Activity of a New Vascular Targeting Agent, ZD6126, in Pulmonary Metastases by Human Lung Adenocarcinoma in Nude Mice

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ABSTRACT

ZD6126 (ANG453) is a novel vascular targeting agent that selectively disrupts the cytoskeleton of endothelial cells in tumor. In mouse s.c. xenograft models, ZD6126 was found to induce selective occlusion of tumor blood vessels, cessation of tumor blood flow, and death of tumor cells because of the starvation of oxygen and nutrition. Here, we investigated whether ZD6126 inhibited the metastatic formation of human non-small cell lung cancer cells. PC14PE6 (adenocarcinoma) and H226 (squamous cell carcinoma) cells were injected into the tail vein of nude mice, and lung metastases were estimated. ZD6126 treatment involved either a single dose on 24 h before killing or daily doses from day 14 until the end of the experiment. Single treatment with i.p. injection of 200 mg/kg ZD6126 caused bleeding and necrotic changes in the tumor by 24 h. Histological analysis revealed that apoptotic tumor cells were markedly increased in the ZD6126-treated group. Moreover, ZD6126 induced the apoptosis of CD31-positive vascular endothelial cells in tumors but not in the normal lung parenchyma. When mice were treated daily with 100 mg/kg ZD6126 from day 14 until the end of the experiment, the lung weight was significantly less in the ZD6126-treated group than that of the control group, despite no difference in the number of metastatic nodules. These data suggest that ZD6126 could demonstrate its antitumor activity against both already established and early phase of lung cancer metastasis by causing the selective apoptosis of tumor endothelial cells and destruction of the tumor vasculature.

INTRODUCTION

Lung cancer is a leading cause of malignancy-related death worldwide, and >90% of deaths from lung cancer can be attributed to metastasis. One of the major obstacles in treating metastases is that tumors are biologically heterogeneous and contain subpopulations of cells with different angiogenic, invasive, and metastatic properties. To produce metastasis, tumor cells must complete a series of sequential and selective steps (1, 2). Failure to complete even one step eliminates the cells from the process (3). Therefore, therapy of cancer metastasis can be targeted not only against tumor cells but also against host homeostatic factors that facilitate this process, and this host microenvironment seems to be important when treating cancer metastases.

Although tumors 1–2 mm in diameter can receive all nutrients by diffusion, further growth depends on the development of an adequate blood supply, i.e., angiogenesis. Many studies have consistently reported that the angiogenesis plays an essential role in progression of solid tumors and metastases, including lung cancer, and inhibition of angiogenesis may provide a novel and more general approach for treating metastases by manipulation of the host environment (4–7).

To inhibit angiogenesis, two major strategies could be considered:

(a) one is to block the angiogenic factor that is produced by either tumor cells or host cells; and (b) the other is to disrupt tumor endothelial cells directly and arrest blood flow in tumors. Most antiangiogenic agents, such as matrix metalloproteinase inhibitors, have been developed on the basis of the former concept. However, effects with antiangiogenic agents seen to date are far from adequate, and other approaches are being studied (8, 9). In this study, we focused on an alternative strategy known as “vascular targeting” therapy.

It has been reported that tumor blood vessels differ significantly from vessels in normal tissues, e.g., tumors contain a chaotic network of tortuous thin-walled vessels, within which there is a significant proportion of neovascularization because of a relatively high proportion of proliferating endothelial cells (10, 11). These specific features of neovascularization might provide targets with selectivity for tumors, including adhesion molecule expression, altered coagulation control, and increased permeability (10). As a therapeutic approach, vascular targeting aims to exploit the distinctive features of tumor vasculature to irreversibly arrest blood flow in tumors (12). The resulting ischemia leads to a rapid cascade of secondary tumor cell death and the destruction of central areas of a tumor normally resistant to conventional therapies (13–15). This vascular targeting strategy is therefore distinct from antiangiogenic approaches that aim primarily to prevent new vessel formation to restrict tumor growth.

ZD6126 is a novel vascular targeting agent that was developed for its tubulin-binding properties and its ability to induce vascular damage in tumors. It is a phosphate produg of the tubulin binding agent N-acetylcolcholin (ZD6126 Phenol) that inhibits microtubule polymerization. Release of ZD6126 Phenol by phosphatases in vivo leads to the selective disruption of the cytoskeleton of tumor endothelial cells. This result is selective occlusion of tumor blood vessels, cessation of tumor blood flow, and death of tumor cells because of the starvation of oxygen and nutrition in mouse s.c. xenograft models (16). However, the effect of ZD6126 on metastatic tumor is not well understood. The aim of this study was to assess the antitumor effect of ZD6126 on lung cancer metastasis. Specifically, using a lung metastasis model, we have examined the effect of ZD6126 on both early and advanced phases of lung metastases. In addition, immunohistochemical technique was used to determine the effect of ZD6126 on tumor cells and endothelial cells in the metastatic lung tumor, and possible underlying mechanisms of action of this novel compound are discussed.

MATERIALS AND METHODS

Cell Lines. The human lung adenocarcinoma cell line PC14PE6 was a kind gift from Dr. I. J. Fidler (17). The human lung squamous cell carcinoma cell line H226 was obtained from Dr. J. D. Minna (University of Texas Southwestern Medical School, Dallas, TX; Ref. 18). PC14PE6 cells were maintained in RPMI 1640, and H226 cells were maintained in DMEM. Both media were supplemented with 10% fetal bovine serum and penicillin-streptomycin. Cells were cultured in a humidified CO2 incubator at 37°C. HMVEC3 (Kurabo, Japan) were cultured in a humidified CO2 incubator at 37°C. HMVEC3 is a human dermal microvascular endothelial cell.

3 The abbreviations used are: HMVEC, human dermal microvascular endothelial cell; TUNEL, terminal deoxynucleotidyl transferase-mediated nick end labeling; MTT, 3-(4,5-...
Table 1  Effect of single administration of ZD6126 on the formation of lung metastasis by lung cancer cell lines in nude mice

<table>
<thead>
<tr>
<th>Cell line</th>
<th>Group</th>
<th>Mice with tumor/total</th>
<th>No. of lung metastasis</th>
<th>Lung weight (mg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PC14PE6</td>
<td>A</td>
<td>4/4</td>
<td>50.5 (28–73)</td>
<td>487 (332–632)</td>
</tr>
<tr>
<td></td>
<td>B</td>
<td>3/3</td>
<td>25 (13–34)</td>
<td>508 (367–523)</td>
</tr>
<tr>
<td>H226</td>
<td>A</td>
<td>5/5</td>
<td>&lt;150</td>
<td>275 (238–310)</td>
</tr>
<tr>
<td></td>
<td>B</td>
<td>5/5</td>
<td>&lt;150</td>
<td>273 (243–306)</td>
</tr>
</tbody>
</table>

'PC14PE6 or H226 cells were injected into the tail vein of nude mice on day 0. Experimental lung metastasis was determined on days 35 (PC14PE6) or 56 (H226).

Group A: PBS-treated (control) group. Group B: The mice were treated with ZD6126 (200 mg/kg) 24 h before killing.

Osaka, Japan) were maintained in HuMedia-MvG with growth supplements (Kurabo) and used for in vitro assays at passage 2–5.

Reagents. ZD6126 was synthesized by AstraZeneca (Cheshire, United Kingdom). Cisplatin, VP-16, and Paclitaxel were provided by Bristol-Myers Squibb (Princeton, NJ). Docetaxel and Vincristine were from Aventis Pharma (Strasbourg, France) and Eli Lilly (Indianapolis, IN), respectively.

Animals. Male athymic BALB/c nude mice, 5 weeks old, were obtained from CLEA Japan (Osaka, Japan) and maintained under specific pathogen-free conditions throughout this study. Experiments were performed according to the guidelines of our university.

Experimental Metastasis in Vivo. For production of lung metastasis, 1 × 10⁶ PC14PE6 or 5 × 10³ H226 cells suspended in 0.2 ml of PBS were injected i.v. into the tail vein of nude mice (17). After the injection of PC14PE6 or H226 cells, mice were humanely killed on days 35 or 56, respectively, for measurement of pulmonary nodules.

Histology and Immunohistochemistry. After killing the mice, the lungs were fixed in Bouin’s solution or cut into 5-mm fragments and placed into either buffered 10% formalin solution or OCT compound (Miles Laboratories, Elkhart, IN) to be snap frozen in liquid nitrogen for immunohistochemical analysis. TUNEL method was performed after the protocol of Apoptosis Detection System (Promega, Madison, WI). Briefly, the frozen tissue sections (9-μm thick) were fixed with PBS containing 4% formalin. The slides were washed with PBS and permeabilized with 20 μl/ml protease K. The samples were then equilibrated, and DNA strand breaks were labeled with fluorescein-12-dUTP by adding nucleotid mix and terminal deoxynucleotidyltransferase enzyme. The reaction was stopped with 2 × SSC and washed, and localized green fluorescence of apoptotic cells was detected by fluorescence microscopy. For double staining for TUNEL and CD31, frozen tissue sections were fixed with cold acetone. After washing the slides, TUNEL method was first performed as described, and then samples were incubated for 10 min at room temperature with protein-blocking solution consisting of PBS and 5% fetal bovine serum. Excess blocking solution was drained, and the samples were incubated for 18 h at 4°C with 1:200 dilution of rat antimouse CD31 monoclonal antibody (PharMingen, San Diego, CA). The samples were then rinsed with PBS and incubated for 60 min at room temperature with the appropriate dilution of Texas Red-conjugated goat anti-rat IgG (Vector Laboratories, Burlingame, CA). Sections (4-μm thick) of formalin-fixed, paraffin-embedded tissues were also stained with H&E for routine histological examination.

Cell Proliferation Assay. Cell proliferation was measured by the MTT dye reduction method (19). Briefly, 2 × 10³ cells/100 μl were plated into each well of 96-well plates in medium and incubated at 37°C under 5% CO₂ in humidified air. After 24 h, 100 μl of various concentration of anticancer drugs or ZD6126 were added and incubated for an additional 72 h. After incubation, 50 μl of stock MTT solution (2 mg/ml; Sigma, St. Louis, MO) were added to all wells, and the cells were incubated for 2 h at 37°C. The media containing MTT solution were removed, and the dark blue crystals were dissolved by adding 100 μl of DMSO. Absorbance was measured at an MTP-120 microplate reader (Corona Electric, Ibaraki, Japan) at test and reference wavelengths of 550 and 630 nm, respectively.

Statistical Analysis. The significance of differences of in vivo data was analyzed by the Mann-Whitney t test, and the significance of differences of in vitro data was analyzed by Student’s t test (two tailed).

dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide; CA4P, Combretastatin A4 phosphate.

RESULTS

Effect of Single Administration of ZD6126 on Metastatic Lung Tumors. In the first set of experiments, we examined the effect of single administration of ZD6126 on established lung metastasis by PC14PE6 and H226 cells in vivo. Weeks (5–8) after PC14PE6 or H226 cell injection into nude mice, 200 mg/kg ZD6126 were administrated i.p. After 24 h, the mice were killed, and the number of metastatic nodules and the lung weight (represents total tumor volume) were evaluated. Treatment of ZD6126 had no effect on the number of lung metastasis or lung weight in either cell lines (Table 1). In PC14PE6-injected group, however, when treated with ZD6126, the color of metastatic tumor became red, suggesting the presence of bleeding and necrotic changes in the tumors (Fig. 1A). As shown in Fig. 1B, microscopic analysis revealed that bleeding and necrotic change were seen in ZD6126-treated tumors. On the other hand, no remarkable change was seen in normal lung parenchyma (data not shown). Although H226 cells also produced lung metastases, the metastatic nodules were so small (0.5–1 mm in diameter) that tumor-associated vessels were hardly seen in the tumors (data not shown). Therefore, PC14PE6 cells were selected for after in vivo experiments and microscopic analysis.

Effect of ZD6126 on Tumor Apoptosis. On the basis of the data in Fig. 1, we next examined whether the single administration of ZD6126 might increase the apoptotic cells in tumors. The frozen sections of the lung with metastatic nodules were prepared, and apoptotic cells were assessed as described in “Materials and Methods” (Fig. 2A). Single treatment with ZD6126 resulted in a significant (10-fold) increase of apoptotic cells compared with control (Fig. 2B).

Selective Induction of Tumor-associated Endothelial Cell Apoptosis by ZD6126 in Vivo. Because ZD6126 has been developed as a vascular targeting agent, our next question was whether ZD6126 induced endothelial cell apoptosis in metastatic lung tumors. To assess the endothelial cell apoptosis, sequential immunohistochemical staining for TUNEL and CD31 was performed (Fig. 3). Although tumor cell and endothelial cell apoptosis in control group was minimal, single treatment with ZD6126 resulted in the 10-fold increase of apoptotic endothelial cells in the tumors (Fig. 4). On the other hand, apoptosis of endothelial cells in the normal lung parenchyma was
nearly undetectable. No difference in the number of CD31-positive cells was observed between control and ZD6126-treated tumors (microvessel density was 15 and 15.3, respectively). These findings suggest that ZD6126 selectively leads to tumor endothelial cell apoptosis, whereas it has a minimum effect on normal endothelial cells.

Selective Inhibition of Endothelial Cell Proliferation by ZD6126 in Vitro. To confirm the selectivity of ZD6126 against tumor endothelial cells, we next examined the effect of ZD6126 on the proliferation of PC14PE6 and H226 cells and HMVECs in vitro using MTT assay. Because endothelial cells in tumor blood vessels divide rapidly, whereas those in normal tissues do not, we decided to use growing HMVECs as a mimicry of tumor endothelial cells. ZD6126 inhibited proliferation of HMVECs at lower concentrations, which could not affect proliferation of PC14PE6 or H226 cells (Fig. 5A), indicating that ZD6126 selectively inhibited the endothelial cell proliferation in vitro. On the other hand, no significant difference was seen in other anticancer drugs that target tubulin function or are used for non-small cell lung cancer (Fig. 5, B–F). IC$_{50}$s of ZD6126 concentration against PC14PE6 and H226 cells and HMVECs were 241.1, 311.5, and 48.7 ng/ml, respectively.

Effect of Continuous Administration of ZD6126 on Metastatic Lung Tumors. We finally examined the therapeutic effect of ZD6126 on lung metastases by PC14PE6 cells. PC14PE6 cells were injected i.v. into nude mice. Daily i.p. administration of ZD6126 commenced 14 days after tumor cell inoculation (because at this time, the PC14PE6 cells progress to micrometastases in the lung) and continued until mice were killed. Treatment with 50 mg/kg ZD6126 had no effect on the number of metastatic nodules or lung weight (Table 2). Treatment with 100 mg/kg ZD6126 inhibited lung weight, although the reduction in the number of lung metastases did not reach statistical significance. These results suggest that ZD6126 inhibits the tumor growth by disrupting the feeding vessels, although it does not have a strong effect to kill tumor cells. Treatment with ZD6126 was well tolerated, and loss of body weight was not observed throughout this study.

DISCUSSION

The facts that we have shown in this study are: (a) single administration of ZD6126 could induce the hemorrhage and necrosis of already established lung metastases; (b) ZD6126 could lead to apoptosis of endothelial cells in the tumors but not in the normal lung parenchyma; (c) ZD6126 affected endothelial cells in the tumors more selectively rather than tumor cells; and (d) continuous administration of ZD6126 reduced tumor burden in the lung but not the number of metastatic nodules.
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Among several steps to complete metastasis, angiogenesis takes
one of the most critical parts (11). The blockade of angiogenesis might
prevent the growth of tumor cells at both the primary and secondary
sites and thus prevent the emergence of metastases and lead the tumor
to dormancy. The tumor dormancy would result in the prolongation
of survival and improvement of quality of life for cancer patients with
advanced stage. From this point of view, dozens of molecular-targeted
agents (mostly angiogenesis targeted) have been developed to over-
come the cancer metastasis, and many experimental studies have
shown that angiogenesis-targeted agents are effective enough to con-
trol tumor cell growth and metastases (22–25). Once they proceed to
clinical phase studies, however, the outcome thus far is not adequate
and leaves room for improvement (8, 9). What makes this discrep-
ancy? In view of this conflict, several studies have demonstrated that
down-regulation of the expression of angiogenic factors, such as basic
fibroblast growth factor, vascular endothelial growth factor, or fibro-
blast growth factor-binding protein, after the tumor had reached a
certain size did not affect further tumor growth, although it resulted in
a marked inhibition of small tumors (26–28). Antiangiogenic therapy
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tumor regression (29–33).

From this point of view, ZD6126 has a completely new aspect.
Besides the antitumor effect of continuous administration from early
phase of metastasis, ZD6126 has a direct effect on tumor endothelial
cells and leads them to undergo apoptosis in established lung metas-
tases. This event would result in the cessation of tumor blood flow and
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Previous studies with ZD6126 have indicated by H&E staining that
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which we usually meet in the clinical situation.

Another feature of ZD6126 is that this compound attacks tumor
endothelial cells but not normal endothelial cells. Furthermore, it
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**Table 2** Effect of continuous administration of ZD6126 on the formation of lung metastasis by PC14PE6 cells in nude mice

<table>
<thead>
<tr>
<th>ZD6126 (mg/kg)</th>
<th>Mice with tumor/total</th>
<th>No. of lung metastasis</th>
<th>Lung weight (mg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>9/10</td>
<td>77 (0–93)</td>
<td>550 (168–663)</td>
</tr>
<tr>
<td>50</td>
<td>10/10</td>
<td>83 (47–108)</td>
<td>473 (321–600)</td>
</tr>
<tr>
<td>100</td>
<td>9/10</td>
<td>57 (0–102)</td>
<td>333 (250–484)</td>
</tr>
</tbody>
</table>

*PC14PE6 cells were injected into the tail vein of nude mice on day 0. Experimental lung metastasis was determined on days 35.*

*Statistically significant difference (*P* < 0.05) compared with the value obtained in the absence of treatment.*
ZD6126 against tumor endothelial cells remains unclear, but mutations of tubulins may be responsible for this phenomenon. Additional examinations are warranted to clarify this mechanism.

Concerning the therapeutic efficacy of ZD6126, total tumor volume but not the number of metastatic nodules was reduced by continuous administration. Continuous administration of ZD6126 in addition to inducing acute antivascular effects may also inhibit formation of new blood vessels (angiogenesis). The data in Table 2 indicate that the effect of ZD6126 might result in the delay of each tumor growth.

Several vascular targeting agents, such as CA4P, have been developed and evaluated their antitumor activity. ZD6126, however, seems to be less toxic than CA4P. Indeed, the data from CA4P Phase I studies indicate ataxia and neurotoxicity as dose-limiting toxicities (36). On the other hand, neither ataxia nor neurotoxicity have been observed in the ZD6126 Phase I study (final data from ZD6126 Phase I study will be presented at ASCO 2002).

In conclusion, ZD6126 is a new vascular targeting agent that selectively targets the tumor-associated endothelial cells and leads to tumor death by effects on tumor vasculature involving induction of endothelial cell apoptosis. Besides the therapeutic efficacy on early stage tumor, ZD6126 could be distinct from other antiangiogenic agents in view of the efficacy against established metastatic tumor. ZD6126 is currently in Phase I clinical trials.

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