vivo system and evaluating the effects of different drugs on the expression of miR-15 in osteosarcoma are urgently needed.

CONCLUSION

Taken together, the results of the present study are conclusive that miR-15 transcript levels are significantly repressed in osteosarcoma. Overexpression of miR-15 in-
hibits the osteosarcoma cell proliferation, migration and invasion. CDK6 acts as the functional target of miR-15 in osteosarcoma at post-transcriptional level. Therefore miR-15/CDK6 might emerge as a possible therapeutic lead against osteosarcoma in the future.

Declarations

Conflict of interest. The authors declare that there are no conflicts of interest.

REFERENCES


Z. Shen and others


Conflict of interest. The authors declare that there are no conflicts of interest.