Thymidine Phosphorylase Moderates Thymidine-dependent Rescue after Exposure to the Thymidylate Synthase Inhibitor ZD1694 (Tomudex) in Vitro

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Abstract

The inhibition of de novo thymidine (dThd) synthesis by the novel folate-based thymidylate synthase (TS) inhibitor ZD1694 (Tomudex) can achieve tumor cell-specific cytotoxicity in vivo. However, nucleosides in the surrounding microenvironment of tumors may be used by the salvage pathway to regenerate any depleted pools, thus providing an efficient mechanism through which to circumvent the ZD1694-dependent toxicity. Anabolism of dThd to dTMP by dThd kinase (TK) is the first committed step in the dThd salvage pathway. However, dThd phosphorylase (dThdPase) can compete with TK by catalyzing the reversible phosphorolytic cleavage of dThd to thymine and deoxyribose 1-phosphate and rendering the salvaged dThd metabolically unavailable. Both TK and dThdPase are up-regulated in some tumors, and their relative importance is not fully defined. We have studied the influence of dThdPase expression on the capacity of exogenous dThd to reverse ZD1694-dependent growth inhibition and have shown that both intra- and extracellular dThdPase activity can effectively moderate dThd-rescue. This suggests that tumor levels of dThdPase may be an important factor in the outcome of ZD1694 therapy.

Introduction

ZD1694 (Tomudex) is a quinazoline antifolate TS inhibitor (1). It is extensively polyglutamated by polyglutamylate synthase resulting in enhanced intracellular retention. Polyglutamation also serves to increase its potent inhibitory activity against TS and, thus, compromises de novo dThd synthesis. In the absence of salvageable extracellular dThd, a "dThd-less" state arises; the concurrent perturbations of the nucleotide triphosphate pools (2) are considered the dominant mechanism by which ZD1694 exerts its cytotoxic effects. However, performed dThd is potentially bioavailable within a tumor mass from both the vascular supply and that released by dying cells. The high levels of dThd kinase in tumor compared with normal tissues (3) imply that the salvage pathway is the preferred source of dThd for subsequent anabolism and DNA synthesis. Cellular uptake readily occurs via: (a) S-(p-nitrobenzyl)-6-thioinosine -sensitive and/or -insensitive cell-surface equilibrated nucleoside transporters (4); (b) a Na⁺-associated concentrative transport process (5, 6); or (c) nonfacilitated diffusion. It has been demonstrated that nucleoside transport activity can be up-regulated 22- to 39-fold as a consequence of acute TS inhibition in the human bladder cancer cell line MGH-UI (7). Such elevations in nucleoside transport function may be highly relevant when dThd availability is the potentially rate-limiting step in the salvage pathway. Thus, facilitated and nonfacilitated uptake processes could provide an effective intracellular source of dThd for the salvage pathway that could prove sufficient to circumvent the cytotoxic impact of ZD1694-mediated TS inhibition.

dThdPase (EC 2.4.2.4) is the first catabolic enzyme in the dThd salvage pathway, and, thus, represents a potential mechanism by which dThd can be rendered unavailable for subsequent phosphorylation by dThd kinase. dThdPase catalyzes the reversible phosphorolytic cleavage of dThd and deoxyuridine to their respective bases and deoxyribose 1-phosphate (8, 9). Although both reactions are reversible, with an equilibrium constant close to one, the limited availability of deoxyribose donors favors the phosphorolytic over the transferase reaction. The utilization of thymine in cells is generally less than 1% of dThd incorporation, which supports the evidence that dThd catabolism dominates thymine anabolism (8, 10, 11).

Expression of dThdPase is elevated in many malignant tumors, but a wide range of activities have been reported (review, Ref. 12). We have previously confirmed this heterogeneity of dThdPase activity in a sample group of breast tumor cytosols prepared from primary excision biopsies (13, 14). It is conceivable that the observed elevations in dThdPase activity could contribute to the efficacy of ZD1694 in vivo.

To evaluate the potential role of elevated dThdPase activity in vitro, the human breast carcinoma cell line MCF-7 was transfected with human dThdPase cDNA, and a stable clone TP-4 was generated. The wild type and clonal line were tested for their response to TS inhibition with various "pulses" of dThd rescue during and/or after ZD1694 exposure. The addition of exogenous Escherichia coli dThdPase was also examined to establish the relative contributions of intra- versus extracellular dThdPase activity. Our data demonstrate that a complete rescue of the parental line occurs if exogenous dThd (0.3–3 μM) is present during the 48-h ZD1694 exposure and for at least 48 h afterwards. In contrast, the same 96-h rescue was almost totally ineffective in the transfected cell line TP-4, which overexpressed intracellular dThdPase. Furthermore, when comparative activities of exogenous E. coli dThdPase (initial seeding density, 10⁴ TP-4 cells) were included during the "window" of dThd rescue, this phenomenon could be reproduced almost as effectively in the parental line. These data suggest that intra- or extracellular dThdPase activity, when present during initial ZD1694 exposure, can significantly reduce the bioavailability of dThd and, therefore, contribute to the cytotoxic impact of TS inhibition.

Materials and Methods

Chemicals. ZD1694, a gift from Zeneca (Alderley Edge, United Kingdom) was dissolved in 0.4 μM sodium bicarbonate and stored in aliquots at 4°C, protected from light. Cell culture-grade dThd, E. coli dThdPase, and all of the other chemicals were purchased from Sigma (Poole, United Kingdom).

Cell Lines. Human MCF-7 breast cell lines (passage 52–75) and the clone TP-4 were grown in DMEM. (All of the media were prepared at Imperial Cancer Research Fund Laboratories, Clare Hall, United Kingdom.) The medium was supplemented with 10% (v/v) FCS and 2 mM glutamine. Cells were grown at 37°C in a 100% humidified incubator with a gas phase of 5% CO₂. Cells were routinely screened as negative for Mycoplasma.

Transfection of dThdPase cDNA into MCF-7 Cells. Transfection and isolation of dThdPase clones have been described elsewhere (14). Briefly, pS⁺ plasmid vector containing full-length dThdPase DNA was introduced into MCF-7 cells by electroporation. Stable transfectants were selected by long-term incubation in Geneticin.

Quantification of Drug Sensitivity. The MTT-proliferation assay was used to determine the dose-response curves of the parental and clonal cell lines as described previously (15). The cells were seeded at an initial density of 10⁴ cells/mL.

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2 The abbreviations used are: TS, thymidylate synthase; dThd, thymidine; dThdPase, dThd phosphorylase; 5-FU, 5-fluorouracil.
cells/well. IC50 values were determined relative to the control wells, which contained no drug. After initial evaluation, all of the ZD1694 exposures were for 48 h. Exogenous dThd or dThdPase additions were varied as described in the “Results” section. Cells were allowed to grow for a total of 12 days.

Influence of ZD1694 Exposure on [3H]dThd Uptake. Subconfluent monolayers of MCF-7 parental and TP-4 cells were incubated for 4 h with or without ZD1694 (10–100 nM) in serum-free medium; 0.3 μM [3H]dThd (20 μCi/nmol) was added for 30 min, after which the medium was rapidly aspirated. Cells were washed three times in ice-cold calcium- and magnesium-free phosphate buffered saline-A, harvested by trypsination, and pelleted (4°C). The insoluble pellet was washed twice with 0.2 M perchloric acid and solubilized in 0.5 ml of 0.3 M KOH before transfer to scintillation vials.

Results

dThdPase Activity Determinations. The dThdPase activities of the parental and TP-4 MCF-7 cell lines and their relationship to activities found in primary breast biopsies have been reported previously (13, 14). Basal activity of the parental MCF-7 cell line was 38.2 ± 5.9 as compared with 338 ± 133 nmol thymine released/h/mg lysate protein (37°C) for the TP-4 clonal line. This represents an 88-fold elevation in dThdPase activity. Doubling times for the two cell lines were not significantly different in vitro.

Optimization of dThd Rescue in the MCF-7 Wild-Type Cell Line. Initial experiments were conducted on the parental line to determine the most effective schedule of dThd (1.0 μM) rescue during and/or after the 48-h exposure to ZD1694. These data are summarized in Table 1. The addition of dThd during the 48-h ZD1694 exposure was essential for effective rescue. If the rescue was initiated only on the removal of the drug and continued for the remaining 10 days of growth, a modest shift in IC50 from 6.0 to 9.6 nM could be achieved. However, if a delay of 24 h was introduced before the dThd addition, rescue was totally ineffective. Thus, the ability of exogenous dThd to rescue the

### Table 1 Parental MCF-7 cell line

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<sup>a</sup> All of the plates were treated with 1–10,000 nM ZD1694 for an initial 48-h period.

<sup>b</sup> IC50 (where determinable) is the mean of three independent experiments.

<sup>c</sup> +, 24-h treatment with 1.0 μM dThd.

### Fig. 1. Representative ZD1694 dose-response curves for the MCF-7 parental cell line (A) and the TP-4 clonal line (B), which expresses an 88-fold elevation of dThdPase activity relative to the parental line. All of the ZD1694 treatments were for 48 h in the presence of dThd, and dThdPase was present for an additional 48 h after the removal of the drug. Concentrations of exogenously added dThd are (O) 0 μM, (C) 0.3 μM, (△) 1.0 μM, and (■) 3.0 μM. Cells were allowed to grow for an additional 8 days after the removal of dThd (total growth time, 12 days).
AZD1694 (TOMUDEX), dThd RESCUE, AND dThdPase IN VITRO

Fig. 2. The influence of AZD1694 exposure on [3H]dThd uptake in MCF-7 parental cells and TP-4 cells. Cultures were incubated for 4 h with or without AZD1694 (3 and 30 nM, respectively) in serum-free medium. Then 0.3 µM [3H]dThd (20 µCi/10^6 cells) was added for 30 min, after which the medium was rapidly aspirated. Cells were harvested (4°C) and [3H]dThd (clear bars) and [3H]thymine (hatched bars) were separated by TLC and counted.

Fig. 3. Representative AZD1694 dose-response curves for the MCF-7 parental cell line. All of the AZD1694 treatments were for 48 h in the presence of dThd and for 48 h after the removal of the drug. Concentrations of exogenously added dThd are (○) 0 µM; (□) 0.3 µM; (△) 1.0 µM; and (●) 3.0 µM. E. coli dThdPase was also present during the period of dThd rescue at specific activities equal to 10^7 TP-4 cells (total activity of 20.6 nmol thymine released/h) (A) and 10^5 TP-4 cells (B). Cells were allowed to grow for an additional 8 days after the removal of dThd ± E. coli dThdPase (total growth time, 12 days).

Parental MCF7

TP-4 MCF7

AZD1694 (4 hr)

AZD1694 (4 hr)

Influence of Elevated Intracellular dThdPase Activity on dThd Rescue. In contrast, experiments conducted using the clonal line TP-4 demonstrated that the presence of elevated dThdPase activity could very significantly modulate this “dThd rescue” phenomenon. By using the previously optimized schedule of drug exposure (48 h) and dThd rescue (96 h), MCF-7 wild-type and TP-4 cell lines were rescued with various concentrations of exogenous dThd (0.3–3.0 µM). In the absence of dThd, dose-response curves were similar for the two cell lines, with IC50 values in the low nM range (Fig. 1A and B). The TP-4 line was modestly but consistently (P < 0.027) more sensitive than the parental line (3.5 and 6.0 nM, respectively) under these conditions, perhaps indicating the presence of low levels of dThd in the FCS medium supplement.

The addition of 0.3 µM dThd (96 h) resulted in a significant modulation of the dose-response curve for the parental line, such that an IC50 value was no longer determinable (Fig. 1A). In contrast, 0.3 µM dThd rescue in the TP-4 cell line only shifted the IC50 value from 3.5 to 8.0 nM (Fig. 1B). Increasing concentrations of exogenous dThd (1.0 and 3.0 µM) were more effective at reversing the AZD1694-dependent toxicity in both cell lines. However, the rescue was far superior in the parental line. Indeed, no significant inhibition of growth could be achieved in the parental line at either 1.0 or 3.0 µM dThd, whereas IC50 values for the TP-4 line were 26 and 88 nM, respectively. This represents a very significant modulation of rescue at physiologically relevant dThd concentrations and suggests that, within this in vitro model, elevated dThdPase activity need only be present during the initial period of TS inhibition to compromise any dThd-dependent rescue phenomena.

Uptake and Metabolism of [3H]dThd in AZD1694-Treated Cells. After a 4-h treatment at 3 or 30 nM AZD1694, parental and TP-4 cells were pulsed with 0.3 µM [3H]dThd for 30 min before harvesting and acid extraction. Total uptake of [3H]-label was similar in both cell lines under comparable conditions. Consistent with the impact of exogenous dThd on the modulation of the dose-response curves of the parental (but not the TP-4 cell line), a greater proportion of the initial dThd uptake was metabolized to thymine. At 30 nM AZD1694 pretreatment, 29% (0.57 pmol/10^6 cells) of the total salvaged dThd was rendered metabolically unavailable to relieve the acute TS inhibition in the TP-4 cells, compared with just 3.6% (0.11 pmol/10^6 cells) in the parental cell line (Fig. 2). Therefore, the presence of intracellular dThdPase activity could modify the extent to which dThd was available via the nucleotide salvage pathway.

Comparative Roles of Intracellular and Extracellular dThdPase Activity. To examine whether the presence of extracellular dThdPase activity would be sufficient to mimic this effect seen for intracellular expression, increasing quantities of E. coli dThdPase were added exog-
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**Fig. 4. Western immunoblot analysis of the MCF-7 parental and TP-4 cell lines for dThdPase Protein in Conditioned Medium.** Analysis of the relative proportions of dThdPase protein in the intra- and extracellular fractions after 24-h medium conditioning was conducted by Western blotting (Fig. 4). Densitometric analysis of total dThdPase protein in cell extracts versus conditioned medium that was concentrated 100-fold by Macrostep centrifugal concentration (10 kDa cutoff) confirmed the presence of at least a 10,000-fold excess of intracellular dThdPase protein in the TP-4 cell line. This suggests that the background levels of extracellular dThdPase are not contributing significantly to the metabolism of exogenous dThd, and, therefore, in the absence of exogenously added E. coli dThdPase, intracellular metabolism dominates.

**Discussion**

The observation that ZD1694 toxicity is totally ablated by the presence of salvageable dThd is consistent with the primary mode of action being TS-inhibition. Thus, despite a complete block in de novo dThd synthesis, dThd in the surrounding environment can be used by the salvage pathways to regenerate the depleted nucleotide pools, ensuring continued DNA synthesis and repair. Critically, nucleosides and/or the immunostaining of tumor sections have demonstrated a significant intertumoral variability. Our in vitro data suggest that this heterogeneity may be a factor in the efficacy of ZD1694 treatment and, therefore, imply that approaches aimed at rational patient selection based on "enzyme-profiling" of tumor tissues could target those individuals most likely to benefit from treatment with ZD1694. Several studies have indicated that high dThdPase expression is associated with poor prognosis (12, 16, and references therein). We have reported recently that patients treated with adjuvant cyclophosphamide, methotrexate, and 5-FU for node-positive breast cancer had a better prognosis if dThdPase was elevated in their tumors (18). Methotrexate cytotoxicity, and perhaps 5-FU cytotoxicity, can be potentiated by preventing dThd-rescue (17), which suggests that the influence of dThdPase on therapy with cyclophosphamide, methotrexate, and 5-FU reflects a potential for manipulation of the salvage pathway in vivo. Additionally, approaches that are aimed at inducing tumor dThdPase activity, such as IFN-α and IFN-γ treatment (11), may enhance the response to ZD1694 treatment.

**References**

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