

**Cross-talk between ER and TGF $\beta$  Signaling Pathways**  
**in Human Breast Cancer**

by

Tracy Christine Cherlet

A Thesis submitted to the Faculty of Graduate Studies of

The University of Manitoba

In partial fulfilment of the requirements of the degree of

**DOCTOR OF PHILOSOPHY**

Department of Biochemistry and Medical Genetics

University of Manitoba

Winnipeg, MB

Copyright ® January, 2007

THE UNIVERSITY OF MANITOBA  
FACULTY OF GRADUATE STUDIES  
\*\*\*\*\*  
COPYRIGHT PERMISSION

**Cross-talk between ER and TGF $\beta$  Signaling Pathways**

**In Human Breast Cancer**

**BY**

**Tracy Christine Cherlet**

A Thesis/Practicum submitted to the Faculty of Graduate Studies of The University of  
Manitoba in partial fulfillment of the requirement of the degree

**DOCTOR OF PHILOSOPHY**

**Tracy Christine Cherlet © 2007**

Permission has been granted to the University of Manitoba Libraries to lend a copy of this thesis/practicum, to Library and Archives Canada (LAC) to lend a copy of this thesis/practicum, and to LAC's agent (UMI/ProQuest) to microfilm, sell copies and to publish an abstract of this thesis/practicum.

This reproduction or copy of this thesis has been made available by authority of the copyright owner solely for the purpose of private study and research, and may only be reproduced and copied as permitted by copyright laws or with express written authorization from the copyright owner.

limiting in Smad3 mediated p3TP-lux expression in the presence of ligand bound ER $\alpha$ , as over-expression of c-Jun reverses the inhibitory effect of estrogen bound ER.

Given these results, a model was proposed in which ligand bound ER sequesters c-Jun away from the promoter region of p3TP-lux, effectively inhibiting Smad3 transcriptional activity. However, EMSA and ChIP experiments were unsuccessful in determining whether alterations in the binding of c-Jun or ER $\alpha$  to the promoter region occur in the presence of estradiol. Alternate models through which ER modulates Smad3 transcriptional activity are discussed.

## ACKNOWLEDGEMENTS

First and foremost, I would like to thank my supervisor, Dr. Leigh Murphy, for all her support and mentorship over the course of my studies. It has been a long and difficult time, both professionally and personally, and my admiration for her strength and dedication will never fade. I would also like to thank the members of my thesis committee, Dr. J. Davie, Dr. J. Dodd and Dr. E. Leygue for such excellent suggestions on experimental issues. Dr. Leygue, you have been such a tremendous help during the review and revisions of this thesis. A special thanks goes out to Dr. Christine Pratt, University of Ottawa, for coming out to the University of Manitoba to attend the oral examination. Your comments and advice was greatly appreciated. Thanks to all members of Dr. Murphy's laboratory, both past and present, especially Charlene Bergen and Kanyarat Ung, for their excellent technical assistance, support and words of encouragement over the years.

Special thanks go out to my Section Manager, Val Mason-Daniel, at the Royal Canadian Mounted Police Forensic Laboratory Services, for allowing me to take professional development time from the R.C.M.P. to complete my studies.

This thesis would not have been a success without the support and care given to me by my family. Thanks to my parents and husband who have been so patient and supportive over the years (and years it has been!). Brian, you can finally have your wife back! Thanks to my mom for helping with the printing and distribution of this thesis.

I would also like to thank the Manitoba Health Research Council, United States Army Department of Defence and the Department of Biochemistry and Medical Genetics for financial support.

## **TABLE OF CONTENTS**

Abstract	i
Acknowledgements	iii
Table of Contents	iv
List of Tables	vii
List of Figures	viii
List of Abbreviations	xii
<b>INTRODUCTION</b>	<b>1</b>
I.    Breast Cancer	1
A.    Risk Factors in the Development of Breast Cancer	2
B.    Treatment of Breast Cancer	5
i.    Hormone Therapy in the Treatment of Breast Cancer	6
a.    Aromatase Inhibitors	7
b.    Selective Estrogen Receptor Modulators	8
II.   Nuclear Receptors	11
A.    Estrogen Receptor	11
i.    Tissue and Cellular Expression of ER $\alpha$ and ER $\beta$	12
ii.   ER $\alpha$ mRNA	14
iii.  ER $\beta$ mRNA and Protein	16
iv.   ER $\alpha$ and ER $\beta$ Structural and Functional Domains	18
v.    Cellular Localization and Protein Associations of Unbound ER	22
III.  ER Mechanism of Action	24
A.    Classical Mode of ER Action	25
i.    The Estrogen Response Element	25
ii.   ER $\alpha$ and ER $\beta$	28
iii.  Influence of Ligand on ER Transcription	30
a.    Estrogen	30
b.    Antiestrogens	32
Non-steroidal antiestrogens	32
Steroidal antiestrogens	33
iv.   Co-regulators	35
a.    Co-activators	36
b.    Co-repressors	41
B.    Ligand-Independent Activation of ER	43
C.    Non-Classical Mode of ER Action	45
i.    Activator Protein-1	46
ii.   Interaction between Ap-1 and ER	50
iii.  Ap-1 and the Non-Classical Mode of ER Action	54

iv.	The TGF $\beta$ <sub>3</sub> Promoter and the Non-Classical Mode of ER Action	58
D.	Non-Genomic Mechanism of ER Action	59
IV.	ER Cross-talk with Other Signaling Pathways	59
A.	The TGF $\beta$ Signaling Pathway	60
i.	TGF $\beta$ Receptors	60
ii.	Smads	62
iii.	TGF $\beta$ and ER Cross-Talk	64
iv.	TGF $\beta$ and Cancer	65
V.	ER and Breast Cancer	67
Research Aim		71
Hypothesis		71
Objectives and Overview of Methods and Results		72
Relevance to Breast Cancer		76
<b>MATERIALS AND METHODS</b>		77
<b>Materials</b>		77
<b>Methods</b>		81
i.	Cell Culture	81
ii.	Transient Transfections	81
a.	Cos1 cells	81
b.	MCF-7 cells	82
iii.	Luciferase and $\beta$ -Galactosidase Activity	84
iv.	<i>In vitro</i> Transcription and Translation	85
v.	Immunoprecipitation	85
vi.	DSP Cross-Linking and Immunoprecipitation	86
vii.	Immunodetection by Western Blotting	87
viii.	Protein Assay	88
ix.	RT-PCR Reactions	88
x.	Electrophoretic Mobility Shift Assay	90
xi.	Chromatin Immunoprecipitation	93
xii.	Statistical Analysis	95
xiii.	Human Breast Tumors	95
xiv.	Immunohistochemistry	96
xv.	Statistical Analysis of Immunohistochemistry	97
<b>RESULTS</b>		98
<b>Section I. Functional Interaction between ER and TGF<math>\beta</math></b>		98
A.	Modulation of ER Activity by Smad3	98
Rationale		98
Results		98
B.	Modulation of Smad3 Activity by ER	105
Rationale		105
Results		105
i.	Effect of ER $\alpha$ Expression on Smad3 Transcriptional Activity in Cos1 Cells	105

ii.	Effect of ER $\beta$ Expression on Smad3 Transcriptional Activity in Cos1 Cells	117
iii.	Effect of ER Expression on Smad3 Transcriptional Activity in MCF-7 Cells	126
Key Findings from Section I		140
<b>Section II. Mechanism of Cross-talk between ER and TGF<math>\beta</math></b>		<b>142</b>
A.	Direct Interaction between ER and Smad3	142
	Rationale	142
	Results	142
B.	Involvement of Ap-1 Transcription Factors	150
	Rationale	150
	Results	150
Key Findings from Section II		167
<b>Section III. Relevance To Breast Cancer</b>		<b>168</b>
A.	Relation of Ap-1, ER and Smad3 in Human Breast Tumors	168
	Rationale	168
	Results	169
B.	Endogenous Model of ER Affecting TGF $\beta$ Signaling	180
	Rationale	180
	Results	182
Key Findings from Section III		187
<b>DISCUSSION</b>		<b>188</b>
<b>REFERENCES</b>		<b>209</b>

## **LIST OF TABLES**

<b><u>TABLE</u></b>	<b><u>TITLE</u></b>	<b><u>PAGE</u></b>
1	Estrogen responsive genes and their respective estrogen responsive elements.	27
2	Effect of Smad3 over-expression on pCH110 and TGF $\beta_3$ -luc activity.	103
3	Effect of ER $\alpha$ on p3TP-lux activity in Cos1 cells.	110
4	Effects of ER $\alpha$ and ER $\beta$ on Smad3 transcriptional activity in Cos1 and MCF-7 cells (summary).	141
5	Densitometric analysis of ER EMSA assays.	163
6	Clinicopathological characteristics of patients used in the tumor tissue microarrays.	170

## **LIST OF FIGURES**

<b><u>FIGURE</u></b>	<b><u>TITLE</u></b>	<b><u>PAGE</u></b>
1	Incidence and mortality rate for breast cancer in Canadian women.	1
2	Schematic drawing of estrogen, non-steroidal antiestrogens and steroidal antiestrogens.	9
3	ER $\alpha$ mRNA structure and corresponding protein functional domains.	14
4	Human ER $\beta$ protein isoforms.	18
5	Comparison of human ER $\alpha$ and ER $\beta_1$ protein structure.	21
6	The classical mechanism of ER action.	25
7	Schematic representation of the conformational states of the ER LBD	31
8	Phosphorylation sites on human ER $\alpha$ and ER $\beta_1$ .	45
9	Model of the non-classical mode of ER action.	46
10	The TGF $\beta$ signaling cascade.	61
11	Effect of Smad3 over-expression on ER $\alpha$ transcriptional activity on an estrogen responsive element (ERE) in the presence or absence of 10nM E $_2$ in Cos1 cells.	99
12	Effect of Smad3 over-expression on ER $\beta_1$ transcriptional activity on an estrogen responsive element (ERE) in the presence or absence of 10nM E $_2$ in Cos1 cells.	100
13	Effect of Smad3 over-expression on ER $\alpha$ transcriptional activity on the TGF $\beta_3$ -luc promoter in the presence or absence of 100nM Ly117018 in Cos1 cells.	102
14	Effect of Smad3 over-expression alone on pCH110 and pGL3- $\beta$ -Gal activity.	104
15	Diagrammatic representation of the basic structure of p3TP-lux.	106
16	Nucleotide sequence of the p3TP-lux insert.	107
17	Effect of Smad3 over-expression on p3TP-lux in Cos1 cells.	108
18	Western blot of Cos1 cells transiently transfected with Smad3 and ER $\alpha$ .	109
19	Effect of ER $\alpha$ on Smad3 induced p3TP-lux activity in the presence or absence of 10nM E $_2$ in Cos1 cells.	111
20	Effect of ER $\alpha$ on Smad3 induced p3TP-lux activity in Cos1 cells in the presence of vehicle, 10nM E $_2$ , 100nM 4OH-tamoxifen plus 10nM E $_2$ or 500nM ICI 182,780 plus 10nM E $_2$ .	112
21	Diagrammatic representation of the pGL3 Col7(A1) plasmid and the nucleotide sequence of the collagen 7(A1)-524/+92 promoter insert.	114
22	Effect of Smad3 over-expression on collagen 7(A1)-524/+92 activity in Cos1 cells.	115
23	Effect of ER $\alpha$ on Smad3 induced collagen 7(A1)-524/+92 activity in Cos1 cells.	116

24	Effect of ER $\alpha$ on Smad3 induced collagen 7(A1) -524/+92 activity in Cos1 cells in the presence of E $_2$ and/or antiestrogens	117
25	Western blot of Cos1 cells transiently transfected with Smad3 and ER $\beta_1$ .	118
26	Effect of ER $\beta_1$ on Smad3 induced p3TP-lux activity in Cos1 cells.	119
27	Effect of ER $\beta_2$ and ER $\beta_5$ on Smad3 induced p3TP-lux activity in Cos1 cells in the presence of 10nM E $_2$ .	121
28	Western blot of Cos1 cells transiently transfected with ER $\beta_2$ and ER $\beta_5$ .	122
29	Effect of ER $\beta_1$ on Smad3 induced collagen 7(A1)-524/+92 activity in Cos1 cells.	123
30	Western blot of Smad3 and ER in Cos1 transient transfections.	125
31	p3TP-lux activity in MCF-7 cells over-expressing Smad3 in the presence or absence of estrogen.	127
32	p3TP-lux activity in MCF-7 cells transiently transfected with ER $\alpha$ .	128
33	p3TP-lux activity in MCF-7 cells transiently transfected with ER $\alpha$ in the presence of antiestrogens.	129
34	Collagen 7(A1) activity in MCF-7 cells.	131
35	Smad3 mRNA expression in MCF-7 cells.	132
36	Effect of Smad3 on p3TP-lux activity in ER $\alpha$ and ER $\beta_1$ inducible MCF-7 cells.	134
37	p3TP-lux activity in ER $\beta_1$ inducible MCF-7 cells in the presence or absence of doxycycline.	136
38	Western blot of ER $\beta_1$ in doxycycline inducible MCF-7 cells.	137
39	p3TP-lux activity in the ER $\alpha$ inducible MCF-7 cells.	138
40	Western blot of ER $\alpha$ in doxycycline inducible MCF-7 cells.	139
41	Lack of co-immunoprecipitation of <i>in vitro</i> transcribed/translated ER and Smad3 in the presence or absence of 10nM E $_2$ .	144
42	Lack of co-immunoprecipitation of ER $\alpha$ and Smad3 in Cos1 cells.	146
43	Co-immunoprecipitation of ER $\alpha$ and ER $\beta_1$ in Cos1 cells.	147
44	Lack of co-immunoprecipitation of ER $\alpha$ and Smad3 in Cos1 cells using DSP as a cross-linking agent.	149
45	Expression of c-Jun and c-Fos in Cos1 transiently transfected cells.	151
46	Affect of Ap-1 and ER $\alpha$ on Smad3 transcriptional activity in Cos1 cells.	152
47	Affect of Ap-1 and ER $\beta_1$ on Smad3 transcriptional activity in Cos1 cells.	153
48	Affect of SRC-1 and SRC-3 on Smad3 transcriptional activity in Cos1 cells	154
49	Lack of co-immunoprecipitation of ER $\alpha$ and c-Jun in Cos1 cells using DSP as a cross-linking agent.	156
50	ER $\alpha$ and Smad3 expression in Cos1 nuclear extracts.	158
51	Effect of increasing amounts of nuclear extract on Ap-1 EMSA.	159
52	Competition experiments in nuclear EMSA assay.	160
53	Supershift experiments in nuclear EMSA assay.	161

54	Effect of activated ER $\alpha$ and Smad3 on Ap-1 EMSA.	163
55	Schematic of p3TP-lux insert showing the location of primers used in ChIP analysis.	165
56	Chromatin immunoprecipitation of c-Jun on p3TP-lux in the presence or absence of Smad3 in Cos1 cells.	166
57	Verification and characterization of Smad3 immunohistochemistry in human breast cancer sections and Cos1 cells.	172
58	Smad3 immunostaining in human breast tumor tissue microarrays.	174
59	Smad3 H-score in node + and node – tumor tissues.	175
60	Phosphorylated c-Jun expression in Cos1 cells determined immunohistochemically and by western blot.	176
61	Phosphorylated c-Jun immunostaining in human breast tumor tissue microarrays.	178
62	c-Jun H-score in node + and node – tumor tissues.	179
63	Effect of antiestrogen treatment on AIB1 protein expression in MCF-7 cells.	184
64	TGF $\beta_2$ mRNA expression in MCF-7 cells treated with 4OH- tamoxifen.	185
65	TGF $\beta_2$ mRNA expression in MCF-7 cells treated with ICI 182,780.	186
66	Model of the mechanism through which ER inhibits TGF $\beta$ signaling on p3TP-lux.	196

## LIST OF ABBREVIATIONS

### Acronyms/Abbreviations:

4OH-Tam	4-trans-monohydroxytamoxifen
AF-1	Activation function 1
AF-2	Activation function 2
AI	Aromatase inhibitor
AIB1	Amplified in Breast Cancer 1
ANOVA	Analysis of variance
Ap-1	Activator protein-1
AR	Androgen receptor
ATF	Activating transcription factor
BAMBI	BMP and activin membrane bound inhibitor
BMP	Bone morphogenetic protein
BRCA1/2	Breast cancer associated gene 1/2
cAMP	Cyclic adenosine monophosphate
CAT	Chloramphenicol acetyltransferase
CBP	CREB binding protein (CBP/p300)
ChIP	Chromatin immunoprecipitation
CM	Dulbecco's modified essential medium with 5% FCS
CREB	cAMP response element binding protein
CS	Phenol red free dulbecco's modified essential medium with 5% charcoal stripped fetal calf serum
DAX-1	<u>Dosage-sensitive sex reversal, AHC critical region on the X chromosome, gene 1</u>
DBD	DNA binding domain
DMEM	Dulbecco's minimal essential medium
DNA, cDNA	Deoxyribonucleic acid, complementary DNA
E <sub>2</sub> , estradiol	17β-Estradiol
EGF	Epidermal growth factor
EMSA	Electrophoretic mobility shift assay
ER, ERα, ERβ	Estrogen receptor, ER-alpha, ER-beta
ERE	Estrogen responsive element
ERK	Extracellular signal-related kinase
ERKO	Estrogen receptor knockout
FBS	Fetal bovine serum
FRK	Fos regulating kinase
GR	Glucocorticoid receptor
GSK-3	Glycogen synthase kinase 3
GST	Glutathione S-transferase
HAT	Histone acetyltransferase
HDAC	Histone deacetylase
hsp	Heat shock protein
ICI	Imperial Chemical Industries, ICI 182,780
IGF-1	Insulin-like growth factor 1

JNK	Jun kinase
$K_d$	Dissociation constant
LBD	Ligand binding domain
MAF	Musculoaponeurotic fibrosarcoma
MAPK	Mitogen-activated protein kinase
MEK	Mitogen-activated ERK-activating kinase
N-CoR	Nuclear receptor co-repressor
NF- $\kappa$ B	Nuclear factor kappa B
PCR	Polymerase chain reaction
PKA	Protein kinase A
PKC	Protein kinase C
PR	Progesterone receptor
PRF	Phenol red free
RAR	Retinoic acid receptor
REA	Repressor of estrogen activity
RL-tk-luc	Renilla tk luciferase
RNA, mRNA	Ribonucleic acid, messenger RNA
RT-PCR	Reverse transcription-polymerase chain reaction
RTA	Repressor of tamoxifen activation
SARA	Smad anchor for receptor activation
SBE	Smad binding element
SEM	Standard error of the mean
SERM	Selective estrogen receptor modulator
SHARP	SMRT associated repressor protein
SMRT	Silencing mediator of retinoid and thyroid receptors
SRA	Steroid receptor RNA activator
SRE	Smad responsive element
SRC-1	Steroid receptor coactivator-1
STAR	Study of tamoxifen and raloxifene
TBP	TATA-binding protein
T $\beta$ R	TGF $\beta$ receptor
TGF $\beta$	Transforming growth factor beta
tk	Thymidine kinase
TMA	Tissue microarray
TnT	<i>In vitro</i> transcription/translation
TPA	12-O-Tetradecanoylphorbol-13-acetate
TR	Thyroid hormone receptor
TRE	TPA responsive element
VDR	Vitamin D receptor

### **Amino Acids:**

Ala	Alanine
Arg	Arginine
Asn	Asparagine
Asp	Aspartic acid
Glu	Glutamic acid
Gly	Glycine
Ile	Isoleucine
Leu	Leucine
Lys	Lysine
Met	Methionine
Pro	Proline
Ser	Serine
Thr	Threonine
Tyr	Tyrosine
Val	Valine

### **Chemicals:**

BES	N,N,bis (2-Hydroxyethyl)-2-aminoethanesulfonic acid
BSA	Bovine serum albumin
CaCl <sub>2</sub>	Calcium chloride
CAPS	3-[cyclohexylamino]-1-propanesulfonic acid
DSP	Dithiobis[succinimidylpropionate]
DTT	Dithiotriatol
EDTA	Disodium ethylenediamine tetraacetate disodium salt
HCl	Hydrochloric acid
KCl	Potassium chloride
KH <sub>2</sub> PO <sub>4</sub>	Potassium phosphate monobasic
NaCl	Sodium chloride
Na <sub>2</sub> HPO <sub>4</sub>	Sodium phosphate
NaOH	Sodium hydroxide
ONPG	o-Nitrophenyl β-D-galacto-pyranoside
RNAsin	Ribonuclease inhibitor
SDS, SDS-PAGE	Sodium dodecylsulfate, SDS-polyacrylamide gel electrophoresis
TPA	12-O-Tetradecanoylphorbol-13-acetate
Tris	Tris (hydroxymethyl) aminomethane
Triton X-100	Octyl phenoxy polyethoxyethanol
Tween 20	Polyoxyethylene-sorbitan monolaurate

**Nucleotides:**

G	Guanine
A	Adenine
T	Thymine
C	Cytosine

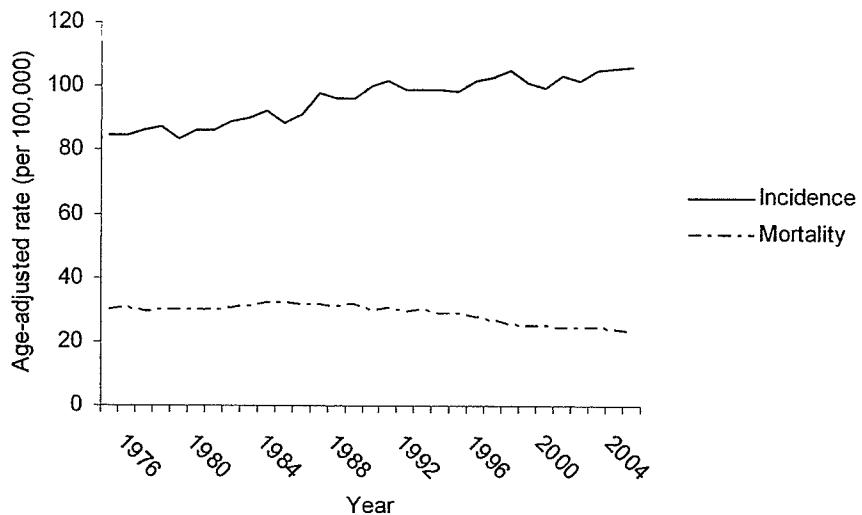
**Units:**

fmol	Fentomoles
g, mg, µg, ng	Grams, milligrams, micrograms, nanograms
h, hrs	Hour, hours
kb	Kilobases
kDa	Kilodaltons
l, ml, µl	Litre, millilitre, microlitre
°C	Degrees celsius
M, mM, µM, nM	Moles/litre (Molar), millimolar, micromolar, nanomolar
m, cm, mm	metre, centimetre, millimetre
rpm	revolutions per minute
U	Units
V	Volts
v	volume
w	weight

## **INTRODUCTION**

### **I. Breast Cancer**

Breast cancer is the most common cancer diagnosed in Canadian women with the Canadian Cancer Society estimating 22,200 new cases of female breast cancer (approximately 30% of all new cancers) to be reported in 2006 (1). Given this, it is estimated that 1 in 8.9 women are expected to develop the disease in her lifetime while 1 in 26.8 will die from it (1). However, while the incidence rates of breast cancer have stabilized since 1993 after a long period of steady increase, it is comforting to find that mortality rates are declining steadily (Figure 1) (1).



**Figure 1: Incidence and mortality rate for breast cancer in Canadian women.** Rates are expressed as per 100,000 Canadian women and are standardized to the age distribution of the 1991 Canadian population. Data for 2003-2006 are estimated. Source: Canadian Cancer Statistics, Canadian Cancer Society and the National Cancer Institute of Canada, 2006 (1).

Breast cancer typically arises from the epithelial cells that form the ductal and lobular components of the breast, although cancers associated with extracellular components have also been described but to a lesser extent (2). It is the uncontrolled proliferation of cells within the mammary gland which give rise to a breast tumor or neoplasm – a relentlessly growing mass of abnormal cells. As long as these neoplastic cells remain clustered together and do not penetrate the basal lamina, the tumor is said to be benign. At time of diagnosis, 61% of breast cancer cases are diagnosed while the cancer is still confined to the primary site (3). This stage of the disease represents good prognosis with a 5 year relative survival rate of 94.3% (3). However, if the cells gain the ability to invade the surrounding tissue, the tumor is then termed to be malignant. At first diagnosis, regional metastasis (i.e. regional lymph nodes or directly beyond the primary site) accounts for 31% of cancers while distant metastasis is uncommon, occurring in approximately 6% of newly diagnosed cases (3). Once a tumor becomes invasive, patient prognosis is much poorer, with 5 year relative survival rates of 79.9% and 51.1% for regional and distant metastases, respectively (3). However, about 30% of women initially diagnosed with earlier stages of breast cancer eventually develop recurrent advanced or metastatic disease. The median overall survival of metastatic breast cancer patients is generally 1-2 years (4), although prolonged survival has been observed in a small number of patients (5).

#### A. Risk Factors in the Development of Breast Cancer

As the number of breast cancer cases steadily increase, people have begun to express concern over the risk factors that may be involved in the development of breast cancer. While several risk factors for the disease are known, whether or not an individual

with one or more of these risk factors will actually develop breast cancer is uncertain. Some women who have one or more breast cancer risk factors may never develop the disease, while many women with breast cancer have no apparent risk factors. Nonetheless, breast cancer is thought to be the result of a combination of many factors, including heredity, environmental agents that influence the acquisition of somatic gene changes and several other systemic and local factors (6).

Hereditary breast cancer accounts for 5-10% of all breast cancers diagnosed (1). Women who have 2 or more relatives with breast or ovarian cancer, especially in a first-degree relative (mother, sister, or daughter) are thought to have an increased risk of developing breast cancer. Hereditary breast cancers tend to develop in younger women 30 to 40 years old (7) as compared to non-hereditary (sporadic) cancers which tend to develop after menopause. Mutations in specific genes that may result in breast cancer have been identified; the most characterized of these being the breast cancer associated gene 1 (BRCA1) and breast cancer associated gene 2 (BRCA2) genes. The first breast cancer susceptibility gene discovered was BRCA1, located on chromosome 17q(8) and later BRCA2, located on chromosome 13q(9), was identified. The BRCA1 and BRCA2 proteins are involved in double strand DNA repair (10), transcriptional regulation mediated by an interaction with RNA helicase and BRCA1 has been implicated as playing a role in cell cycle control (reviewed in (11)). It is interesting to note, however, that both BRCA genes are involved in cellular pathways that are important for all cells and not exclusive for breast cells. The reason why mutations of these genes lead specifically to breast cancer is not understood and is currently under investigation.

While there is no doubt that genetic variations play an important role in the development of breast cancer, the majority of breast tumors occur in women with no familial history. Therefore, the question remains as to what other risk factors may be involved in the development of the disease. A women's age appears to be an important risk factor, in that 78% of breast cancers occur in women over the age of 50 (1). The amount of exposure a woman receives to female sex hormones, especially estrogen, is also an established risk factor. Thus, women who experience early menarche and late menopause have an increased risk as they are exposed to estrogen, one important female sex hormone, for a longer period of time (12). Adipose tissue acts as an estrogen store in postmenopausal women, in that the androgen precursor androstenedione found in peripheral adipocytes, is converted to estrogen within this tissue. While the effects of a high body mass index in relation to breast cancer is complex, it is well documented that adult weight gain is an established risk factor in the development of the disease in postmenopausal women (13, 14). An established correlation between the use of oral contraceptives and the risk of developing breast cancer has not been found, although some studies do suggest that prolonged birth control pill use may increase ones chance of developing the disease (15, 16); this effect appears to be dependent on the dose of estrogen and progestin within the pill (17). Hormone replacement therapy also appears to slightly increase ones risk of developing breast cancer in addition to having detrimental effects on the cardiovascular system in postmenopausal women (18). Nulliparity and late first pregnancy are associated with an increased risk, while an early first pregnancy and multiparity is associated with a reduced risk of breast cancer, probably due to the degree of differentiation of the breast tissue (19, 20).

Life style factors including diet and exercise also may be contributing factors in the development of breast cancer. Physical activity appears to be an important determining factor, as physically active pre-menopausal and post-menopausal women have a lower incidence rate of breast cancer than those who do not exercise (21-23). While studies suggest that alcohol consumption and dietary fat intake slightly increase ones risk for breast cancer development (24, 25), the results are still controversial (26, 27).

**B. Treatment of Breast Cancer**

Breast cancer is viewed as a systemic disease and the majority of treatments involve a whole body approach. Therefore, optimal treatment of breast cancer often requires several different and combined treatments, including surgery, radiation therapy, chemotherapy, and hormonal therapy.

Surgery procedures to attempt to remove the tumor mass are the first line in managing the disease. As the surgeon removes the tumor mass, they also remove lymph nodes under the arm to determine whether the cancer has spread elsewhere in the body. Indeed, breast cancers often initially spread to the axillary lymph nodes that collect excess lymph fluid from that area of the breast. The presence or absence of cancer cells in these lymph nodes is an essential factor in defining optimal treatment strategies following surgery. Women who have cancer cells present in the axillary lymph nodes are at a higher risk for recurrence and thus, are treated more aggressively following surgery than women who have no cancer cells detected in the axillary lymph nodes. Following surgery, adjuvant therapy, systemic treatment administered post-surgery, is frequently given to patients to remove any remains of the tumor mass that may be present. The type

of adjuvant therapy that is used is dependent upon the type, grade and stage of the cancer as well as the woman's age, general health, menopausal status, hormone receptor levels in the tumor tissue as well as individual choices. Adjuvant therapies, which include chemotherapy, immunotherapy (trastuzumab), radiation and hormone therapy, are used as part of the treatment of breast cancer because they decrease the risk of local cancer recurrence and improve survival. For the purposes of this thesis, I will focus on hormone therapy.

i. **Hormone Therapy in the Treatment of Breast Cancer**

Estrogen is a steroid hormone whose primary function is to stimulate the growth of female reproductive tissues, including the ovaries and breasts (28). Estrogen maintains the uterine tubes, vagina, female external genitalia and breasts and plays an important role in pregnancy. It is involved in bone growth as well as in the eventual cessation of bone growth by closure of the epiphyseal plates. In addition, estrogen has been shown to protect against osteoporosis, atherosclerosis and to have a neuroprotective effect in latter life (28). Pathological processes of hormone-dependent diseases, such as breast, endometrial and ovarian cancers are also influenced by estrogens. These biological actions of estrogen are thought to be mainly mediated by estrogen binding to the estrogen receptor (ER).

Hormone therapy aims to either remove hormones from the body or to block their action. As estrogen stimulates breast growth, inhibiting its activity within the breast slows the growth of breast tumors. The decision as to whether or not hormone therapy may be effective in the treatment of breast cancer depends on the ER status of the tumor. At the time of clinical detection, approximately 30% of primary breast cancers contain

ER levels less than 3 femtomoles (fmol)/milligram (mg) protein and are thus considered ER<sup>-</sup> (29, 30). These tumors are deemed to be hormone independent in that they will not respond to hormone treatment (30). This represents an aggressive stage of the disease and thus, poor prognosis. However, the remaining 70% of breast cancers are deemed to be ER<sup>+</sup> (contain ER levels equal to or above 3 fmol/mg protein) and hormone dependent, in that they are likely to respond to hormone treatment (30, 31). It has been well established that breast cancers that are ER and/or progesterone receptor (PR), a downstream marker of estrogen action, positive have a more favourable prognosis than ER and/or PR negative tumors (30). Currently, the two most common classes of drugs used for the hormonal treatment of breast cancer are the aromatase inhibitors (AIs) and selective estrogen receptor modulators (SERMs).

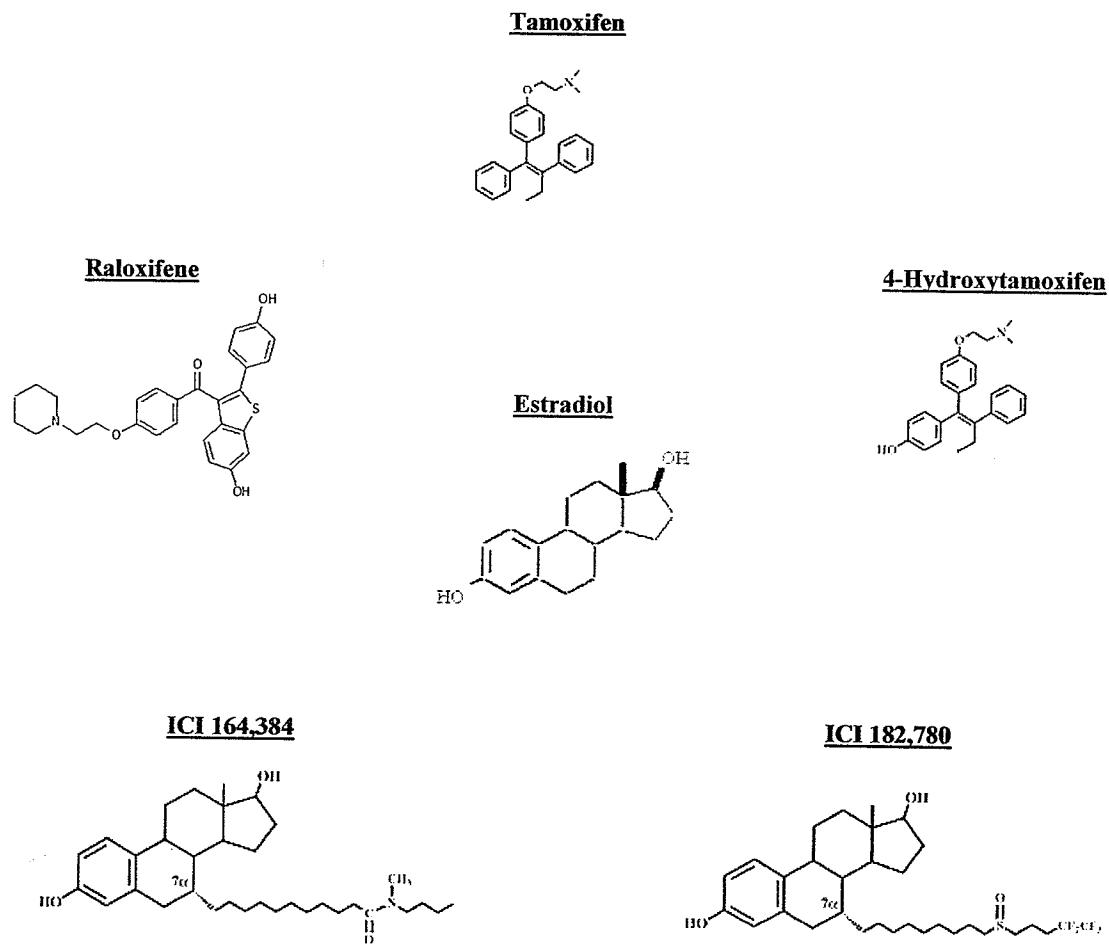
a. Aromatase Inhibitors

The aromatase inhibitors are used for the treatment of advanced hormone-dependent breast cancer in post-menopausal women and they function by inhibiting the formation of estrogen in the body. Aromatase is a cytochrome P450 enzyme complex that catalyzes the rate-limiting step in the conversion of androstenedione and testosterone to estrone and estradiol (32). Thus, AIs reduce the level of estrogen in the body that is necessary for the growth of ER expressing breast tumors. While the first AIs (aminoglutethimide) had several side effects which resulted in patients stopping treatment, newer versions, including Anastrazole and Letrozole, are much more specific and have far fewer side effects. While endocrine therapies involving AIs are successfully used to treat breast cancer, for the purposes of this thesis I will focus on the selective estrogen receptor modulators.

b. Selective Estrogen Receptor Modulators

Selective estrogen receptor modulators, or SERMs, function by binding directly to the ER and thereby, effectively block ER function within cancer cells, preventing the growth stimulatory effect of estrogen. Thus, like the AIs, the efficiency of the SERMs in treatment of breast cancer depends on the expression of ER in breast cancer cells. Tamoxifen (Nolvadex) (Figure 2) is presently the most popular choice of hormonal therapy for ER<sup>+</sup> patients. Tamoxifen has been shown to be an effective treatment for both early and advanced breast cancer (33, 34) and may prevent invasive breast cancer (35). Studies from the Early Breast Cancer Trialists' Collaborative Group have shown that the use of tamoxifen as an adjuvant therapy reduces the recurrence of the disease by 30% over a 5 year period and appears to prevent the development of contralateral breast cancers (31). It is an effective treatment for both pre- and post-menopausal women and is considered to be generally safe and well-tolerated (35). In addition, benefits of using tamoxifen in women who do not presently have clinically detectable breast cancer but are at a high risk of developing the disease have been suggested. In a report by the National Surgical Adjuvant Breast and Bowel Project, tamoxifen reduced the risk of developing non-invasive breast cancer by 50% and reduced the risk of developing invasive breast cancer by 49% in women at high risk for developing the disease (35).

While the use of tamoxifen in the treatment of breast cancer has proven to be beneficial, problems do exist. First: tamoxifen targets the ER within a breast cancer cell, and thus, tumors which are ER<sup>-</sup> do not respond. Second: not all tumors which are ER<sup>+</sup> initially respond to tamoxifen. Of all breast tumors, 70% are ER<sup>+</sup> (31) and of these, only 40% will initially respond to tamoxifen. This phenomenon is referred to as *de novo*



**Figure 2:** Schematic drawing of estrogen, non-steroidal antiestrogens and steroidal antiestrogens. Non-steroidal antiestrogens, also known as selective estrogen receptor modulators, include tamoxifen, 4-hydroxytamoxifen and raloxifene. Steroidal antiestrogens, named as such as they have a steroidal backbone similar to estradiol but inhibit ER activity, include ICI 164,384 and ICI 182,780. Adapted from (36, 37).

resistance in that a breast tumor which has never been exposed to tamoxifen is resistant to its effects. Of the ER<sup>+</sup> breast tumors which initially respond to tamoxifen, the majority will eventually acquire hormone resistance and fail to respond to tamoxifen as treatment progresses (acquired resistance). Third: although tamoxifen opposes estrogen activity in the breast, it has estrogenic properties in the uterus (38) and concerns have arisen over the

observed increased incidence of endometrial cancer in patients who receive tamoxifen therapy (31, 35).

As a result of this concern with respect to tamoxifen use, the search for more effective therapies in the prevention and treatment of breast cancer is of utmost importance. However, it is important to note that tamoxifen, like estrogen, has beneficial effects on the bone (39), cardiovascular system (40) and brain (41), especially in post-menopausal women. Thus, SERMs which contain antiestrogenic properties in the breast and uterus (i.e. inhibits breast and endometrial cancers) but estrogen agonistic activities in other tissues are in the process of being developed and evaluated. Raloxifene (LY156758) (Figure 2), a second generation SERM, was originally approved for the treatment (42) and prevention (43) of post-menopausal osteoporosis due to its estrogen agonistic effects in bone. However, it may also be used in the treatment and prevention of breast cancer due to its estrogen antagonistic actions in this tissue (43). Like tamoxifen, raloxifene reduces a woman's risk of developing breast cancer (44) and has been shown to be generally safe and well tolerated (44). However, unlike tamoxifen, raloxifene use does not appear to increase the risk for developing endometrial cancer (43, 44), due to its antiestrogenic properties in this tissue. The comparative safety and efficacy of raloxifene and tamoxifen in women at high risk of developing breast cancer was the subject of the Study of Tamoxifen And Raloxifene (STAR). Conducted by the National Surgical Adjuvant Breast and Bowel Project and funded primarily by the National Cancer Institute, STAR is one of the largest breast cancer prevention studies, with a total of 19,737 postmenopausal women enrolled who have an increased risk of breast cancer.

Tamoxifen and raloxifene are considered “partial” non-steroidal antiestrogens as they may act as either an ER agonist or ER antagonist. However, other “pure” antiestrogens have also been developed that do not exhibit any known ER agonist behaviour. These pure steroidal antiestrogens, such as Imperial Chemical Industries (ICI) 164,384 and ICI 182,780 (Figure 2), have proven to be effective in the treatment of breast cancer after a tumor has become resistant to tamoxifen.

## II. Nuclear Receptors

The nuclear receptor family modulates a wide range of physiological responses that play important roles in growth, development, metabolism and reproduction. As a result, they are expressed in a broad range of tissues that reflect their biological function. The nuclear receptors are ligand-activated proteins that regulate transcription of selected genes, binding to a particular steroid hormone for activation (45). Despite their diverse range of biological functions, the receptors have a surprisingly similar structure that reflects their ability to act as ligand dependent transcription factors (45). Responding to a diverse range of ligands, the family encompasses not only ER, androgen receptor (AR), glucocorticoid receptor (GR), vitamin D receptor (VDR) and the retinoic acid receptor (RAR), but also a large number of proteins whose function and/or ligands are unknown and are thus termed orphan receptors. Except for GR, they are expressed predominantly within the nucleus of the cell (46). For the purposes of this thesis I will focus on the ER.

### A. Estrogen Receptor

The ER family consists of the classical ER, referred to as ER $\alpha$ , and the more recently identified ER $\beta$ . ER $\alpha$  and ER $\beta$  are products of different genes and exhibit tissue and cell-type specific expression. Both receptors, however, may also be co-expressed in

a number of tissues and can form functional heterodimers. The characterization of mice lacking ER $\alpha$ , ER $\beta$ , or both suggests that both receptor subtypes have overlapping but also unique roles in estrogen-dependent action.

*i. Tissue and Cellular Expression of ER $\alpha$  and ER $\beta$*

Tissue localization studies of the ER have revealed distinct expression patterns for ER $\alpha$  and ER $\beta$ , suggesting that the two receptors do not have completely redundant roles in estrogen signaling. In the human, ER $\alpha$  is expressed predominantly in the major target organs and glands necessary for female reproduction, including the endometrium of the uterus, ovary, mammary gland, pituitary and hypothalamus but is also expressed in the liver, kidney, lung, heart and Leydig cells of the testis (47, 48). ER $\beta$  mRNA, on the other hand, is expressed primarily in the ovary and isolated granulosa cells, mammary gland, seminiferous tubules of the testis and the epithelium of secretory alveoli in the lung (47). Relatively equal levels of mRNA for the two receptors is found in the thyroid, epididymis, adrenals, bone and various parts of the central nervous system (47, 49), although regional expression differences of the two receptors have been identified in the brain (50). ER $\beta$  mRNA expression can also be detected in the mucosal lining of the gastrointestinal tract (i.e. stomach, duodenum, colon and rectum), epithelial lining of the bladder, cortex of the kidney, thymus, spleen, pituitary gland, leukocytes, bone marrow, uterus, epithelium of the prostate and umbilical vein endothelial cells (47). While both ER $\alpha$  and ER $\beta$  may be detected in the same tissue, they may be expressed in different cell types. ER $\beta$  protein expression is abundant in healthy human mammary glands, but unlike ER $\alpha$ , ER $\beta$  expression is not restricted to the epithelium; it is also detected in the myoepithelial and luminal epithelial cells as well as in the nuclei of stromal fibroblasts,

macrophages, lymphocyte infiltrates and in the endothelial cells of blood vessels (51, 52).

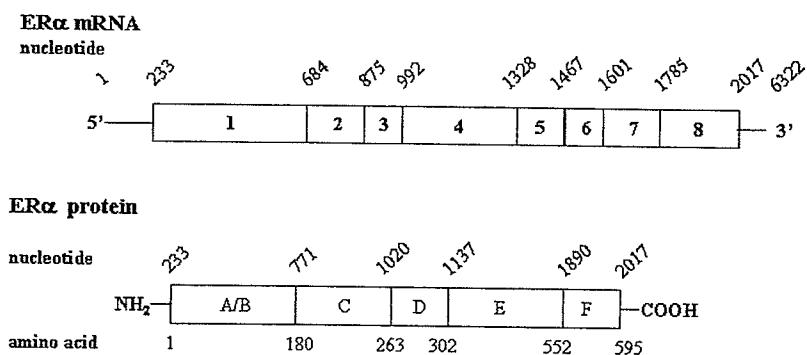
In the ovary, ER $\alpha$  mRNA and protein is expressed primarily in the thecal and interstitial regions, whereas ER $\beta$  is primarily expressed in the granulosa cells (47, 53). Nonetheless, ER $\alpha$  and ER $\beta$  proteins have been simultaneously detected in many cell types including the breast (54), and these as well as other cell types that co-express both ER subtypes are targets for potential interplay between the two receptors.

Further evidence of distinct biological functions for the ERs is revealed by contrasting phenotypes observed in ER $\alpha$  ( $\alpha$ ERKO) and ER $\beta$  ( $\beta$ ERKO) knockout mice. Female mice carrying a disrupted ER $\alpha$  gene are unresponsive to estrogen induced proliferation of the uterus, cervix, vagina and mammary gland (55), suggesting that ER $\alpha$  mediates the major proliferative effects of estrogen. Male  $\alpha$ ERKO mice display testicular degeneration and sexual dysfunction (55). These phenotypes combined with severe deficits in sexual behaviour result in complete infertility in both sexes of the  $\alpha$ ERKO mouse (55). The  $\beta$ ERKO mice, on the other hand, exhibit less profound phenotypes than the  $\alpha$ ERKO. Female  $\beta$ ERKO mice have full estrogen responses in the reproductive tract and the mammary gland exhibits normal structure and lactation (55). However,  $\beta$ ERKO females have inefficient ovarian function and reduced fertility (56).  $\beta$ ERKO females are able to carry pregnancies to term and nurse their offspring, in spite of infrequent pregnancies and small litter sizes (56). Male  $\beta$ ERKO mice are fertile and show no obvious phenotypes (56). Mice in which both ERs have been knocked out ( $\alpha\beta$ ERKO) exhibit phenotypes that most heavily resemble those of the  $\alpha$ ERKO (57), indicating the crucial contribution of ER $\alpha$  in mediating reproductive biological events. However, an unique phenotype is observed in the ovary of  $\alpha\beta$ ERKO mice, where there is

a loss of granulosa and germ cells and the appearance of sertoli-like cells that are normally found in the male testis (58). This ovarian phenotype suggests that maintenance of the proper differentiation state of the ovary requires both ER $\alpha$  and ER $\beta$ .

### *ii. ER $\alpha$ mRNA*

The human ER $\alpha$  gene is located on chromosome 6q25 (59) and spans over 140 kilobases (kb) of DNA (60). It consists of 8 exons and 7 introns which encode a protein of approximately 66 kilodaltons (kDa) in size (Figure 3) (60, 61). The 7 introns of the ER $\alpha$  gene are extremely large, ranging in size from 3.5 to greater than 32 kb (60). The messenger ribonucleic acid (mRNA) that the gene encodes is approximately 6.3 kb in size, with a 5' untranslated region of 232 nucleotides and a long 3'-untranslated region of 4.3 kb (Figure 3) (62). The open reading frame is 1785 nucleotides, corresponding to a polypeptide of 595 amino acids (61, 62).



**Figure 3:** ER $\alpha$  mRNA structure and corresponding protein functional domains. Nucleotide and amino acid numbering is according to (62). The amino-terminal A/B domain contains the AF-1, the centrally located C domain is the site of DNA-binding, D represent the hinge domain and E/F contains the ligand binding domain and the second activator domain, AF-2.

Human ER $\alpha$  mRNA transcripts are generated by a complex process that involves at least seven different promoters, resulting in ER $\alpha$  variants that differ in their 5'-untranslated region (reviewed in (63)). These transcripts all encode for the full-length 66 kDa ER $\alpha$  protein. While the question still remains as to the purpose and function of multiple promoters in the ER $\alpha$  gene, it is reasonable to believe that multiple transcripts may allow for tissue-specific regulation of gene promoters. Grandien et al. (64) have shown that two promoters (termed A and C) are used in MCF-7 cells while only one promoter (A) is used in the ZR-75-1 human breast cancer cell line while bone cells utilize the C promoter only. More recently, Fluoriot et al. (65) have described an ER $\alpha$  isoform in MCF-7 breast cancer cells in which exon 1 has been spliced from the transcript and a shorter 46 kDa ER $\alpha$  is generated from an internal start codon. This isoform, termed hER $\alpha$ 46, has been shown to heterodimerize with full-length ER $\alpha$  and thereby inhibits full-length ER $\alpha$  activity in a cell type dependent manner (65).

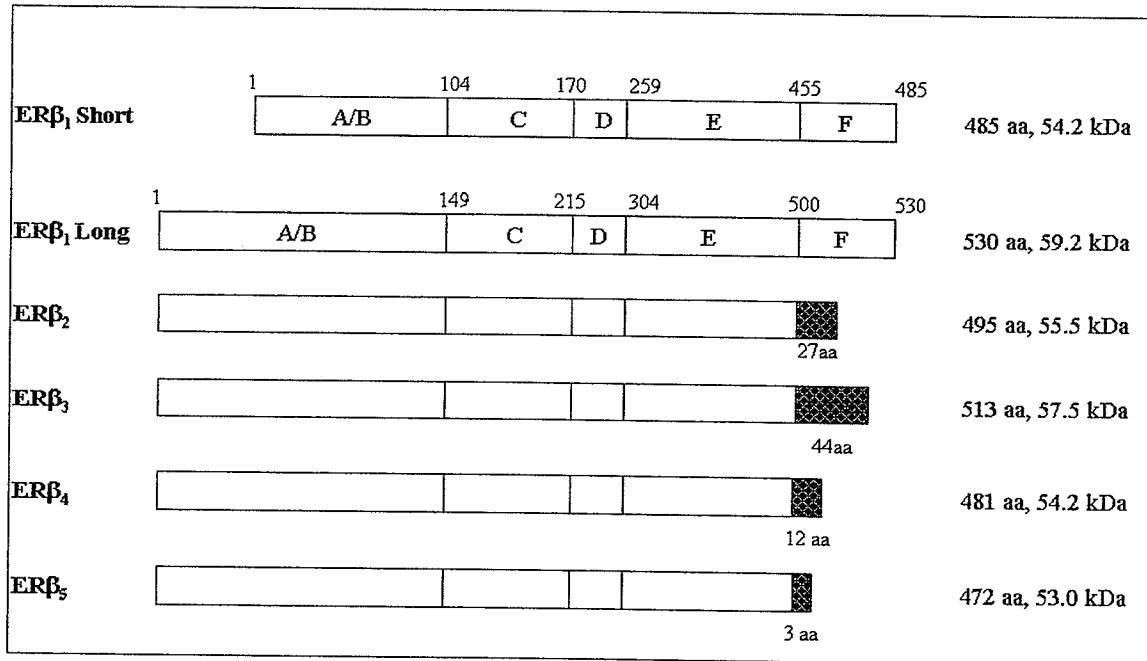
In addition to the use of multiple promoters, multiple ER-like transcripts have been identified which encode proteins that differ in size to the wild-type ER (reviewed in (66)). These ER $\alpha$  variants and mutants consist of single or multiple exon deletions; variable sized deletions ranging from a single nucleotide to several hundreds of continuous nucleotides that do not span entire exons; 5' (which have been characterized in rat only) and 3' truncations; insertions ranging from one to two nucleotides to 69 nucleotides or more or complete exon duplications and; point mutations including silent polymorphisms. The function of variant ER proteins, either physiological or pathological, remains unclear.

*iii. ER $\beta$  mRNA and Protein*

ER $\beta$  was initially isolated from a rat prostate cDNA library (67) and the full length human complementary DNA (cDNA) was identified in 1998 by Ogawa et. al. (68). The chromosomal localization of the human ER $\beta$  gene is 14q22-24 (47) which is different from that of ER $\alpha$ , indicating that ER $\beta$  has a distinct identity from ER $\alpha$ . The ER $\beta$  gene exon/intron structure is identical to that of ER $\alpha$ , consisting of 8 exons and 7 introns. However, ER $\beta$  differs from the ER $\alpha$  gene in its length, 40kb (47) compared to 140 kb (60). The 7 introns of the human ER $\beta$  gene range in size from 1.6 kb to greater than 8 kb (47), significantly smaller than those found in ER $\alpha$ . The open reading frame of the ER $\beta$  mRNA is 1592 bp in size encoding a 530 amino acid protein with a calculated molecular mass of 59.2 kDa (68).

The first identification of a human ER $\beta$  was in 1996 by Mosselman et al. who identified a cDNA encoding a protein of 477 amino acids with high sequence homology to ER $\alpha$  (49). Further cloning of ER $\beta$  from human ovarian and prostatic cDNA libraries by Enmark et al. (47) obtained a sequence almost identical to that previously identified except for the presence of extra 5' in-frame sequence which encoded 8 additional N-terminal amino acids (ER $\beta_1$ -short) (Figure 4). In 1998, Ogawa et al. (68) cloned a cDNA containing an additional 5' sequence which has extended the N-terminus of ER $\beta$  resulting in ER $\beta_1$ -long (Figure 4); it is this form that is currently regarded as the full-length wild-type ER $\beta_1$ . Variant forms of ER $\beta_1$  resulting from alternative splicing have been identified in human breast tumors and other tissues. These variants are exon-deleted ER $\beta_1$  mRNAs that encode truncated proteins and use 3' alternative exons (Figure 4).

Screening of a human testis cDNA library resulted in the identification of ER $\beta_2$  (also called ER $\beta_{cx}$ ) and ER $\beta_3$  which are identical to the ER $\beta_1$ -long protein except that they differ in their C-terminal extremities (Figure 4) (69, 70), resulting from the use of alternative exon 8 sequences. Human ER $\beta_2$  contains 27 unique amino acid residues which replace the amino acids of exon 8 and encodes a 495 amino acid protein with a calculated molecular mass of 55.5kDa (69, 70). This is in contrast to the rat ER $\beta_2$ , in which 54 nucleotides (18 amino acids) have been inserted into the ligand binding domain (71). To date, there is no evidence to suggest that a human homolog of the rodent inserted ER $\beta_2$  variant exists (72). ER $\beta_3$  contains 44 unique amino acid residues which replace exon 8 and therefore, is slightly larger than ER $\beta_2$ , containing 513 amino acids and a molecular mass of 57.5kDa (69). Moore et al. (69) also isolated partial cDNA sequences encoding ER $\beta_4$  and ER $\beta_5$  from testis using PCR from a limited region of the gene. The N-terminal sequence of the encoded proteins was not determined until just recently (Figure 4) (73). These variants, like ER $\beta_2$  and ER $\beta_3$ , share exons 1 to 7 with ER $\beta_1$  but do not contain exon 8 sequences (69, 73). ER $\beta$  variants which have exon 5 and/or exon 6 deletions (ER $\beta$  Δ5; ER $\beta$  Δ6; ER $\beta$  Δ5/6) have been identified in human breast cancers and in various cell lines (72, 74). As the exon 5 or 6 deleted splice variants result in a codon frameshift, they encode C-terminally truncated proteins while deletion of exons 5 and 6 (ER $\beta$  Δ5/6) results in an inframe deletion of 91 amino acids. As these variants were obtained by restricted RT-PCR of a region, the N-terminal regions have not been characterized to date.



**Figure 4: Human ER $\beta$  protein isoforms.** Amino acid numbering for ER $\beta_1$  functional domains is according to (47). ER $\beta_2$  (Genbank AF051428), ER $\beta_3$  (Genbank AF060555), and ER $\beta_5$  (Genbank AF061055) are truncated at their C-terminal ends that contain different amino acids (cross hatched bars). For each receptor, the length (aa) and the calculated molecular mass (kDa) are indicated.

#### iv. ER $\alpha$ and ER $\beta$ Structural and Functional Domains

As members of the nuclear receptor super-family, ER $\alpha$  and ER $\beta$  share the same structural architecture. The ER may be divided into three main independent but interacting functional domains: i) an amino-terminal activation domain, AF-1, or A/B domain; ii) a DNA-binding domain (DBD) or C domain; iii) a hinge region or D domain; and iv) a carboxy-terminal ligand-binding domain (LBD) or domain E, which contains a second activation function, AF-2 (Figure 5).

The amino terminal region of the ER is termed the A/B domain. This region has the lowest degree of similarity amongst members of the nuclear receptor family and within the ER family itself; ER $\beta$  has only a 30% homology to ER $\alpha$  in this region (68)

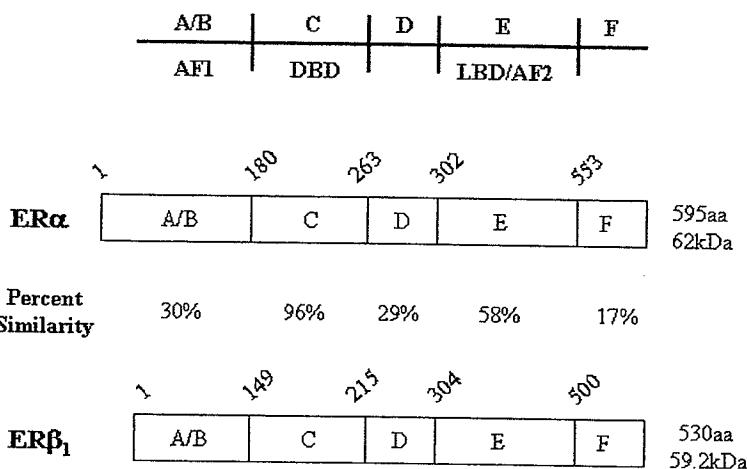
(Figure 5). The A/B domain encodes an activation function (AF-1) that contributes to transcriptional activation in a ligand-independent manner upon phosphorylation in response to growth factors (75, 76). AF-1 may also function in a ligand-dependent manner through its synergism with the AF-2 region of ER $\alpha$  in certain cell types and this is thought to occur through the interaction of the corresponding regions with co-activators (77, 78). The A/B domain contains several phosphorylation sites that are important for efficient transcriptional activity and is the binding site for several co-activators (79-81). Deletion of the amino-terminus of ER $\beta$  has been shown to enhance ER $\beta$  transcriptional activity in HeLa and HepG2 cells, suggesting that this region may have an intrinsic repressor function on ER $\beta$  activity (82, 83). Functional analysis of the AF-1 region of the ER suggest that the transcriptional activity of the AF-1 domain of ER $\beta$  is minimal as compared with that of ER $\alpha$  (82, 84). Thus, when transcription from a gene requires both AF-1 and AF-2, the transcriptional activity of ER $\alpha$  will be greater than that of ER $\beta$  (84).

The centrally located DBD (C region) encodes a sequence that enables the ER to specifically recognize the estrogen responsive element (ERE) on an estrogen target gene (85). It is through this sequence that allows the ER to bind directly to the promoter region. The DBD of ER consists of two amphipathic helices oriented perpendicular to each other and crossing near their mid-points (86), forming a “scissor-like” structure which is stabilized by the interaction of cysteine residues with a zinc atom at the N-terminus of each helix (87). The crystal structure of the ER bound to DNA demonstrates that residues found in the first zinc finger interact with bases in the DNA, while residues in both zinc fingers make contacts with phosphates in the DNA backbone (87). In addition to DNA binding, this region also contains a dimerization interface that mediates

binding cooperatively between the two zinc fingers (87) and a nuclear localization signal (46). This region is highly homologous between ER $\alpha$  and ER $\beta$  and is the most conserved region in the steroid receptor super-family (45). ER $\alpha$  and ER $\beta$  share approximately 96% sequence similarity within this region (Figure 5) and thus, both receptors bind similar estrogen responsive elements (88).

C-terminal to the DBD is the D domain or hinge region that is often considered a linker peptide between the DBD and the LBD (Figure 5). While this region has not been well characterized, it has been suggested that its precise structure is not required for a functional ER (85). Nonetheless, this region is involved in the association with the molecular chaperone heat shock protein 90 (hsp90) (89) and is thought to contain a nuclear localization signal (46).

Adjacent to the hinge domain is the LBD or E/F domain. This multifunctional region is involved in binding of agonists (estrogen) and antagonists (90), receptor dimerization (90, 91), nuclear translocation, ER cofactor binding and transactivation of target gene expression. This domain displays a high degree of homology amongst members of the nuclear receptor superfamily; the overall amino acid identity is 53% between ER $\alpha$  and ER $\beta$  (68). As the homology of amino acid residues that surround the ligand binding cavity that are involved in contacts with the ligand is high between the two receptors, it is not surprising that ER $\alpha$  and ER $\beta$  bind to similar ligands with similar, but not identical, affinity (92, 93). The transactivation function (AF-2) located in the LBD is in most cases dependent on binding of ligand to the receptor for function (85). Unlike AF-1, AF-2 transcriptional activity between ER $\alpha$  and ER $\beta$  is very similar (84).



**Figure 5: Comparison of human ER $\alpha$  and ER $\beta_1$  protein structure.** For each receptor, the length (aa) and the calculated mass (kDa) is given. Amino acid numbering is according to (68). The percent (%) similarity between ER $\alpha$  and ER $\beta_1$  functional domains is listed below the ER $\beta_1$  protein structure. AF1 = activation function 1; DBD = DNA binding domain; LBD/AF2 = ligand binding domain/activation function 2.

The F domains of ER $\alpha$  and ER $\beta$  are quite different in both length and sequence (Figure 5). Functionally, the F domain of ER $\alpha$  contains an intrinsic inhibitor of receptor dimerization (94) and may decrease the affinity of the receptor for estrogen (95). Evidence also suggests that the F-region has different structural orientations depending on the type of ligand bound to the receptor that mediates ER transcriptional activity in response to the ligand (96). Conflicting results with respect to the function of the F domain on E<sub>2</sub> bound ER have been reported. Skafar et al. (95) have shown that a point mutation within the F domain that alters its predicated structure greatly increases the transcriptional activity of ER $\alpha$  in HeLa cells. In contrast, Montano et al. (97) have demonstrated that complete deletion of the F domain results in an inhibition of estrogen induced ER $\alpha$  transcriptional activity in HeLa cells. This effect may be cell dependent, as

deletion of the F domain did not affect ER $\alpha$  transcriptional activity in other cell types (97). It is quite clear, however, that the F domain is important in reducing the agonistic and antagonistic effects of tamoxifen bound ER $\alpha$  (95, 97, 98).

v. *Cellular Localization and Protein Associations of Unbound ER*

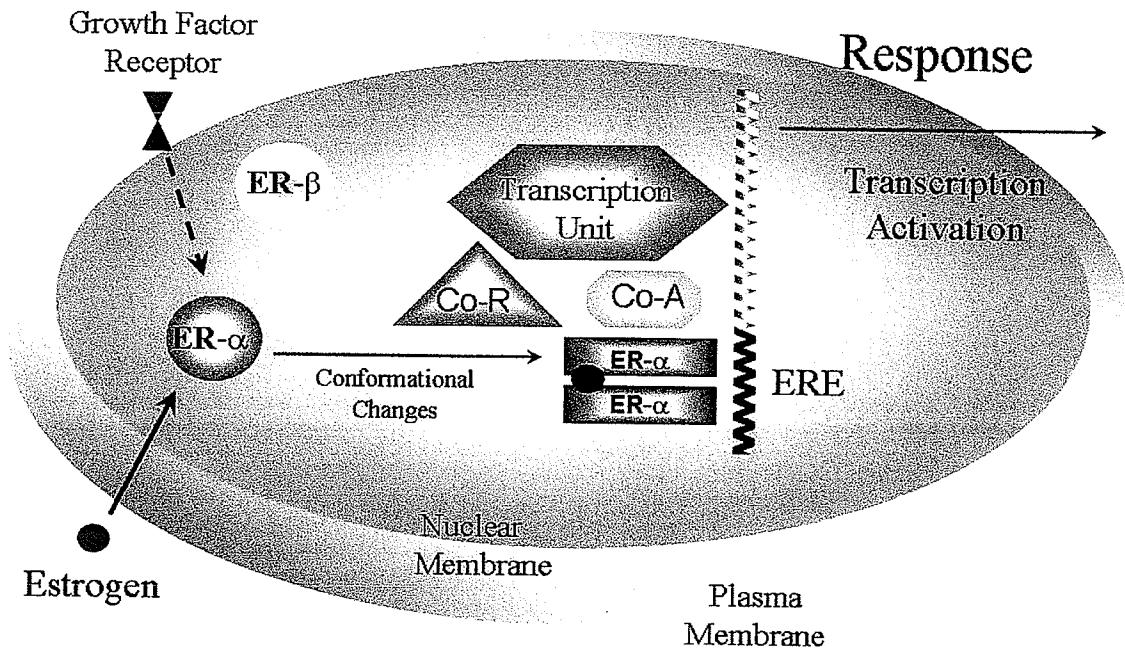
Immunocytochemical and hormone binding assays suggest that even in the absence of ligand, ER is predominantly located within the nucleus of the cell (99-101), although cytosolic (102) and plasma membrane associated receptors have also been described (discussed in more detail on page 49) (103, 104). Direct visualization of a green fluorescent protein tagged ER $\alpha$  in living cells demonstrates that in the absence of ligand, ER $\alpha$  is diffusely distributed throughout the nucleoplasm being excluded from the nucleoli (101, 105). Upon the addition of ligand, however, a redistribution of ER $\alpha$  occurs such that it becomes localized to discrete regions within the nucleus (101, 105). The distribution pattern of unliganded and liganded ER $\beta$  is very similar to that of ER $\alpha$  and studies suggest that when the two receptors are co-expressed within the same cell, they co-localize to discrete nuclear regions (106). Thus, it appears as though the unliganded form of ER is not tightly bound to nuclear matrix components and ligand binding results in a tightly bound form of ER that ultimately initiates target gene transcription.

In the absence of hormone, ER $\alpha$  exists as a monomer within a multiprotein complex consisting of heat-shock proteins (hsp 90 and hsp70), immunophilins and other accessory proteins (107). ER $\alpha$  has been shown to directly interact with the molecular chaperone protein hsp90 (108) through several regions in its ligand binding and DNA-binding domains (89). Hsp90 is the most abundant heat shock protein in eukaryotic cells.

It is localized predominantly to the cytoplasm, although it also may be found in the nucleus bound to steroid receptors (107). Hsp70, another member of the heat-shock family of proteins, is widely distributed throughout the cytoplasm and nucleus of unstressed cells (109). Similar to hsp90, hsp70 has also been detected in unliganded ER $\alpha$  complexes (110), although some researchers have not been able to detect an association between hsp70 and ER $\alpha$  (108). As hsp70 is an essential component in hsp90 heterocomplex assembly (107), it is likely a part of the nonactivated ER complex but does not interact directly with the receptor (107). The association of hsp70 with ER $\alpha$  containing complexes is reduced upon cellular treatment with estrogen or tamoxifen but remains unchanged in the presence of the pure antiestrogen ICI 182,780 (110). While the precise role for accessory proteins bound to unactivated ER $\alpha$  is unclear, it has been suggested that they may be involved in the functional repression of ER in the absence of ligand (111), in preventing ER $\alpha$  degradation (112, 113) and in increasing the efficiency of ER $\alpha$  transcriptional response to hormone (110, 113). The presence of hsp90 and hsp70 results in maximal transcriptional response to ligand bound ER $\alpha$  (112, 113) and hsp70 has been shown to increase the interaction of activated ER $\alpha$  with its cognate DNA binding site (110), although these proteins are not absolutely required for ER $\alpha$  transcriptional activation (114). While the direct interaction between ER $\beta$  and heat shock proteins has not yet been described, inhibition of hsp90 activity in cells stably expressing ER $\beta$  decreases ER $\beta$  transcriptional activity and expression level (113), suggesting that ER $\beta$  is likely part of a multiprotein complex involving hsp90.

### **III. ER Mechanism of Action**

Transcriptional activation of the ER usually occurs when ligand (i.e. estradiol) enters the cell through passive diffusion, binding to the ER located within the nucleus of the cell (Figure 6). Upon ligand-binding, the ER undergoes a conformational change, dissociating it from the heat shock protein multicomplex (107, 112, 115). ER $\alpha$  and ER $\beta$  then form either homo- or heterodimers (although formation of heterodimers is preferential) that bind to estrogen-responsive elements (ERE) located in the promoter region of target genes (Figure 6) (82, 116-118). The DNA-bound receptors then recruit co-regulators (co-activators or co-repressors) to the promoter region of the target gene that are required for efficient transcriptional regulation. As their name implies, co-activators enhance while co-repressors inhibit ER transcriptional activity. In addition to co-regulators, ER, once bound to DNA, also associates with members of the general transcription apparatus either directly (119) or indirectly via co-activator protein interactions (Figure 6) (119-121). The convergence of these factors onto the receptor-DNA complex ultimately results in chromatin remodelling and, depending on the cell and promoter context, exerts either positive or negative effects on target gene transcription. This direct, genomic interaction between ER and specific sequences of DNA is referred to as the classical mechanism of ER action and is the most studied mechanism by which ER affects gene transcription. ERs can also affect gene transcription independent of ligand binding but still interacting with an ERE. Alternatively, some genes are affected by ER in an estrogenic pathway in which the ER does not necessarily bind to DNA but rather interacts with other DNA-bound transcription factors. More recently, non-genomic actions of ER have also been suggested.



**Figure 6: The classical mechanism of ER action.** Upon ligand binding, the ER undergoes a conformational change allowing the receptor to form dimers. Alternatively, the ER may also be activated by growth factor receptor pathways which also allow the ER to dimerize. The dimers then bind to EREs located in the promoter region of target genes. Once bound to DNA, the ER recruits co-activators or co-repressors, depending on the cell type and/or ligand to which it bound, and associates with the general transcriptional machinery. The convergence of these factors onto the DNA-ER complex exerts either positive or negative effects on target gene transcription. See text for more details. ER = estrogen receptor; ERE = estrogen responsive element; Co-R = co-repressors; Co-A = co-activators.

#### A. Classical Mode of ER Action

##### i. The Estrogen Response Element

Structural and functional analysis of estrogen regulated genes have revealed a common, palindromic estrogen responsive element (ERE), with the consensus sequence 5'-PuGGTCAnnnTGACCPu - 3', where n = any nucleotide and Pu = purine, that binds to

the ER with a stoichiometry of two molecules of ligand-bound ER per ERE (122). Multiple copies of the consensus sequence (or half palindromes) increase ER binding in a cooperative manner resulting in synergistic transcriptional activation of these estrogen responsive genes (123-125). The ERE consensus sequence has been shown to act in an orientation and distance-independent manner on heterologous promoters *in vitro* (122, 125), although the induction capacity of multiple EREs appear to decrease with increasing distance from the promoter (125). These highly estrogen responsive, perfectly palindromic sequences have been identified in genes encoding the *Xenopus* vitellogenin A1 and A2 genes (126) (Table 1). Most estrogen target genes do not contain a perfect palindrome in their promoter but rather have imperfect, non-palindromic ERE sequences (127). Examples of genes containing perfect and imperfect palindromes are shown in Table 1. Imperfect palindromes are less efficient in mediating transcriptional regulation by the receptor than perfect palindromes (88, 128). Experimental evidence suggests that the more nucleotide changes there are from the consensus within a half-site of the ERE palindrome, the lower the ER binding affinity for the ERE (123, 127). Alterations in nucleotide sequences in both palindromes further reduce ER binding and transcriptional activity (129). An optimal number of nucleotides (i.e. 3) separating the inverted repeat of an ERE is critical for high-affinity ER binding (123) and the DNA sequence immediately flanking the ERE is important in determining ER binding (124, 129). The presence of an AT-rich sequence flanking an ERE increases the binding affinity for ER which may be reflected by a decrease in the dissociation rate of ER from the ERE (124). Synergism between multiple copies of imperfect response elements occurs when they are in close proximity of one another or even when they are separated by hundreds of nucleotides. In

addition, ERE half-sites, which individually have a greatly reduced affinity, can act in synergy with other regulatory elements within the promoter region of a gene (e.g. Ap-1, Sp-1) (130-133). While the exact mechanism of transcriptional synergism between imperfect palindromic elements is still unknown, cooperative recruitment of co-activators, direct interaction between ER dimers, and allosteric modulations between the DNA-ER complexes have been suggested (134).

ERE Consensus Sequence: 5'- Pu G G T C A nnn T G A C C Pu -3'	
Gene	Sequence
<b>(A) Perfect Element</b>	
Vitellogenin A1 ( <i>Xenopus</i> )	5'-GGTCA nnn TGACC -3'
COX7A2L	5'-GGGTCA nnn TGACCC -3'
<b>(B) 1 Mismatch</b>	
Angiotensinogen	5'- AGGgCA nnn TGACCC -3'
Vascular Endothelial Growth Factor (VEGF)	5'- AGGcCA nnn TGACCC -3'
<b>(C) 2 Mismatches</b>	
pS2	5'- AGGTCA nnn TGgCCa -3'
Oxytocin	5'- cGGTgA nnn TGACCC -3'
Cathepsin D	5'- GGGcCg nnn TGACCC -3'
<b>(D) Combination of half-palindromic elements</b>	
Lactoferrin	5'-AGGTCA n AGGTCA

**Table 1:** Estrogen responsive genes and their respective estrogen responsive elements. The nucleotides in lower case represent changes from the consensus sequence. All sequences correspond to the human genome except for the vitellogenin A1, which is found in *Xenopus*. In the sequence, n = any nucleotide and Pu = purine. COX7A2L = cytochrome c oxidase subunit VIIa polypeptide 2 like. Adapted from (127, 135).

More recently, however, it has also been suggested that the ER binds to sites outside of proximal promoter regions. Using a ChIP-chip approach, in which chromatin immunoprecipitation is used in combination with microarrays, Carroll et al. (136) have

identified ER binding sites in regions far from the transcription start site from putative target genes on chromosomes 21 and 22. ER binding to these sites occurs in an estrogen-dependent manner and is accompanied by RNA PolII and coactivator binding. These authors further showed that these binding sites act as distal enhancers, forming physical interactions with the promoter region of target genes that effectively loop out intervening chromatin (136). This looping out allows for the enhancer to interact with the promoter to initiate gene transcription (136).

*ii. ER $\alpha$  and ER $\beta$*

The DNA binding and ligand binding domains of ER $\alpha$  and ER $\beta$  are highly conserved and thus, it is not surprising that ER $\alpha$  and ER $\beta$  bind to similar ligands and EREs (134, 137). The affinity of ER $\alpha$  and ER $\beta$  for the consensus ERE is higher than for variant sequences and affinities for many of the imperfect EREs are quite similar (134), although ER transcriptional activity at these promoters may vary (138). ER $\alpha$  homodimers have a higher affinity for consensus and imperfect EREs than ER $\beta$  homodimers (117, 134, 137, 139) and as a consequence, ER $\alpha$  is a more potent activator of transcription (128, 134, 138). However, under conditions in which the ligand-dependent activation function predominates, ER $\alpha$  and ER $\beta$  may exhibit similar activity (140). While the ER $\alpha$ /ER $\beta_1$  heterodimer has a DNA binding affinity similar to that of ER $\alpha$  homodimers (117), the heterodimers have less transcriptional activity than ER $\alpha$  homodimers (117) while ER $\beta$  homodimers have the least amount of activity. While the ER $\beta$  variants ER $\beta_2$ , ER $\beta_4$  and ER $\beta_5$  bind DNA, they do so with less efficiency than ER $\beta_1$  (73, 139). The transcriptional activity of the ER $\beta$  variants is still unclear. Poola et al. (73) have suggested that ER $\beta_4$  and ER $\beta_5$  have about a three times higher ligand-

independent activity on an ERE reporter plasmid than ER $\beta_1$  in Cos-7 cells. However, experiments from within our laboratory suggest that the variants do not have any transcriptional activity on their own (139), a direct result of their inability to bind ligand. ER $\beta$  and ER $\beta$  variants have been shown to function as inhibitors of ER $\alpha$  transcriptional activity on an ERE in cells in which both receptors are expressed with relative activities of ER $\beta_1$ >ER $\beta_2$ >ER $\beta_5$  (73, 82, 139, 141). The observation that ER $\beta$  knockout (BERKO) animals treated with estrogen do not display a change in the number of dividing cells (as maximal cellular division was already obtained) while estrogen induces a significant increase in proliferating uterine epithelial cells in wild-type littermates (142), further supports this hypothesis.

Once bound to DNA, the ER undergoes specific conformational changes that are dictated by the ligand and the ERE sequence to which it interacts (128). These sequence-induced alterations in ER structure influence not only the specific cofactor that will be recruited to the ER but also the magnitude of this interaction and the level of ER transactivation (128, 138, 143). Interestingly, ER $\alpha$  and ER $\beta$  appear to recruit coactivators to varying degrees in response to similar ligands and EREs despite the high degree of sequence homology in the LBD and DBDs (138). As described previously, the transcriptional activity of ER $\beta$  is highly dependent on its AF-2 domain as it lacks a functional AF-1 domain (84). Thus, the efficacy of coactivator binding to ER $\beta$  potentially determines the magnitude of the transcriptional response through the classical ERE-mediated pathway and as a result, the information within an ERE may have a significant impact on ER $\beta$  transcriptional activity. Although ER $\alpha$  possesses a strong constitutive AF-1 function, the magnitude of ER $\alpha$  transcriptional activity on ERE-

containing promoters often correlates with high efficacy of coactivator binding, although the correlation is less apparent than that for ER $\beta$  (138).

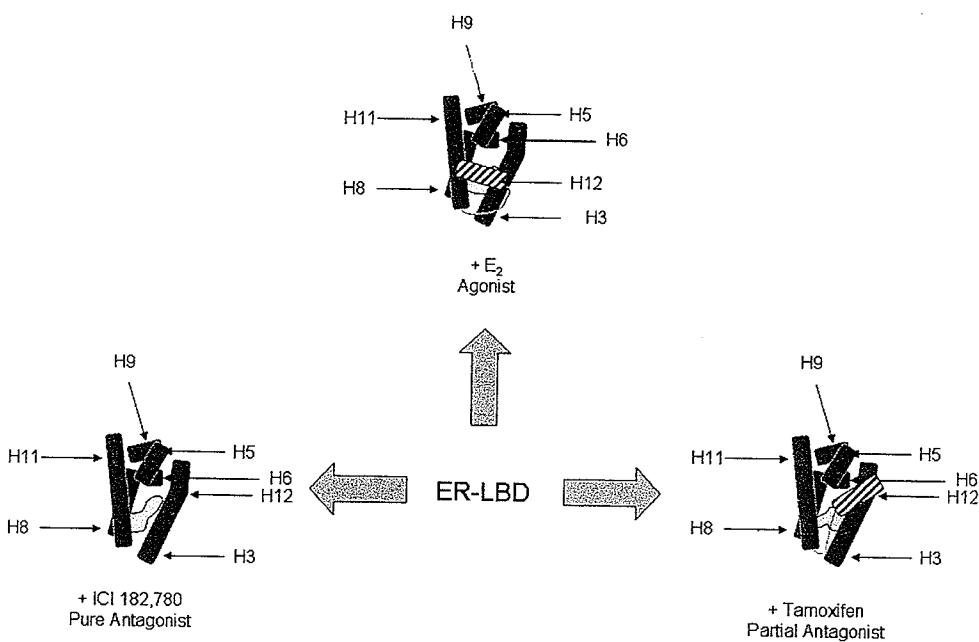
*iii. Influence of Ligand on ER Transcription*

a. Estrogen

The natural ligand for the ER is estrogen and 17 $\beta$ -estradiol (estradiol) is considered the major estrogen in the female. Estradiol binds to ER $\alpha$  and ER $\beta_1$  with equilibrium constants ( $K_d$ ) of approximately 0.06 nM and 0.24nM, respectively (92) and thus, ER $\alpha$  has a slightly higher affinity for estradiol than ER $\beta$ . The ER $\beta$  variants do not bind ligand due to their C-terminal truncations (73, 139). While ER $\alpha$  and ER $\beta_1$  bind similar ligands, they exhibit different binding affinities; ligands with higher affinity for ER $\alpha$  than for ER $\beta$ , and vice versa, have been described (92, 93). One such example is the natural phytoestrogenic compound genistein, that has a 30-fold higher affinity for ER $\beta$  than ER $\alpha$  (92) and as a result, has been suggested as being an ER $\beta$  selective agonist.

Structural analysis of the LBD of nuclear receptors suggest that the LBD contains common structural motifs that generate a conserved ligand binding pocket, and that agonists and antagonists bind to the same site but induce different conformational changes. The three-dimensional structure of the LBD of ER $\alpha$  and ER $\beta$  has been elucidated and the overall structures appear to be quite similar (90, 144). The LBD of the ER is folded into a three-layered structure comprised mainly of anti-parallel  $\alpha$ -helices (helices H3-H12) (90). Estrogen binds to the hydrophobic core of ER $\alpha$  through a combination of hydrogen bonds and the complementarity of the binding cavity to the non-polar hormone and is oriented diagonally across the cavity between H11, H3 and H6 (90). Helix 12 fits over the ligand-binding cavity in which estrogen is sitting (Figure 7),

packed against H3, H5/6 and H11, in essence forming a lid over the cavity, exposing the AF-2 domain of ER that interacts with coactivators (90). Antagonists of ER action, including the SERMs raloxifene and tamoxifen, bind to the same site as estrogen within the LBD (90, 144, 145). However, due to their bulky side chains, tamoxifen and raloxifene displace H12 and protrude from the binding cavity between H3 and H11 (Figure 7) (90, 145). The H12 repositioning in the presence of these SERMs partly



**Figure 7: Schematic representation of the conformational states of the ER LBD.** The conformations of ER in the presence of an agonist ( $E_2$ ), pure antagonist (ICI 182,780) and partial antagonist (tamoxifen) are viewed end-on. Selected helices of the LBD that form the ligand binding pocket are shown as black rods. Helix 12 is depicted as the stripped box. See text for more detail. Adapted from (146).

buries the highly conserved lysine 362 that is required for efficient recruitment of certain coactivators to the ER (90, 147). On the other hand, pure antiestrogens, such as ICI 182,780, sterically inhibits the alignment of H12 over the cavity through its long, bulky

side chain, preventing H12 from adopting either its agonist or SERM-induced orientation (Figure 7) (148). These studies thus provide the structural basis for the partial agonistic and antagonistic actions of antiestrogens and demonstrate how different ligands bound to ER potentially affect its transcriptional response.

b. Antiestrogens

In addition to estrogen, ER also binds antiestrogenic compounds that may act as agonists or antagonists depending on the cell and promoter context (149). As a result, antiestrogens are commonly defined according to their abilities to act as either partial agonists (e.g. tamoxifen) or complete antagonists (e.g. ICI 182,780). Both classes of antiestrogens compete with estradiol for ER binding and once bound, sterically hinder correct alignment of the interacting surfaces of the LBD through their bulky side chains (Figure 2 and Figure 7).

Non-steroidal Antiestrogens

Tamoxifen, a non-steroidal antiestrogen (Figure 2), is the most widely used clinical antiestrogen to date. Tamoxifen, or its active metabolite 4-trans-hydroxytamoxifen (4OH-tamoxifen), is a partial ER agonist in that it displays mixed agonist/antagonist properties depending upon the promoter and cell context (149). 4OH-tamoxifen competitively binds estrogen to the ER with a higher affinity for the receptor (92) and thereby, effectively inhibits the growth of ER<sup>+</sup> human breast cancer cells *in vitro* and *in vivo*.

As described previously, tamoxifen binding to ER $\alpha$  and ER $\beta$  results in a conformational change that is different from that of the estrogen bound receptor (137). Such changes alter receptor affinity and specificity for binding with ERE sequences.

Thus, while tamoxifen bound ER retains the ability to bind DNA (117, 118, 150), it does so with a significantly lower affinity than that of estrogen bound ER (i.e.  $K_d$  is significantly higher for tamoxifen-ER than E<sub>2</sub>-ER) (151). Chromatin immunoprecipitation (ChIP) experiments suggest that tamoxifen-ER $\alpha$  complexes bound to an ERE recruit nuclear receptor co-repressors rather than co-activators in MCF-7 human breast cancer cells (121), and this mechanism is thought to be involved in the suppression of transcription. In addition, tamoxifen inhibits co-activator binding to E<sub>2</sub>-ER-ERE complexes in a dose-dependent manner in the breast (137).

Tamoxifen inhibits the AF-2 but not the AF-1 activity of ER $\alpha$  and as a result, the partial agonistic effect of tamoxifen-coupled ER $\alpha$  from consensus ERE-driven promoters is thought to be mediated through the amino-terminal AF-1 region (152). Studies have demonstrated that in cell contexts where the AF-2 activity of the ER $\alpha$  may not be required (i.e. endometrial cells), tamoxifen functions as a partial agonist, whereas in cells requiring the AF-2 domain of ER $\alpha$  (i.e. breast cells), tamoxifen can effectively block ER action and function as an antiestrogen. Under conditions in which tamoxifen functions as an agonist of ER $\alpha$  activity, co-expression of ER $\alpha$  and ER $\beta$  results in an inhibition of the agonistic effects of tamoxifen on ER $\alpha$  activity, suggesting that ER $\beta$  expression inhibits ER $\alpha$  activity (82). As the function of ER $\beta$  appears to be completely dependent on its AF-2 region (84), tamoxifen acts as an antiestrogen independent of cell and ERE promoter context.

#### Steroidal Antiestrogens

Tamoxifen has been the endocrine treatment of choice for treating breast cancer for many years. However, its extended use is associated with the development of

tamoxifen resistant tumors (153) and adverse side effects have been attributed to its partial agonist properties (154). In general, tumors which become resistant to tamoxifen therapy respond to second line endocrine therapy (i.e. ICI 182,780) and retain expression of the ER, suggesting that tumor re-growth may involve a functional ER (155, 156). This led to the search for novel antiestrogens with enhanced antagonistic, and less agonistic, actions that are not cross-resistant with existing endocrine treatment and the development of a series of “pure” steroidal antiestrogens, including ICI 182,780 (fulvestrant; ‘Faslodex’) and ICI 164,384, resulted. These compounds are derivatives of estrogen but contain an alkylamide extension at the 7 $\alpha$  position (Figure 2). Treatment of patients with ER<sup>+</sup> breast tumors with ICI 182,780 has been associated with reductions in ER, PR and Ki67 (a marker of cellular proliferation) expression (157). In clinical trials involving post-menopausal women with hormone receptor positive (either ER or PR), locally advanced or metastatic carcinoma whose disease had progressed after receipt of previous endocrine therapy (primarily tamoxifen), ICI 182,780 was at least as effective as anastrazole (an aromatase inhibitor) for the efficacy endpoints of objective response and time to progression and thus, is currently recommended for use in these patients (158, 159).

ICI 182,780 has been shown to be a much more effective inhibitor of breast cell growth than tamoxifen (160, 161). ICI 182,780 and ICI 164,384 are also pharmacologically distinct from the non-steroidal antiestrogens, in that they act as complete antagonists, inhibiting ER AF-1 and AF-2 functions while still allowing ER dimerization and binding to an ERE (118, 148, 150, 162). As ICI 182,780 inhibits both activation functions of the ER, it is not associated with estrogen agonist activity (160).

Despite a relatively detailed knowledge of the pharmacology of this class of ER antagonists, relatively little is known about the molecular mechanisms that underlie their action. As described previously, ICI 182,780 binding to the ER induces a conformational change that is different from that with tamoxifen or estrogen (Figure 7) (148), preventing the ER from interacting with the co-activators necessary for transcriptional activation (137). Pure steroidal antiestrogens have also been shown to promote nuclear to cytoplasm shuttling of ER $\alpha$  (102). Nonetheless, the major mechanism of ICI 182,780 and ICI 164,384 action is to decrease the half-life of the ER protein such that the receptor is rapidly degraded and cellular levels decrease (163, 164). Thus, the potent antiestrogenic activity of the ICI compounds appears to be the direct result of their ability to inhibit receptor expression that is required for transcriptional activity.

*iv. Co-regulators*

In order for sufficient basal levels of transcription to occur, the ER, once bound to DNA, must interact with components of the transcription initiation complex (i.e. TATA-binding protein (TBP); transcription factor-II B (TFIIB)) either directly or indirectly in order to recruit RNA polymerase II to the promoter. Direct protein:protein interactions between the general transcription factors TBP and TFIIB with ER $\alpha$  have been described *in vitro* (119, 165, 166). Studies in cell-free systems suggest that the ER forms a stable complex with TBP and TFIIB on DNA and enhances the formation of the preinitiation complex to increase transcription (166). In addition, the TBP-associated factor, TAF<sub>II</sub>30, interacts with the ER LBD in a ligand-independent manner (167) and has been shown to stimulate transcription of an ERE bound ER (168).

In addition to the general transcription factors, the ER also recruits other co-regulators to the promoter region of target genes that are required for highly efficient transcriptional regulation (for a complete review, see references (120, 169)). Nuclear receptor co-regulators that interact with the ER and enhance its transcriptional activity are known as co-activators while those molecules that lower the transcriptional rate of ER are referred to as co-repressors.

a. Co-Activators

Nuclear receptor co-activators consist of a large group of proteins that interact directly with the receptor and enhance transcriptional activity by recruiting members of the general transcription apparatus to target gene promoters. Co-activators of ER are normally recruited in a ligand-dependent fashion, although evidence suggests that they may also be involved in the ligand-independent activation of the ER (see page 43) (170, 171). As described previously, upon estrogen binding to the ER, there is a shift in the position of several helices in the LBD (namely helix 12) such that a hydrophobic groove is exposed to which the co-activator binds (90, 172). Binding of co-activators to the ER involves an amphipathic helix containing the LxxLL sequence (in which L denotes leucine and x denotes any amino acid), termed the nuclear receptor (NR) box, that is conserved on the surface of most co-activators (173). Therefore, the NR box is able to make direct contacts with the LBD that is created upon agonist binding to the ER. Recent evidence also suggests that sequences flanking the NR box may be important in the interaction with ER, thereby determining preferential binding of a specific co-activator to the ER (145, 174). It is important to note, however, that although agonists promote co-activator binding to the LBD of the receptor, interactions between the A/B domain of

ER $\alpha$  and ER $\beta$  with co-activators may also occur in a ligand-independent fashion that may not always involve the LxxLL motif (80, 81, 175). Co-activator recruitment to the ER is also dictated by the type of ligand bound to the ER (176, 177). Crystallographic studies of the ER LBD show that when mixed ER agonists/antagonists, such as tamoxifen or raloxifene, occupy the ligand-binding pocket helix 12 is re-oriented to partially occlude the co-activator binding groove, enabling it to block certain AF-2 dependent interaction with co-activators (90, 137, 144, 148). In fact, chromatin immunoprecipitation experiments suggest that tamoxifen bound ER $\alpha$  alters its conformation in such a way that it is able to recruit co-repressors to the promoter of estrogen target genes in MCF-7 cells rather than co-activators (121), thereby effectively repressing gene transcription.

Although the list of ER co-activators is long and still growing, there are only a small number that, to date, have been identified as being potentially clinically relevant to human breast cancer. Among all the co-activators described, the p160/SRC (steroid receptor co-activator) family of proteins, consisting of SRC-1 (also termed p160/NcoA-1/ERAP-160), SRC-2 (GRIP-1/TIF-2) and SRC-3 (AIB1/ACTR/RAC3/p/CIP), has attracted much attention. SRC-1 was first described as a ligand-dependent interacting protein for the progesterone receptor (178) and later was found to interact with and enhance the transcriptional activity of virtually all members of the steroid nuclear receptor super-family (78, 178), as well as other transcription factors including Ap-1 (179). AIB1 (amplified in breast cancer 1) has also been shown to interact directly with endogenous estrogen bound ER $\alpha$  in MCF-7 human breast cancer cells and this interaction is inhibited by tamoxifen and ICI 182,780 (180, 181). Interestingly, AIB1

appears to bind to ER $\alpha$  with a much greater affinity than ER $\beta$  and therefore, stimulates ER $\alpha$  transcriptional activity to a greater extent than ER $\beta$  (182). Nonetheless, all three members of the p160/SRC family interact with the ER in a ligand-dependent manner, enhancing ER transcriptional activity (183).

The molecular mechanism by which co-activators increase transcription is thought to be the result of their ability to alter chromatin structure and to recruit the general transcription factors through direct or indirect interactions with other co-activators. In accordance with this, SRC-1 has been shown to bind to TBP and TFIIB *in vitro* (184). No direct interaction between AIB1 and the basal transcription machinery has been described. The C-terminal domains of SRC-1 and AIB1 contain intrinsic histone acetyltransferase activity (HAT) (185, 186) and therefore, are able to catalyze the acetylation of histone lysines. The acetylation of N-terminal tail lysines on histones mediates alterations in chromatin structure that further enhance transcriptional activation (187). However, as SRC-1 HAT activity is relatively weak compared to other co-activators (185) and as deletion of the HAT domains do not appear to affect transcription, at least *in vitro* (188), its HAT activity may be dispensable for enhanced transcription. In addition to their interaction with the ER, SRC-1 and AIB1 have also been shown to associate with CREB-binding protein (CBP) and p300 (186, 189), both of which contain intrinsic HAT activity (190, 191), to form an estrogen receptor co-activator complex (189, 192). Although CBP and p300 have been reported to interact with the ER directly (81), the interaction appears to be relatively weak compared to that of ER and SRC-1 (193). However, since the interaction between CBP and SRC-1 is strong, SRC-1 may be responsible for recruiting CBP/p300 to the ER in response to ligand binding (193). Once

in the co-activator complex, SRC-1 acts synergistically with CBP/p300 to enhance ER-mediated transcription (194).

It has now become clear that receptor and co-regulator association with gene promoters occurs in a cyclic and dynamic fashion. For example, ER $\alpha$  and various co-activators appear to repeatedly cycle on and off the pS2 promoter in MCF-7 cells in the presence of continuous E<sub>2</sub> stimulation (121, 195). Shang et al. (195) went on to also demonstrate that ER $\alpha$  rapidly associates with the cathepsin D promoter following hormone stimulation and is accompanied by AIB1 and p300, closely followed by the association of RNA Pol II. The presence of CBP at the promoter appears to occur at a later time, suggesting that it may function at a distinct step in ER $\alpha$  induced transcription (121). Coincident changes in histone acetylation occur to promote a transcriptionally active environment (121). Subsequent rounds of transcription involve a majority of the same proteins, although slight differences exist (121). These observations were later confirmed on the pS2 promoter with few differences in the timing of the recruitment peaks (195).

Although the SRC family of proteins are all considered co-activators of ER-mediated transcription, recent evidence suggests that they may be functionally distinct from one another. Analysis of the two isoforms of SRC-1, SRC-1a and SRC-1e, show that they are functionally distinct from one another in that they differ in their ability to bind to and enhance ER transcriptional activity (196). These two isoforms differ at their C-terminal in that SRC-1a (molecular mass of 156.7 kDa) contains an insert of 56 unique amino acids not found in SRC-1e and is lacking 14 amino acids at its C-terminal that are present in SRC-1e (molecular mass 152.3 kDa) (196). SRC-1a, which contains 4 LxxLL

motifs, binds to the ER in a more stable manner than SRC-1e, which only contains 3 LxxLL motifs (196). However, SRC-1e enhances ligand-dependent ER transcription *in vitro* to a greater extent than SRC-1a due to the suppression of a C-terminal transactivation domain (196). In addition, an isoform of AIB1 has recently been described that enhances the ligand-dependent transcriptional activity of the ER to a greater extent than that of the full-length AIB1 protein (197). Such differences between SRC family proteins and between isoforms of the same family suggest that these proteins may play different roles in ER-mediated transcription.

Another co-activator that has received a great deal of interest is the steroid receptor RNA activator, or SRA. Initial studies suggested that SRA acts as a non-protein coding RNA transcript that when over-expressed, increases steroid receptor ligand-dependent transcriptional activity of the estrogen, progesterone, androgen and glucocorticoid receptors (198). Low resolution RNA structure modelling of SRA led to the identification of several distinct secondary RNA structures that work in concert with one another to convey its co-activator function that are involved in transcriptional up-regulation of the PR (199). More recently, however, it has been shown that some SRA RNA transcripts also encode for a 236 amino-acid SRA protein (200). Subsequent cloning and sequencing of the SRA coding sequence revealed three different SRA transcripts: SRA1, the full coding sequence of the SRA protein; SRA2 that bears two point mutations and SRA3 that contains a point mutation followed by a 3 nucleotide insert (200). Western blot and immunohistochemistry analysis have demonstrated the expression of SRA protein in human breast cancer cell lines and in breast tumor tissue (200, 201). While the exact function of the SRA protein is still unknown, it has been

shown to inhibit E<sub>2</sub>-ER activity on an ERE and to increase estradiol-induced PR expression in MCF-7 cells stably transfected with SRA protein (201).

b. Co-Repressors

Co-repressors are factors that repress the transcriptional activity of the ER. Binding of co-repressors to ER $\alpha$  occurs in the presence of antagonists; tamoxifen and raloxifene have been shown to recruit the nuclear receptor co-repressor protein (N-CoR) and SMRT (silencing mediator of retinoid and thyroid receptors) to certain target gene promoters (121, 175). On the other hand, Webb et al. (202) have shown that ER $\beta$  interacts with N-CoR and SMRT more strongly in the absence of ligand as well as in the presence of agonists (E<sub>2</sub>) than in the presence of SERMs (ICI, raloxifene and tamoxifen), raising the possibility that ER $\beta$  may recruit co-repressors to estrogen-regulated promoters. Although the crystal structure of ER $\alpha$  bound to a co-repressor has not been resolved, Huang et al. (203) suggest that helices 3 and 5 may be important as point mutations within these helices prevent co-repressor sequence peptides to bind the ER. Like co-activators, co-repressors contain a conserved sequence referred to as the CoRNR box or as an Lxxi/HlxxxI/L helix that recognizes the unliganded and repression competent form of receptors (203) and sequences surrounding the CoRNR box have been suggested to play a role in mediating the specificity of receptor interactions (204). Interestingly, nuclear receptors are able to discriminate between the NR box in co-activators and the CoRNR box in co-repressors while bound to agonist or antagonist ligands, respectively (121). Therefore, SERM binding to the ER may result in a configuration that may recruit either co-activators or co-repressors depending upon the availability of these factors within the cell. Recently, however, the orphan receptor

DAX-1 (dosage-sensitive sex reversal, AHC critical region on the X chromosome, gene 1) has been described as a repressor for estrogen activated ERs that contains an LxxLL motif usually found in nuclear receptor co-activators in its N-terminal domain (205). Co-repressors exist in a complex containing the co-repressor protein Sin3 and the histone deacetylases (HDAC) RPD3 or HDAC1 (206). Histone deacetylases are responsible for deacetylating core histone tails which results in a more condensed chromatin structure that represses gene transcription (207).

As described above, the recruitment of co-repressors to the ER results in active repression of transcription. SMRT/N-CoR binding to either the unliganded receptor or to tamoxifen bound ER recruits histone deacetylases, resulting in transcriptional repression. Recently, a yeast two-hybrid screen using SMRT as bait identified a SMRT/HDAC1 associated repressor protein (SHARP) that binds both SMRT and N-CoR (208). SHARP is a nuclear protein that binds to HDAC1 and HDAC2, and thereby, represses gene transcription. In addition, SHARP associates with the RNA co-activator SRA and represses SRA potentiation of ER transcription on an ERE (208). While the recruitment of histone deacetylases by co-repressors is important in inhibiting ER activity, competition for the LBD also is important (209). REA or repressor of estrogen activity, is a co-repressor that interacts with either the tamoxifen or estrogen bound ER and thereby, potentiates antiestrogen inhibitory activity or inhibits estrogen activity, respectively (209). Although REA expression does not affect ER binding to EREs, it competitively reverses SRC-1 enhancement of ligand-bound ER activity (209). Interestingly, an ER co-regulator that inhibits tamoxifen-mediated partial agonist activity has also been described and accordingly, has been termed repressor of tamoxifen

activation (RTA) (210). When expressed, RTA not only inhibits tamoxifen-mediated agonist activity but also partially inhibits estrogen-mediated transcription (210).

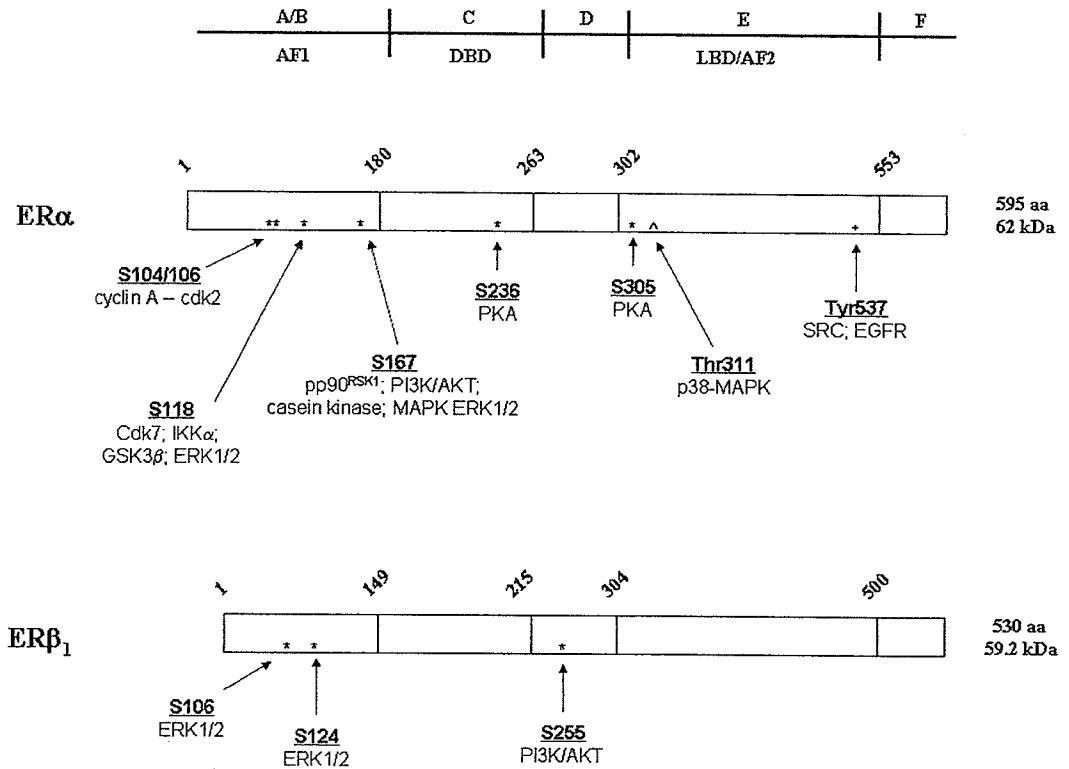
### B. Ligand-Independent Activation of ER

In addition to hormone-mediated activation, it is now well accepted that ER function is also modulated in a ligand-independent fashion. While the biological role for the hormone-independent activation of ER is not yet clear, the ability to activate ER in the absence of ligand represents a mechanism by which the cellular environment modulates ER function and may result in a growth advantage to ER positive breast cancer cells.

Peptide growth factors represent a large class of ER activators. Epidermal growth factor (EGF) and insulin-like growth factor-1 (IGF-1) increase ER $\alpha$  and ER $\beta$  transcriptional activity in the absence of estrogen (76, 211-213). These findings have also been supported by *in vivo* studies as EGF and IGF-1 mimic the effects of E<sub>2</sub> in the mouse reproductive tract, and pre-treatment of mice with ICI 164,384 greatly diminishes uterine response to EGF (214, 215). In line with the cross-talk between ER $\alpha$  and EGF, ER $\alpha$  knockout mice lack uterine E<sub>2</sub>-like responses to EGF even though the EGF signaling pathway is still intact (214, 215).

The molecular mechanism by which the ER is activated in a ligand-independent manner has been characterized and the majority of evidence indicates that modification of the phosphorylation state of the ER by cellular kinases serves as an important mediator. ER $\alpha$  is known to be phosphorylated at multiple sites within the protein while little information exists regarding the phosphorylation of ER $\beta$  (Figure 8). It has been well established that serine 118 within the AF-1 domain of ER $\alpha$  is phosphorylated by the

mitogen-activated protein kinase (MAPK) pathway following EGF or IGF treatment, enabling the receptor to bind specific co-activators and increase target gene transcription (75). The same holds true for ER $\beta$ , whereby phosphorylation of serines 106 and 124 within the AF-1 domain by MAPK increases its ligand-independent transcriptional activity by stimulating the recruitment of SRC-1 to its N-terminus (213). Extracellular signal-regulated kinase 1/2 (ERK1/2) (downstream signaling proteins of the MAPK pathway) activation also stimulates pp90<sup>rsk1</sup>, resulting in an increase of ER $\alpha$  transcriptional activity via receptor phosphorylation on serine 167 (216). Thus, ER $\alpha$  may be phosphorylated on both serine 118 and serine 167 by two different kinases in an activated MAPK pathway. In addition to phosphorylating ER directly, the MAPK pathway also phosphorylates several ER co-activators, including SRC-1 and AIB1 (217, 218), increasing their transcriptional potential. Other cellular kinases that alter the phosphorylation state of ER and thus, activate ER in the absence of ligand include: i) protein kinase A (PKA), by agents that raise intracellular cyclic adenosine monophosphate (cAMP) (cholera toxin and isobutylmethylxanthine or 8-bromo-cAMP) (76, 212, 219); ii) protein kinase C (PKC), by TPA (12-O-Tetradecanoylphorbol-13-acetate) (211, 220); iii) cytokines (221) and iv) cell cycle regulators, including cyclin D1.

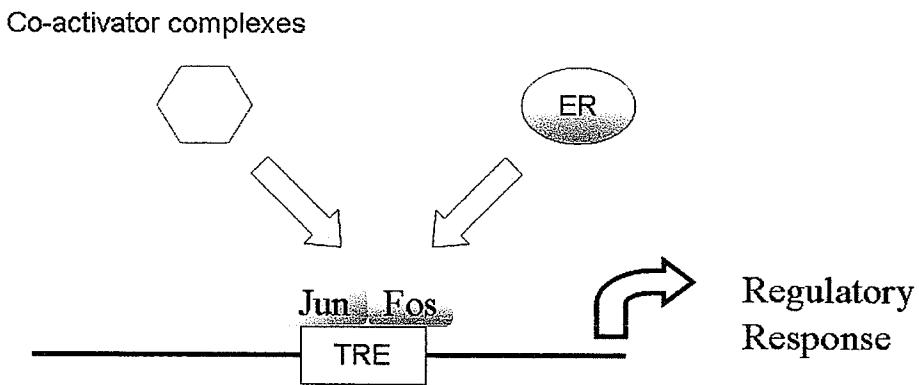


**Figure 8: Phosphorylation sites on human ER $\alpha$  and ER $\beta_1$ .** Sites of phosphorylation on the human ER $\alpha$  and ER $\beta_1$  is depicted along with the associated kinases. Adapted from (222).

### C. Non-Classical Mode of ER Action

A novel mechanism for mediation of an estrogen response was first suggested by the observation that not all genes regulated by ER contain EREs. The mechanism for estrogen action through such “non-classical” pathways is thought to involve protein:protein interactions with other DNA binding transcription factors (e.g. Ap-1 (activator protein 1) (223-225), Sp-1 (131, 226-228) and NF- $\kappa$ B (nuclear factor kappa B) (229, 230)), rather than direct binding of the receptor to regulatory elements in the promoter region (Figure 9). Evidence to support this hypothesis has come from

experiments in which the ER was shown to affect gene expression from promoters containing an Ap-1 site in the absence of an ERE and in ER $\alpha$  mutants either lacking a functional DNA binding domain (231, 232) or bearing a point mutation in the first zinc finger that prevents ER $\alpha$  binding to DNA (225).



**Figure 9: Model of the non-classical mode of ER action.** A model of the non-classical mechanism of ER action using Ap-1 as a model. ER binds to Jun/Fos dimers either directly or indirectly through other co-activator complexes (e.g. CBP-p160s) and thereby, modulating target gene transcription. TRE = TPA (12-O-tetradecanoylphorbol-13-acetate) responsive element. Adapted from (223).

#### i. Activator Protein-1

The transcription factor Ap-1 (activator protein 1) is involved in a wide range of cellular processes, including differentiation, proliferation, survival and death (reviewed in (233)). Ap-1 activity is induced by a wide variety of physiological stimuli, including growth factors, cytokines, polypeptide hormones, cell-matrix interactions, bacterial and viral infections as well as by a variety of physical and chemical stresses. The ability of this family of transcription factors to control such a wide range of biological processes is a result of their structural and regulatory complexity. The Ap-1 family of transcription

factors includes the Jun (c-Jun, JunB, JunD), Fos (c-Fos, FosB, Fra-1 and Fra-2), ATF (activating transcription factor) and MAF (musculoaponeurotic fibrosarcoma) protein families. For the purposes of this thesis, I will focus on the Jun and Fos family of proteins.

Fos and Jun proteins were first identified as the viral oncoproteins v-Fos and v-Jun in the Finkel-Biskis-Jinkins osteosarcoma virus (234) and avian sarcoma virus 17 (235), respectively, and their cellular counterparts, c-Fos and c-Jun, were discovered several years later (236, 237). c-Jun, located on human chromosome 1p32 (236), is the most potent transcriptional activator in the Jun family (238). c-Fos, whose gene is located within the region of human chromosome 14q21-q31 (239), enhances the DNA binding activity of Jun proteins through the formation of stable heterodimers (238). The C-terminal region of Jun and Fos contains five leucine residues separated from each other by six amino acids of which form an amphipathic helix (240), in which the leucine residues protrude from one side of the helix forming a hydrophobic surface. Upon protein dimerization, two amphipathic helices fold into a ‘coiled-coil’ conformation with the leucines aligned along the contact surface (241).

Dimerization of Ap-1 factors is essential for DNA binding in that neither Fos nor Jun can bind DNA as a monomer; they must dimerize prior to binding DNA. Jun has been shown to form homodimers with itself or heterodimers with other proteins containing the leucine zipper structure however, the main dimerization partner of Jun is Fos. X-ray crystallography studies suggest that Jun heterodimers with Fos are more stable than Jun homodimers (242). While Jun-Jun dimers may bind DNA and thereby initiate transcription, Jun-Fos heterodimers have a much higher affinity for the DNA

target sequence than Jun homodimers (243-245). Using electrophoretic mobility shift assays (EMSAs) and *in vitro* translated c-Jun and c-Fos proteins, Halazonetis et al. (243) have shown that Jun heterodimers with Fos bind to an Ap-1 sequence fragment 25 times more efficiently than Jun homodimers. While all Fos proteins increase the binding of c-Jun to Ap-1 sequences, c-Jun-FosB dimers are the most stable and most efficient at binding DNA, followed by c-Jun-Fra-1 and c-Jun-c-Fos (238). Fos cannot form homodimers (242, 243, 245), only heterodimers, due to the presence of several unfavourable contacts in the coiled-coil conformation (242). Due to its failure to homodimerize, Fos cannot bind DNA by itself (243, 246); it must first complex with other leucine zipper proteins, namely Jun, to alter gene transcription. Thus, the dimerization of Jun and Fos is required for DNA binding.

N-terminal to the leucine zipper of Jun and Fos is a basic region, which is involved in DNA binding. The consensus DNA binding sequence for Jun homodimers and Jun-Fos heterodimers is 5'-TGACTCA-3' and is referred to as the 12-O-tetradecanoate-13-acetate (TPA)-responsive element (TRE) (247, 248). Multimers of the TRE increases the Ap-1 transcriptional response dramatically upon Ap-1 activation but also has significant basal activity in the absence of Ap-1 stimulation. This basal activity is thought to be, in part, the result of a low level of active Ap-1 that is present in many cultured cell lines before cellular stimulation.

Phosphorylation plays an important role in modulating Ap-1 transcriptional activity. The N-terminal region of c-Jun is phosphorylated by Jun kinases (JNKs) at serines 73 and 63, enhancing c-Jun transcriptional activation either as a homodimer (249-251) or as a heterodimer with Fos (252). The enhancement of c-Jun activity through

phosphorylation events by JNK has been suggested to be partly due to a higher affinity of phosphorylated c-Jun for the transcriptional co-activator CBP (253). CBP is a potent transcriptional co-activator which was first identified through its strong interaction with phosphorylated CREB (cAMP response element binding protein) (254). CBP has been shown to interact with TFIID, a part of the basal transcriptional machinery, and is important in mediating the transcriptional response of both CREB and Ap-1 (255, 256). In 1996, it was suggested that competition for limiting amounts of CBP by activated nuclear receptors (specifically GR and RAR) and Ap-1 factors is responsible for the inhibition of Ap-1 activity by ligand bound nuclear receptors (257). Indeed, over-expression of CBP through transient transfection of vectors encoding CBP abolished the inhibitory effect of activated RAR and GR on Ap-1 activity on a TRE reporter plasmid (257). More recent evidence suggests, however, that while such a competition may be accurate for RAR (258), it may not be the case for GR (259). De Bosscher et al. (259) suggest glucocorticoid repression of Ap-1 activity occurs irrespective of the amount of co-activator levels present in the cell but rather is the result of JNK inhibition by GR. In these studies by De Bosscher (259), only 100-200 ng of CBP expressing plasmid was transfected into the cells as compared to 2ug in the original study (257). As quantification of CBP levels was not undertaken in either study, it is difficult to determine whether sufficient levels of CBP was obtained to reverse the effect of an activated GR by these authors.

While phosphorylation of c-Jun at its N-terminal extremity is a positive regulator of transcriptional activity, phosphorylation of residues near the C-terminal inhibits transcription. ERK1 and ERK2 (extracellular related kinase 1/2), downstream signaling

proteins in the MAPK cascade, and glycogen synthase kinase-3 (GSK-3) (260, 261) have been shown to phosphorylate c-Jun at Ser243, Ser249 and Thr239 located next to the DNA binding region (262, 263). Phosphorylation at Ser243 inhibits c-Jun binding to DNA (260, 264). Activation of PKC through TPA stimulation results in the rapid dephosphorylation of Thr239 (260) that serves as an important regulatory event in the DNA binding activity of c-Jun to Ap-1 sites (263). The mechanism by which TPA treatment results in c-Jun dephosphorylation is unknown; however it has been suggested that conformational changes in the protein upon phosphorylation at distinct sites exposes the residue to dephosphorylation by phosphatase(s) (263).

The transcriptional activity of c-Fos is also increased by the MAPK family through its phosphorylation at Thr232, the Fos homolog of Ser73 in c-Jun (252). The phosphorylation of c-Fos, unlike that of c-Jun, is not mediated by the JNKs, but rather from a novel MAPK termed FRK (Fos-regulating kinase) (252). Thus, Jun-Fos dimers that have similar DNA binding specificities may differ in their transcriptional activity due to phosphorylation events on both Jun and Fos in domains located outside the DNA binding region.

*ii. Interaction between Ap-1 and ER*

Evidence for an interaction between ER and Ap-1 was first identified in a search for genes involved in the mitogenic response of cells to estrogens. It was hypothesized that in estrogen growth responsive cells, ER modulates the activity of genes whose products control cell cycle. In line with this hypothesis, it was found that estrogen induces the expression of the proto-oncogene *c-fos* in rat uterus and human breast cancer cells in culture (265, 266). The induction of the *c-fos* gene by estrogen occurs rapidly

after treatment and is not abolished by protein synthesis inhibitors, suggesting that transcriptional activation of *c-fos* is in direct response to the hormone (266). The E<sub>2</sub> responsive sequence in the *c-fos* promoter has been localized to a 240 bp region that contains an imperfect palindromic ERE to which ER $\alpha$  binds in electrophoretic gel mobility shift assays (130). However, induction of *c-fos* was not observed using a construct containing the imperfect palindrome (130, 228) and more recent studies have shown that induction of *c-fos* expression by ER is dependent on the formation of a transcriptionally active Sp1/ER complex that binds to a GC-rich site in the promoter region (228). Up-regulated Fos is then involved in a negative feedback loop in which Fos antagonizes the activation of its own gene promoter (267). In addition to *c-fos*, E<sub>2</sub> activated ER also stimulates the transcription of c-Jun, JunB and JunD in breast and uterine cells (268, 269). Furthermore, the antiestrogen tamoxifen increases c-Fos and Jun-B and to a much lesser extent c-Jun and Jun-D, mRNA expression in intact rat uteri (270, 271) but not in breast tissues (231). The induction of such Ap-1 factors is thought to be partly responsible for the mitogenic effect of estrogen and possibly, tamoxifen, in these tissues.

ER interacts with Ap-1 transcription factors on the promoter region of target genes. As described previously, ER activates transcription either by binding DNA directly on a classical ERE (272) or by binding to other DNA binding proteins at alternate response elements, including Ap-1 (223, 225, 232). Alterations in the expression of collagenase (MMP-1) (225, 231, 273), insulin-like growth factor-1 (IGF-1) (274), progesterone receptor (132), ovalbumin (232, 275), gonadotropin-releasing hormone receptor (276) and cyclin D1 (273, 277) genes by estradiol have all been shown

to involve Ap-1 sites that bind members of the Jun and Fos family of proteins. While the estrogen regulation of Ap-1 activity is generally positive in breast and uterine cells (275), it can also be inhibitory in breast cancer cells (276, 278). In contrast, tamoxifen is generally an agonist of Ap-1 regulated genes in endometrial cell lines but an antagonist in breast cells (231). The description below will focus on the effects of ER $\alpha$  and ER $\beta$  on Ap-1 regulated genes in the context of a breast cell background.

The effect of ER on Ap-1 activity in the context of an Ap-1 responsive reporter plasmid containing concatemerized consensus Ap-1 binding fragments is generally stimulatory in ER $^+$  breast cancer cell lines (278, 279), although a negative effect has also been reported (225). The increase in Ap-1 activity in ER $^+$  cells is largely attributed to ER $\alpha$  expression, as increased expression of ER $\beta$  by transient transfection into MCF-7 cells inhibits the cellular response to estrogen (279). In comparing the effect of E<sub>2</sub> on Ap-1 activity between ER $\alpha$  $^+$  and ER $\alpha$  $^-$  breast cancer cell lines, Philips et al. (278) have suggested that differential expression of the Fos family member, Fra-1, may be responsible for differences in Ap-1 activity upon hormone treatment in ER $\alpha$  $^+$  (MCF7, T47D and ZR75) and ER $\alpha$  $^-$  (MDA-MB-231 and BT20) breast cancer cell lines. These authors have shown that ER $\alpha$  $^+$  cell lines have a positive effect on Ap-1 activity but have a low level of Fra-1 expression while ER $\alpha$  $^-$  cell lines transfected with ER $\alpha$  have a negative effect on Ap-1 activity and have a high expression of Fra-1 (278). Although the mechanism through which Fra-1 inhibits ER activity on Ap-1 promoters remains unknown it may perhaps be due to the specific composition of the Ap-1 dimers present in the cell lines (Jun/Fra-1 rather than Jun/Fos). Reports of the effect of antiestrogen treatment on concatemerized Ap-1 reporter plasmids are few. However, it does appear

as though antiestrogen treatment (tamoxifen and ICI 182,780) increases the Ap-1-mediated response in a dose-dependent manner while having no effect on a consensus ERE plasmid (225, 279).

Responses to ER on the collagenase (MMP-1; matrix metalloproteinase) promoter tends to be quite similar to its effects on the concatemerized Ap-1 plasmid described above. Generally, estrogen treatment of breast cancer cells (MCF-7, MDA 453, ZR75) transiently transfected with a collagenase reporter construct stimulates Ap-1 activity (231, 273, 280) while tamoxifen and ICI 182,780 have no effect (231). However, Jakacka et al. have observed a decrease in collagenase reporter activity in the presence of E<sub>2</sub> and an increase with ICI 182,780. The reasons for the discrepancies between these results is unknown, but may be due to differences in cell culture conditions (presence of E<sub>2</sub> in media during routine upkeep) or to differences in reporter plasmid backbone. Interestingly, MCF-7 cells over-expressing ER $\beta$  through transient transfection show a significant increase in collagenase reporter activity with the antiestrogens ICI 164,384, raloxifene and tamoxifen while treatment with E<sub>2</sub> has no effect (280).

The molecular mechanism by which ER affects Ap-1 activity is still under debate. It is unlikely that ER dependent activation at Ap-1 sites is due to changes in the amount of Ap-1 proteins as protein synthesis inhibitors do not diminish the response to estrogen and induction still occurs under conditions in which c-Jun and c-Fos mRNA expression remains unchanged (281). A clue as to the way in which ER functions at Ap-1 sites came from studies mapping the regions of ER $\alpha$  important for its stimulatory effects. Mutations within the AF-1 and AF-2 domains of ER $\alpha$  completely eliminate the Ap-1 response to ER $\alpha$  (231). As the ER $\alpha$  AF-2 domain is involved in co-activator binding in the presence

of estrogens, it is not surprising that GRIP-1, SRC-1 and p300/CBP have all been associated with an increase in ER $\alpha$  activity at Ap-1 sites (223, 225, 273, 282). The co-activators p300/CBP have also been implicated in modulating Ap-1 transcriptional responses to ER $\alpha$ , although they are recruited through distinct protein:protein interactions (282). Furthermore, as Ap-1 factors themselves bind SRC-1 (179) and p300/CBP (253), it thus has been proposed that the inhibitory effects of ER at Ap-1 sites may be the result of direct competition for limiting amounts of transcriptional co-activators within the cell (276). Evidence for this model comes from studies on the gonadotropin releasing hormone receptor gene to which estrogen treatment represses its expression in MCF-7 cells via an Ap-1 motif (276). Transient over-expression of the co-activator CBP reversed the effect of ligand-bound ER in a dose dependent manner, suggesting that CBP was limiting for transcriptional activation (276). Similarly, ER in the presence of SERMs may sequester a transcriptional repressor away from the Ap-1 site, resulting in an increase in Jun/Fos transcriptional activity (283). Another mechanism by which ER has been proposed to affect Ap-1 activity is via direct protein:protein interactions between ER and c-Jun (224, 231). *In vitro* studies suggest that c-Jun and ER $\alpha$  bind to one another in a ligand independent mechanism (224); however the interaction between these two proteins has not been extensively studied *in vivo*.

*iii. Ap-1 and the Non-Classical Mode of ER Action*

ER affects gene expression from promoters containing an Ap-1 site. A variety of estrogen-responsive genes have been described that lack a palindromic ERE but contain consensus Ap-1 elements (5'-TGAG/CTCA-3'), with or without a degenerate ERE or ERE half-site (5'-GGTCA-3' or 5'-TGACC-3'). The ovalbumin gene, which is induced

by E<sub>2</sub> in chicken oviduct and HeLa cells transiently expressing ER $\alpha$  (232, 275), contains a half-palindromic ERE (5'-TGGGTCA-3') that binds Ap-1 oncoproteins and, to a much lesser extent, ER $\alpha$  (232). Transient transfection experiments in chicken embryo fibroblasts and HeLa cells suggest a synergistic activation between c-Jun, c-Fos and ER on the ovalbumin reporter plasmid and that this effect is independent of ER binding to DNA (232, 275). Estrogen has been shown to increase the expression of collagenase (231, 280), IGF-1 (274) and PR (132) promoters that contain critical Ap-1 elements but lack consensus EREs. The co-operation between Ap-1 and ER has also been shown to be involved in the stimulation of cyclin D1 expression by ER $\alpha$  in human breast cancer cells (277). Further evidence to support the importance of the Ap-1 transcription factor, c-Jun, in mediating the effect of ligand activated ER through protein:protein interactions has recently been described. Using an inducible c-Jun dominant negative mutant in MCF-7 cells, DeNardo et al. (273) show that Ap-1 blockade inhibits estrogen induced expression of Ap-1 dependent genes by preventing the binding of ER to the promoter region. While estrogen-bound ER $\alpha$  typically enhances Ap-1 target genes (277), it is important to note that the Ap-1 response to ligand activated ER varies between different cellular milieus (stimulatory to inhibitory) (223, 225, 231), possibly due to alterations in the relative expression of Ap-1 proteins present (278). ER $\alpha$  and ER $\beta$  have been shown to have opposing actions within the same cell type (277, 280) and, when expressed within the same cell, modulate the transcriptional activity of each other on Ap-1 responsive genes (277, 279). Nonetheless, the cellular response to estrogen activated ER $\alpha$  on Ap-1 genes in endometrial and breast cancer cells is generally positive, such that there is an increase in target gene transcription upon E<sub>2</sub> treatment.

Cellular responses on Ap-1 elements in the presence of antiestrogens tend to mimic their effects on cellular proliferation. Alternate responses between breast and uterine cells at Ap-1 sites in the presence of tamoxifen have been observed: tamoxifen bound ER $\alpha$  is stimulatory in uterine cells but has no measurable effects on Ap-1 dependent transcription in breast cells (231, 280). Thus, whereas tamoxifen does not stimulate normal breast tissue growth, it does stimulate uterine growth (284). This effect of tamoxifen bound ER $\alpha$  at Ap-1 sites is in contrast to its response at classical EREs, in which antiestrogen treatment typically inhibits target gene transcription (280). Interestingly, tamoxifen-bound ER $\beta$  stimulates Ap-1 activity in both endometrial and breast cell backgrounds (277, 280, 285), suggesting that different ligand actions between ER $\alpha$  and ER $\beta$  may be a feature at Ap-1 promoters. Raloxifene, unlike tamoxifen, lacks estrogen-like effects on Ap-1 promoters in uterine cells when bound to ER $\alpha$  but is a strong activator of Ap-1 with ER $\beta$  (96, 149, 277). The effects of pure antiestrogens on Ap-1 activity is somewhat controversial, as some researchers suggest that they have no effect on Ap-1 activity while others suggest that ICI 182,780 treatment in the presence of ER $\alpha$  or ER $\beta$  potentiates Ap-1 transcriptional activity (277, 280, 285).

Domain requirements for the selective responses of ER $\alpha$  and ER $\beta$  at Ap-1 sites are very complex. Deletion studies of ER $\alpha$  show that the AF-1 and AF-2 activation functions of ER $\alpha$  are required for the agonist activity of estrogen at Ap-1 sites (96, 282, 286) while the DBD and regions within the N-terminal domain outside of the AF-1 are required for tamoxifen activation in uterine cells (96, 231, 286). Interestingly, tamoxifen and raloxifene activities appear to be dependent on the amino terminus of ER $\beta$  (96), despite the low level AF-1 activity observed on an ERE (84). Deletion of the AF-1

domain of ER $\alpha$  elicits a response to raloxifene that mimics that of ER $\beta$  (96, 286), suggesting that ER $\alpha$  AF-1 suppresses the raloxifene activation at the Ap-1 site by ER $\alpha$ . Since ER $\beta$  has no constitutive AF-1 function, it has been suggested that ER $\beta$  activates Ap-1 by an AF-independent mechanism. However, raloxifene activation at an Ap-1 site by ER $\beta$  is diminished when the N-terminal is deleted (96), indicating the need for an activation function located in this region. Thus, different ligands and different ER receptor subtypes utilize different regions to enhance Ap-1 activity.

While the exact mechanism through which ER functions at Ap-1 sites is not completely understood, it has been suggested that the ER binds directly to proteins bound to the Ap-1 site (224). Several investigators have shown that binding of Jun/Fos to the Ap-1 site is necessary for ER action and once bound, ER $\alpha$  appears to act as a co-activator, increasing the intrinsic transcriptional activity of Ap-1 (282). Whether ER binds to Jun and Fos directly (224, 231) or is recruited to Ap-1 sites indirectly through binding to pre-existing Ap-1/co-activator complexes (223) is still unclear. Evidence for a direct interaction between Ap-1 proteins and ER $\alpha$  has been demonstrated both *in vitro* and *in vivo*. GST-pull down assays show that ER $\alpha$  binds to c-Jun and JunB but not to Fos proteins *in vitro* (224, 231) and that the interaction is ligand independent (224). The interaction between ER $\alpha$  and c-Jun *in vivo* has been shown using a mammalian cell two-hybrid assay and by co-immunoprecipitation in MCF-7 and Cos cells transiently transfected with ER and/or c-Jun expression vectors (224, 287). The region of ER $\alpha$  that interacts with c-Jun is unclear. In one study, the ER $\alpha$  DBD and hinge domains were implicated in mediating the interaction between ER $\alpha$  and c-Jun (224) while in other studies, residues within the amino terminus were important as deletion of these regions

abolished the interaction between c-Jun and ER $\alpha$  *in vitro* (231, 287). Cheung et al. (282), using immobilized DNA assays, demonstrate that the DBD is required for the recruitment of ER $\alpha$  to Fos/Jun bound to Ap-1 sites while the AF-1 and AF-2 regions are required for activation. The region of c-Jun that binds to ER $\alpha$  is also uncertain, as both the carboxy (224) and amino terminus (287) have been suggested in protein:protein binding. No physical interaction between ER $\beta$  and Ap-1 factors has been described.

*iv. The TGF $\beta_3$  Promoter and the Non-classical Mode of ER Action*

As discussed previously, the transcriptional activation by estrogen of genes that do not contain an ERE requires the interaction of the ER with other signaling proteins that bind DNA, including Sp-1 and Ap-1. However, there are other unidentified factors to which the ER binds that mediate its activity on target genes. In investigating the tissue-selective activity of raloxifene in bone, Yang et al. demonstrated the existence of a DNA response element for raloxifene in the promoter region of the TGF $\beta_3$  gene (288). Further studies suggest that the TGF $\beta_3$  promoter is activated by estrogen but to an even greater extent by raloxifene, tamoxifen and ICI 164,384, with raloxifene having the greatest activity (289). The raloxifene response element shows no sequence similarities to either the palindromic ERE or the Ap-1 binding site and removal of the DBD of ER $\alpha$  does not prevent activation of the gene, suggesting that protein:protein interactions with an unknown transcription factor occurs (289). Transient transfection of Cos1 cells with a TGF $\beta_3$  reporter gene suggests that raloxifene increases ER $\alpha$  and to a lesser extent, ER $\beta_1$  transcriptional activity and co-expression of ER $\beta_2$  and ER $\beta_5$  are able to inhibit raloxifene induced ER $\alpha$ , but not ER $\beta_1$ , activity (139). While the mechanism through which ER modulates TGF $\beta_3$  transcription is unknown, it has been suggested that the Ras-MAPK

signaling pathway may be involved (290) (although these studies have not been confirmed by others).

#### **D. Non-Genomic Mechanism of ER Action**

Traditional estrogen signaling pathways involving nuclear transcription usually require hours for maximal gene activation. However, estrogens also have other effects on the cell that cannot be explained by a transcriptional mechanism due to their very rapid onset (seconds to minutes). Multiple studies have shown that these rapid actions take place outside of the nucleus and are initiated at the level of the plasma membrane and thus, have been referred to as ‘non-genomic’, ‘extra-nuclear’, or ‘membrane-mediated’ effects. Some of the effects of estrogen mediated by this pathway include arterial vasodilation (291, 292); induction of cell proliferation and inhibition of apoptosis (293); changes in neuronal excitability (294); and neurotrophic responses (295). These effects may involve: (i) IGF-1 and EGF receptors (296, 297); (ii) MAPK (298-300); (iii) calcium channels (295); or (iv) phosphoinositol-3-kinase/AKT1 (292, 301), to name a few. While membrane receptors distinct from the ER have been suggested to be involved in mediating the non-genomic effects of estrogen (reviewed in (302)), compelling evidence supports the presence of a subpopulation of ER $\alpha$  and ER $\beta$  located at the plasma membrane (103, 104), although the definitive identification of a membrane bound ER has not yet been achieved (303).

#### **IV. ER Cross-talk with Other Signaling Pathways**

ER cross-talk with other growth factors and their downstream signaling proteins are also important in breast tumorigenesis and breast cancer progression. Similar to ER

binding to co-activators, cross-talk between various signaling pathways amplifies cellular proliferation coming from both the ER and growth factor receptor pathways in breast tumors. While these signaling pathways often exert stimulatory effects on ER signaling, ER also may either increase or decrease the expression of every level of the signaling pathway (304). The signaling pathways to which the ER has been shown to cross-talk with include: PI3K/AKT; Ras-MAPK; stress-induced pathways mediated by JNK and p38 MAPKs; Ap-1; and more recently the TGF- $\beta$  growth inhibitory pathway.

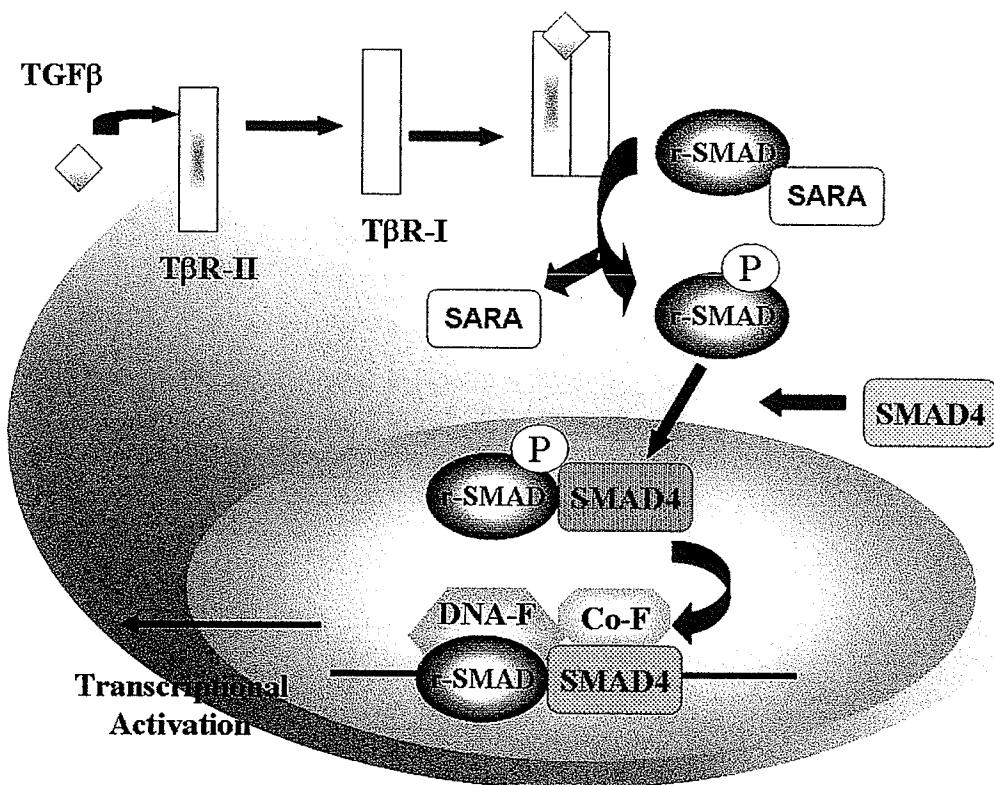
#### A. The TGF $\beta$ Signaling Pathway

##### i. TGF $\beta$ Receptors

The TGF $\beta$  family consists of TGF $\beta$ , the bone morphogenetic proteins (BMPs), activins, anti-mullerian hormone, growth and differentiation factor 5 and the Vg1 subfamily. This family of growth factors regulate an array of cellular processes including cell migration, proliferation, adhesion, differentiation and death (305). For the purposes of this thesis, I will focus on the TGF $\beta$  signaling pathway.

TGF $\beta$  and related factors signal through a family of transmembrane protein serine/threonine kinases referred to as the TGF $\beta$  receptor (T $\beta$ R) family. Based on structural and functional properties, the T $\beta$ R family consists of two subfamilies: type I (T $\beta$ R-I) and type II (T $\beta$ R-II) receptors. T $\beta$ R-I and T $\beta$ R-II have the same basic structural elements which include a short, cysteine rich extracellular domain that is involved in ligand binding and an intracellular serine/threonine protein kinase domain (305). In addition, T $\beta$ R-I contains a conserved glycine and serine region, also known as the GS domain, that precedes the receptor kinase domain (306, 307). Activation of the signaling

cascade begins as TGF $\beta$  ligand binds to T $\beta$ R-II (Figure 10). Ligand binding results in the recruitment of T $\beta$ R-I to the T $\beta$ R-II/ligand complex where T $\beta$ R-I rapidly becomes phosphorylated on serine and threonine residues within the GS domain by the



**Figure 10: The TGF $\beta$  signaling cascade.** TGF $\beta$  binds to the T $\beta$ R-II receptor, which then forms a complex with T $\beta$ R-I molecules. The T $\beta$ R-II kinase phosphorylates T $\beta$ R-I, thereby activating its serine-threonine kinase. In response to receptor activation, receptor Smads (r-Smad), namely Smad2 and Smad3, transiently associate with and are phosphorylated by the T $\beta$ R-I kinase. After their activation, r-Smads interact with Smad4. The r-Smad/Smad4 complex translocates to the nucleus where it interacts with various co-factors to bind DNA in a sequence specific manner and thereby, modulates target gene transcription. Adapted from (305).

constitutively active kinase of T $\beta$ R-II (306, 307). These multiple phosphorylations activate T $\beta$ R-I, which transduces the signal to downstream signaling proteins. Binding of FKBP12 to T $\beta$ R-I in the basal state protects and stabilizes the T $\beta$ R-II phosphorylation sites on T $\beta$ R-I (308) and thereby, regulates TGF $\beta$  signaling. Heterodimerization of T $\beta$ R-I and T $\beta$ R-II may be disrupted by a BMP and activin membrane-bound inhibitor BAMBI, a naturally occurring truncated type I receptor that lacks a kinase domain (309). BAMBI stably associates with the T $\beta$ Rs and thereby, inhibits TGF $\beta$  signaling (309).

*ii. Smads*

TGF $\beta$  binding to T $\beta$ R-II results in the heterodimerization of T $\beta$ R-I and T $\beta$ R-II. Phosphorylation and subsequent activation of the type I receptor stimulates the downstream signaling proteins known as the Smads. The Smad family of proteins, consisting of Smads 1-9, is divided into three functional groups: Smads 1, 2, 3, 5 and 8 are receptor Smads (r-Smads); Smad4 is the common mediator Smad (co-Smad) while Smad 6 and 7 are inhibitory Smads. These proteins are characterized by an N-terminal MAD homology 1 (MH1) domain and a C-terminal MAD homology 2 (MH2) domain which are connected by a proline rich linker region. The MH1 domain is highly conserved among the r-Smads and Smad4 (305). In its activated state, the MH1 domain contains the DNA binding region through which Smads recognize and bind to Smad responsive elements (SREs) (310). The MH2 domain contains receptor phosphorylation sites and is involved in several important protein-protein interactions. This domain also contains the effector function in r-Smads (305).

As previously described, Smads are the downstream signaling proteins in the TGF- $\beta$  signaling cascade. T $\beta$ R-I activation results in the recruitment of r-Smads, namely

Smad2 and Smad3, to its kinase domain via Smad interaction with the membrane-associated protein Smad-anchor for receptor activation (SARA) (Figure 10) (311). Confocal microscopy experiments have demonstrated that SARA interacts with Smad2 and Smad3 and co-localizes with T $\beta$ R-I (311). Therefore, it has been hypothesized that SARA recruits Smad2 and Smad3 into distinct subcellular domains for their interaction with an activated T $\beta$ R-I. SARA binds to the MH2 domain of Smad2 and Smad3 through a double zinc finger domain (FYVE domain) (311). Activated T $\beta$ R-I phosphorylates Smad2 and Smad3 on serine residues within the MH2 domain, inducing r-Smad dissociation from SARA (311). Deletion of the FYVE domain in SARA results in r-Smad mislocalization and inhibits the TGF- $\beta$  dependent transcriptional response. Dissociation of Smad2 and Smad3 from SARA allows Smad binding to Smad4, and the resulting heterodimer translocates to the nucleus (Figure 10). Once in the nucleus, Smad2/Smad4 and Smad3/Smad4 regulate target gene transcription by associating with transcription co-factors (312) and binding to specific DNA sequences, also known as SBEs (Figure 10) (313, 314) through their MH1 domain. Transcriptional factors that cooperate with Smad proteins to regulate transcription include p300/CBP (315, 316), TFE3 (314), FAST-1 (317), Ski and SnoN (318, 319). Yanagisawa et al. (320) have also described a ligand-dependent interaction between the VDR and the MH1 domain of Smad3. Formation of the VDR/Smad3 complex increases the ligand-induced transactivation function of VDR on a reporter plasmid (320) and this effect is abolished by the inhibitor Smad, Smad7 (321). Interactions between the C-terminal activation domain of Smad3 and GR have also been demonstrated *in vitro* and *in vivo* (322).

### ***iii. TGF $\beta$ and ER Cross-talk***

The interaction of ER and TGF $\beta$  pathways has been suggested previously (323, 324). Signal transduction through the TGF $\beta$  pathway plays a key role in the negative regulation of breast epithelial cell growth (325-327) and exposure of human breast cancer cells to TGF $\beta$  *in vitro* inhibits cell growth (328-330). Treatment of mice with TGF $\beta$  has also been shown to protect against mammary tumor formation *in vivo* (331). However, many mammary tumors often become insensitive to the antiproliferative effects of TGF $\beta$  (325, 332). Furthermore, it is thought that enhanced secretion of TGF $\beta$  protein is associated with the growth inhibitory effects of antiestrogens (323, 324, 333) and arguably implicated in the mechanism by which antiestrogens inhibit the growth of some human breast cancer cells. In contrast, over-expression of TGF $\beta$  has been associated with estrogen independence and antiestrogen resistance in human breast cancer (324, 327, 334).

Apart from direct autocrine or paracrine effects of TGF $\beta$  on breast cancer cell growth, direct cross-talk between the ER and TGF $\beta$  signaling pathways has been potentially identified (335, 336), further adding to the potential complexity of how TGF $\beta$  and ER mediate their action. In various model systems, direct physical interactions between ER $\alpha$  and Smad1, Smad2, Smad3 and Smad4 have been suggested to occur in a ligand-dependent manner (335, 336). In addition, direct interactions of Smad3 with other members of the nuclear receptor family have been demonstrated (320-322, 337, 338). The outcomes of these interactions appear to differ depending on the nuclear receptor involved and possibly the cell type background under which the experiments were carried out (320, 335). Nonetheless, the mechanism by which ER modulates Smad

transcriptional activity and the significance of such an interaction in breast cancer tumorigenesis and breast cancer progression is unknown.

TGF $\beta$  is involved in the negative regulation of breast epithelial cell growth (325-327) and exposure of human breast cancer cells to TGF $\beta$  *in vitro* inhibits their growth (328, 329). However, many mammary tumors often become insensitive to the anti-proliferative effects of TGF $\beta$  *in vitro* (325, 332). The mechanism by which breast tumors lose their sensitivity to the growth inhibitory effects of TGF $\beta$  is unknown. Alterations in the expression of membrane receptors and downstream Smads are rare as well as mutations within the signaling pathway (339, 340), in spite of a report by Gobbi et al. (341) who reported an increased risk of breast cancer development due to a decrease in the expression of membrane receptors. However, when alterations in the Smad signaling proteins do occur in breast tumors, there is a poorer patient prognosis (342).

iv. *TGF $\beta$  and Cancer*

A strong correlation exists between cancer formation and a loss of sensitivity to the growth inhibitory effects of TGF $\beta$ . This insensitivity may be due to several factors, including a loss of functional receptor expression (343-347) or by inactivating mutations of the TGF $\beta$  receptors themselves (348, 349). Several researchers have reported a decrease in T $\beta$ R-II expression in breast tumor cell lines and mammary tumor models (332, 350, 351). Pouliot et al. (330), using a ribonuclease protection assay with a cDNA probe specific for T $\beta$ R-II, reported that not all human breast cancer cell lines express the T $\beta$ R-II receptor. Even more intriguing was a report by Gobbi et al. (341), who demonstrated that a loss in T $\beta$ R-II expression occurs in epithelial cells from patients with atypical breast lesions and further suggested that this loss may be associated with an

increased risk of breast cancer development. Immunohistochemical studies examining T $\beta$ R-II expression in 178 breast biopsies of normal, benign and malignant breast tissues demonstrated a loss of receptor expression within human breast carcinomas and an inverse relationship between tumor grade and T $\beta$ R-II expression (352). Thus, a decrease in T $\beta$ R-II expression is associated with a more aggressive mammary tumor phenotype. The altered expression of the type II receptor in cancer cells may therefore allow these cells to escape the TGF $\beta$  growth inhibitory effects (352) that occur in the late stages of breast cancer development and in breast cancer progression. Although T $\beta$ R expression clearly conveys cellular resistance to TGF $\beta$ , mutations within the receptors themselves may also be important. In spite of the fact that mutations involving T $\beta$ R-II have been reported in breast cancer cell lines (349), no mutations have been found in human breast cancer *in vivo* (339, 340, 353). In contrast, T $\beta$ R-II mutations are relatively common in colorectal and gastric tumors (348, 354). Chen et al. (353) have reported the presence of a serine to tyrosine mutation (S387Y) in the kinase domain of T $\beta$ R-I that is responsible for disrupting receptor signaling in human breast carcinomas with axillary lymph node metastases. However, a similar study performed by Anbazhagan et al. (339) revealed no mutations at the S387Y site in 20 breast cancer metastases.

Like the TGF $\beta$  receptors, Smad protein mutations have been described in gastric, colorectal and pancreatic cancer cell lines and tumors (355-358) but Smad3 gene mutations are rare in colorectal cancers (359). No mutations have been reported in human breast cancer cell lines (355) although Smad4 is deleted in the MDA MB 468 breast cancer cell line (330) and a splice variant of Smad4 is present in the ZR-75-1

breast cancer cell line (330). Interestingly, no systematic studies have been reported which investigate Smad3 mutations in normal and malignant breast tissues.

## V. ER and Breast Cancer

Throughout breast tumorigenesis and breast cancer progression, the expression and function of the ER changes dramatically. In normal breast tissue, the majority of proliferating cells are ER $\alpha$  negative (360), while ER $\alpha$  expression in breast tumors is associated with an increase in cellular proliferation and metastasis (361). ER $\alpha$  expression in normal breast epithelium is relatively low (362) while approximately 70% of all primary breast cancers are ER $\alpha$  positive (363, 364), suggesting that the proportion of cells expressing ER $\alpha$  increases significantly during the initial disease process. While ER $\alpha$  levels are up regulated throughout breast tumorigenesis, they are typically down regulated during breast cancer progression (365, 366). The level of ER expression within a breast tumor provides relevant prognostic information with respect to time to relapse and overall survival as ER $^+$  patients with metastatic breast cancer survive twice as long as patients with ER $^-$  tumors (367). Tumors that are ER $^+$  tend to be low grade, well-differentiated tumors that have little or no necrosis or lymphoid cell infiltration (368, 369). Most importantly, however, ER $^+$  tumors are associated with a significantly higher response rate to endocrine therapies that target the ER (i.e. antiestrogens) than those with low or undetectable levels (370). Furthermore, tumors that express PR, a downstream marker representing a functional ER (371), in addition to ER (ER $^+$ /PR $^+$ ) have an increased probability of response to tamoxifen, longer time to treatment failure and longer overall survival than those expressing ER alone (372). Thus, ER and PR are important predictive markers for response to endocrine therapy in breast cancer patients.

Of all primary human breast tumors, approximately 59% co-express ER $\beta$  and ER $\alpha$  (ER $\beta^+$ /ER $\alpha^+$ ) while approximately 17% express ER $\beta$  alone (ER $\beta^+$ /ER $\alpha^-$ ) (373, 374). ER $\beta$  appears to be highly expressed in normal mammary glands (51, 52, 54). In contrast to ER $\alpha$ , ER $\beta$  expression generally decreases during breast tumorigenesis (51, 52, 375). With respect to the correlation of ER $\beta$  with clinicopathological features, conflicting results have been reported. Such contradictory results may in part be due to how ER $\beta$  expression was determined, being either RNA or protein, the range and specificity of antibodies used for detecting ER $\beta$ , and the scoring systems used to determine ER $\beta$  status (376, 377). Nevertheless, some common themes are emerging from the literature involving the expression of ER $\beta$  protein, such as correlations with ER $\alpha$  and PR expression (51, 54, 378-380), low tumor grade (378, 381), increased response to endocrine therapy (54), and overall better prognosis than ER $\beta$  negative tumors (379, 381). These findings also suggest that ER $\beta$  may function as a tumor suppressor within the breast and that loss of ER $\beta$  may promote breast tumorigenesis. In support of this hypothesis, ER $\beta$  has been shown to inhibit human breast cancer cell proliferation and tumor formation (382-385), possibly by down-regulating components of the cell cycle, including cyclin D1 and c-myc (384, 385). In addition, several lines of evidence suggest that ER $\beta$  negatively regulates ER $\alpha$  activity both *in vitro* (82) and *in vivo* (55), such that it decreases cellular sensitivity to estrogens.

ER $\beta$  variant mRNA and proteins have also been identified in breast cancer cell lines as well as in both normal and neoplastic human breast tissues (72, 375, 378, 386-388). Unlike the wild-type ER, ER $\beta_1$ , evidence suggests that ER $\beta$  variant expression,

particularly ER $\beta_{2(cx)}$ , may increase in tumor versus normal breast tissue (381, 388, 389). Furthermore, higher expression levels of the ER $\beta$  variants as compared to the wild-type ER $\beta$ , ER $\beta_1$ , occur not only in breast cancer cell lines but also in both tumor and normal breast tissue (388). Few studies have examined the correlations between ER $\beta$  variant protein expression and clinicopathological features. Antibodies specific for ER $\beta_2$  have recently been described, but none are currently available for the other ER $\beta$  variants. To date, only three studies have examined ER $\beta_2$  protein expression in human breast tissues. Due to the limitation of sample numbers, it is unclear whether ER $\beta_2$  expression is a predictive factor for endocrine therapy. It has been shown, however, that expression of ER $\beta_2$  correlates well with negative PR status in ER $\alpha$  rich cancer foci (390). Saji et al. (390) also undertook a small study of 18 core needle biopsy samples obtained before preoperative tamoxifen treatment. Their results show that ER $\alpha^+$  tumors that are ER $\beta_2$  and PR negative have a better response to tamoxifen therapy than ER $\beta_2^+ / PR^-$  tumors (390), suggesting that ER $\beta$  variant expression may further define hormonal treatment response in addition to ER $\alpha$ . However, these conclusions need to be evaluated in a larger cohort of patients.

As previously described, the ER does not act alone, but rather is one component in a multi-protein complex that determines the effects of estrogen in a particular tissue or on a particular gene. Co-activators and co-repressors are important in modulating ER activity and their level of expression during breast tumorigenesis may also play an important role in mediating hormonal regulation. In human breast tumors, the ER co-activators SRA, CBP, SRC-1, TIF2 and AIB1 have been shown to be up-regulated as compared to normal breast tissue (366, 391, 392), suggesting that they may have an

important role in breast cancer development and progression. In a study by Anzick et al. (391), AIB1 was found to be over-expressed in four of five ER<sup>+</sup> breast cancer cell lines and amplified in 64% of primary breast tumors as compared to normal mammary epithelium. These studies were later confirmed by several other laboratories (392, 393). Although the level of ER co-activators appears to increase throughout breast tumorigenesis, the expression of ER co-repressors either decrease (366) or do not change (392). Evidence suggests that N-CoR expression may be down-regulated in invasive breast tumors compared to normal breast tissue (366), while REA expression does not change between breast tumor biopsies and adjacent matched normal breast tissue (392, 394). Therefore, the ratio of ER co-activators:co-repressors may be higher in tumor tissue as compared to normal human breast tissue (392) and data from our laboratory demonstrated that the relative expression of SRA and AIB1 to REA increased in ER<sup>+</sup> breast tumors as compared to adjacent normal breast tissue (392). From these results, it was hypothesized that altered relative expression of ER co-activators and co-repressors may dictate the cellular response to estrogen and antiestrogens. Recent data from our laboratory suggests, however, that the relative expression of SRA/AIB1 to REA mRNA is not altered between tamoxifen sensitive and tamoxifen resistant breast tumor biopsies (54).

## **RESEARCH AIM**

Numerous studies have identified physical and functional interactions between the TGF $\beta$  signaling pathway and nuclear steroid receptors including VDR (320, 395), AR (338, 396) and GR (322). With respect to ER, it has been suggested that TGF $\beta$ , via Smad3, enhances ER transcriptional activity in 293T (human embryonic kidney cells) and MCF-7 (human breast cancer) cells; however others have shown that TGF $\beta$  has no effect on ER activity in prostate (DU145) (338), Cos1 (320) and CV-1 (green monkey kidney) (337) cells. Conversely, estrogens have been shown to inhibit TGF $\beta$  signaling in 293T and MCF-7 cells (335). The molecular mechanism through which ER modulates TGF $\beta$  signaling has been thought to involve direct protein:protein interactions between Smads, including Smad3 (335), and ER; a mechanism similar to that described for the other steroid receptors. As inconsistent data exist in the literature with respect to the potential cross-talk between ER and TGF $\beta$ , the goal of this thesis was to characterize the interaction between ER and Smad3 in a mammalian cell environment at the functional and molecular levels.

## **HYPOTHESIS**

The hypothesis of this thesis is that ER modulates the TGF $\beta$  signal transduction pathway in human breast tissue through direct protein:protein interactions with Smad3.

## **OBJECTIVES AND OVERVIEW OF METHODS AND RESULTS**

The specific aims were to:

1. Determine if TGF $\beta$ , through Smad3, affects ER transcriptional activity.
2. Determine if ER affects Smad3 transcriptional activity.
3. Define the specificity of the interaction between Smad3 and ER, both *in vitro* and *in situ*.
4. Determine the expression of Smad3 as it relates to ER status in human breast tumor tissue.

In order to address the hypothesis, we initially sought to determine if a functional interaction between ER and TGF $\beta$  signaling pathways occurs. Specifically, we wanted to determine if Smad3 affects ER transcriptional activity or whether ER affects Smad3 transcriptional activity. Section I of the results addresses this issue. In this section, Cos1 (green monkey kidney; ER-; Smad3-) and MCF-7 (ER+; TGF $\beta$  responsive) cells were transiently transfected with various gene expression and reporter plasmids to determine potential functional interactions between TGF $\beta$  and ER. Cos1 cells are African green monkey kidney cells that have been transformed with SV40 (Similian virus 40) that promotes continual DNA replication and cell division. These cells grow quite rapidly, are easily transfected with plasmids and, most importantly, have been used in several laboratories to examine the interaction between TGF $\beta$  and steroid receptors. These factors make Cos1 cells an ideal cell line to initially address our hypothesis. MCF-7 cells are human breast cancer cells that were derived from a pleural effusion of a patient with metastatic breast cancer. These cells have been used extensively as a cell culture model to study human breast cancer as they are relatively easy to grow and they express a functional ER. The ER reporter plasmids used included ERE-II-luc, consisting of two

repeats of the vitellogenin A<sub>2</sub> ERE cloned upstream of the luciferase expression gene, which represents the classical mechanism of ER action (i.e. ER binds directly to DNA); and the TGF $\beta$ <sub>3</sub>-luc reporter plasmid, containing an estrogen responsive segment from the TGF $\beta$ <sub>3</sub> promoter also cloned upstream to the luciferase expression gene (model of a non-classical mode of ER action). To determine whether ER affects Smad3 transcriptional activity, the TGF $\beta$  responsive promoters p3TP-lux and collagen 7(A1) -524/+92 were used. In the majority of the functional studies involving steroid receptors, the p3TP-lux reporter plasmid was used to measure TGF $\beta$  transcriptional activity as this reporter is one of the standard plasmids utilized in assessing TGF $\beta$  activity. As such, we wanted to use it for this thesis as well. The p3TP-lux reporter plasmid contains three TPA-responsive elements (12-O-tetradecanoylphorbol-13-acetate) of the human collagenase gene that bind Ap-1 transcription factors cloned upstream of a Smad binding element from the plasminogen activator inhibitor 1 gene while the collagen 7(A1) -524/+92 reporter plasmid contains a segment of the human collagen 7(A1) promoter encompassing a Smad binding element.

Having established a functional interaction between ER and TGF $\beta$  in section I, we next moved on to determine the molecular mechanism through which ER modulates TGF $\beta$  signaling in section II. In the hypothesis, we suggest that ER affects TGF $\beta$  signaling by forming direct protein:protein interactions with Smad3. To address this hypothesis, co-immunoprecipitations were performed both *in vitro* and *in situ*. Cos1 cells were transiently transfected with ER $\alpha$  and Smad3 expression vectors in the presence or absence of ligand and the resulting cellular extract was immunoprecipitated with Smad3 or ER specific antibodies. The idea behind these experiments was that Smad3 and ER $\alpha$

would only co-immunoprecipitate in the presence of estradiol in accordance with the observation that only ligand-bound ER affects Smad3 transcriptional activity. However, the results indicate that Smad3 and ER $\alpha$  do not form direct protein:protein interactions in our model system.

Having disproved the hypothesis that ER modulates TGF $\beta$  signaling through direct protein:protein interactions, we sought to explore other possible mechanisms through which activated ER may modulate Smad3 transcriptional activity. These results are also presented in section II. Ap-1 transcription factors, namely c-Jun, have been shown to functionally modulate TGF $\beta$  activity through an interaction with Smad3 (397). As it has been suggested that c-Jun also binds to ER $\alpha$ , we hypothesized that, in the presence of estradiol, ER sequesters c-Jun away from TGF $\beta$  responsive promoters thereby inhibiting TGF $\beta$  transcriptional activity. To address this hypothesis, Cos1 cells were transiently transfected with c-Jun or c-Fos (another Ap-1 transcription factor with which ER does not form direct interactions) expression plasmids with the idea that over-expression of c-Jun, but not c-Fos, would relieve the inhibitory effect of activated ER on TGF $\beta$  activity if indeed it was limiting. Having found this to be likely, we further explored the molecular mechanism by which ER, through c-Jun, may affect the transcriptional activity of TGF $\beta$ . We examined whether ER and c-Jun interact in the presence of estrogen through co-immunoprecipitations in Cos1 cells transiently transfected with expression vectors and whether ER affects c-Jun binding to the p3TP-lux reporter plasmid via electrophoretic mobility shift assays (EMSA) and chromatin immunoprecipitation (ChIP).

In the final section of the results (section III), we have attempted to determine the potential for a functional interaction between ER and Smad3 in human breast cancer. We studied the expression of the relevant factors (i.e. Smad3 and c-Jun) immunohistochemically in human breast tumor tissue microarrays to establish whether these factors could be expressed together in an ER<sup>+</sup> human breast tumor. Having found that Smad3 and c-Jun are co-expressed in ER<sup>+</sup> breast tumors, we next sought to identify an endogenously expressed gene that may be modulated by TGF $\beta$ , Ap-1 and ER in a manner similar to that developed in our model system. The reporter plasmids that we utilized in section I of the results were artificially constructed and while their use in determining the presence of a functional interaction between ER and TGF $\beta$  signaling plasmids is informative, whether or not this observation occurs on a gene whose protein product is expressed endogenously in human breast cells is unknown. We initially identified two genes whose promoter region contains putative Ap-1 and Smad binding sites and whose expression had been previously shown to be regulated by antiestrogens in a manner similar to that observed in the functional studies described in section I. MCF-7 cells were treated with antiestrogens for various time periods and RT-PCR and/or western blot analysis were performed to determine whether antiestrogen treatment affected the mRNA or protein expression of these two genes.

## **RELEVANCE TO BREAST CANCER**

Tamoxifen has been the mainstay of hormonal therapy in both early and advanced breast cancer patients for approximately 30 years. However, approximately 50% of patients with the disease do not respond to first-line treatment with tamoxifen (31). Furthermore, almost all patients with metastatic disease and approximately 40% of the patients that receive tamoxifen as adjuvant therapy experience tumor relapse and die from their disease. These findings strongly suggest that mechanisms of *de novo* or acquired resistance to tamoxifen occur in breast cancer patients and that this phenomenon might largely affect the efficacy of this treatment. Amongst all the different mechanisms that have been hypothesized to be involved in the resistance of breast cancer cells to hormonal therapy, we were particularly interested in the interaction between ER and growth factors signaling pathways, specifically TGF $\beta$ . A more complete understanding of the molecular biology of ER and its interactions with other growth factor stimulatory and/or inhibitory pathways during both breast tumorigenesis and breast cancer progression may aid in the future design of new and/or complementary prevention and treatment strategies.

## **MATERIALS and METHODS**

### **Materials**

Dulbecco's minimal essential medium (DMEM) and phenol red free DMEM (PRF-DMEM) were purchased from GIBCO/BRL (Burlington, Ontario). Penicillin-streptomycin (10,000 units/ml) and L-glutamine (200mM) were purchased from GIBCO/BRL (Burlington, Ontario). Fetal bovine serum (FBS) and activated charcoal were purchased from Sigma Chemical Company (Oakville, Ontario) and dextran T70 from Amersham/Pharmacia (Mississauga, Ontario). Tissue culture flasks and cell culture dishes were from Corning (New York, New York).

The tetracycline-analog doxycycline, 4OH-tamoxifen and 17 $\beta$ -estradiol were purchased from Sigma Chemical Company (Oakville, Ontario). Isoton™ was from Beckman Coulter Incorporated (Mississauga, Ontario). Hygromycin B was obtained from Clontech (Palo Alto, California) and G418 was from Invitrogen Canada (Burlington, Ontario). LY117018 was a gift from Lilly Laboratories (Indianapolis, Indiana) and ICI 182,780 was a gift from Dr. A.E. Wakeling (Zeneca Pharmaceuticals, Macclesfield, England). Effectene transfection reagent was purchased from Qiagen (Mississauga, Ontario).  $\gamma$ -[P<sup>32</sup>]-ATP and [S<sup>35</sup>]-methionine were from Perkin Elmer (Boston, Massachusetts). Dithiobis[succinimidylpropionate] (DSP) was from Pierce (Rockford, IL).

The ER $\alpha$  (NCL-ER-6F11, mouse monoclonal)(recognizes full-length ER $\alpha$ ) and c-Jun (NCL-c-Jun, mouse monoclonal) antibodies were purchased from NovoCastra Laboratories (Newcastle, United Kingdom). Anti-Xpress (R910-25, mouse monoclonal) and anti-His G (R940-25, mouse monoclonal) antibodies were from Invitrogen

(Burlington, Ontario). Rabbit polyclonal antibodies to Smad3 were from Upstate Biotechnology (06-920) (Lake Placid, New York) and Zymed Laboratories (51-1500) (San Francisco, California). A tubulin antibody (Clone DM1A) (MS-581-P0, mouse monoclonal), used as an internal protein loading control, was from NeoMarkers Inc. (Fremont, California) and an anti- $\beta$ -galactosidase antibody (Z378A, mouse monoclonal) was from Promega (Madison, Wisconsin). The insulin receptor (insulin R- $\beta$ , C-19) (sc-711, rabbit polyclonal), ER $\alpha$  (HC-20) (sc-543, rabbit polyclonal)(recognizes C-terminal region of ER $\alpha$ ), c-Jun (N) (sc-45, rabbit polyclonal)(recognizes N-terminal region of c-Jun) and phosphorylated c-Jun antibodies (KM-1) (sc-822, mouse monoclonal), which recognizes c-Jun phosphorylation at serine 63, was from Santa Cruz Biotechnology (Santa Cruz, California). AIB1 (611104, mouse monoclonal) was from BD Transduction Laboratories (Oakville, Ontario). Horseradish peroxidase conjugated goat anti-mouse and goat anti-rabbit were from Jackson ImmunoResearch Laboratories, Inc. (West Grove, Pennsylvania) and Bio-rad (Hercules, California), respectively. Supersignal West Dura western blotting kits were purchased from Pierce (Rockford, Illinois). Prestained molecular weight protein markers were from Bio-rad (Hercules, California). Complete<sup>®</sup> Protease Inhibitor mixture tablets were from Roche (Laval, Quebec).

CAPS (3-[cyclohexylamino]-1-propanesulfonic acid), ONPG (o-nitrophenyl  $\beta$ -D-galacto-pyranoside), Tween 20 (polyoxyethylene-sorbitan monolaurate), bovine serum albumin (BSA), PIPES (1,4-piperazinediethanesulfonic acid) and Triton X-100 (octyl phenoxy polyethoxyethanol) were all from Sigma Chemical Company (Oakville, Ontario). I-block was from Tropix (Foster City, California). Nitrocellulose (NitroPlus, 0.45 micron) paper was purchased from Micron Separations Incorporated (Westborough,

Massachusetts). Protein G sepharose beads were from Amersham International (Baie d'Urfe, Quebec). EDTA (disodium ehtylenediamine tetraacetate disodium salt) was from Fisher Scientific Company (Nepean, Ontario). Rabbit reticulolysate *in vitro* transcription/translation kits (TnT), firefly luciferase reagent and Dual Luciferase<sup>®</sup> Reporter Assay System were from Promega (Madison, Wisconsin). Micro BCA protein assay kits were from Pierce (Rockford, Illinois), Bradford protein assay reagent was from Bio-rad (Hercules, California) and TRIzol reagent was from GIBCO/BRL (Burlington, ON).

Taq DNA polymerase, M-MLV reverse transcriptase, RNA inhibitor (RNAsin) and random hexamers were from Invitrogen (Burlington, Ontario). dATP, dTTP, dGTP and dCTP were from Promega (Madison, Wisconsin). Custom primers were ordered from Invitrogen (Burlington, Ontario).

ERE-II-Luc containing two vitellogenin A2 (-333/-288) EREs upstream of a luciferase reporter was a gift from Dr. P. Webb (University of California, San Francisco, California) and the TGF $\beta_3$ -luc reporter, containing nucleotides -2306/-1848 of the human TGF $\beta_3$  promoter, was a gift from Dr. C. Labrie (Laval University, Quebec). The pCH110 and pcDNA3- $\beta$ -gal (constitutive  $\beta$ -galactosidase expression vectors) were from Amersham/Pharmacia (Mississauga, Ontario). The renilla luciferase (pRL-tk-luc) internal control plasmid for dual luciferase assays was from Prómega (Madison, Wisconsin). pGL3-Col7(A1)-524/+92 and pGL3-Col7(A1)-454/+92 luciferase reporter plasmids were gifts from Dr. A. Mauviel (Institut de Recherche sur la Peau, Hopital Saint-Louis, Paris, France). p3TP-lux reporter was a gift from Dr. J. Massague (Memorial Sloan-Kettering Cancer Center, New York, New York). pCMV5B-Flag-

Smad3 expression plasmid was from Dr. L. Attisano (University of Toronto, Toronto, Ontario). The pcDNA3.1-Flag-Smad3 expression plasmid was constructed by subcloning the KpnI/XbaI Smad3 fragment from pCMV5B-Flag-Smad3 into a KpnI/XbaI digested pcDNA3.1 (Invitrogen). pcDNA4-His/Xpress ER $\beta_1$ , ER $\beta_2$ , and ER $\beta_5$  expression plasmids were constructed by Dr. B. Peng by directly cloning an ER $\beta$  PCR product directly into pcDNA4-His/Xpress TOPO (Invitrogen) (139). pcDNA3.1-ER $\alpha$  (constructed by Mr. Helmut Dotzlaw) and pcDNA4-His/Xpress-ER $\alpha$  (constructed by Dr. Baocheng Peng) were constructed by cloning a full length ER $\alpha$  PCR product into the EcoRI site of pcDNA3.1 (Invitrogen) or pcDNA4-His/Xpress (Invitrogen), respectively. Plasmids encoding the Ap-1 transcription factors c-Jun (pRSV-cJun) and c-Fos (pRSV-cFos) were from Dr. Michael Karin (University of California, San Diego, CA). SRC-1 (pCR3.1-hSRC-1a) and AIB1 (pCMX-F Rac3) expression plasmids were a gift from Dr. Tom Spencer (Baylor College, Houston, Texas) and Dr. Don Chen (University of Massachusetts, Massachusetts), respectively. All constructs were confirmed by sequencing.

Ap-1 oligonucleotide was produced by University of Calgary (Calgary, Alberta). Bio-spin 6 columns were from Bio-rad (Hercules, California) and poly dI/dC was from Amersham International (Baie d'Urfe, Quebec). T4 polynucleotide kinase was from Roche (Laval, Quebec). IGEPAL (octylphenoxy polyethoxyethanol) was from Sigma Chemical Company (Oakville, Ontario).

## **Methods**

### **i. Cell Culture**

All cells were routinely grown in 75cm<sup>2</sup> flasks in a humidified incubator at 37°C containing a 5% CO<sub>2</sub> atmosphere. Cos1 cells were obtained from the ATCC (Manassas, VA) (African green monkey kidney cells) and routinely cultured in PRF-DMEM containing 10% v/v twice charcoal dextran stripped FBS (CS), 0.3% w/v glucose, 2mM L-glutamine and 100 units/ml penicillin-streptomycin (10% CS). Cells were passaged at 80-90% confluence using Earle's EDTA solution (5.3mM KCl, 117mM NaCl, 26mM NaHCO<sub>3</sub>, 1mM NaH<sub>2</sub>PO<sub>4</sub>, 5.6mM D-glucose and 1mM EDTA). T5 cells, previously called T47D5, were originally thought to be a T47D subline, however, DNA restriction fragment length polymorphism analysis showed that they were a MCF-7 subline (398). MCF-7 (originally from Dr. William McGuire's laboratory in San Antonio, Texas) and T5 cells were cultured in DMEM containing 10nM estradiol (E<sub>2</sub>), 5% v/v FBS, 0.3% w/v glucose, 2mM L-glutamine and 100 units/ml (U/ml) penicillin-streptomycin (5% CM). MCF-7 Clone 11 (399) and MCF-7 Clone 47 cells (400) which over-express ERα or ERβ in the presence of doxycycline, were routinely cultured in 5% CM plus 10nM E<sub>2</sub>, 500ug/ml G418 and 400ug/ml hygromycin. Cells were passaged at 70-80% confluence using Earle's EDTA solution.

### **ii. Transient Transfections**

#### **a) Cos1 Cells**

Cos1 cells growing in 150cm<sup>2</sup> flasks were seeded in either 100mm dishes at 1x10<sup>6</sup> cells/dish or in 6 well culture plates at 5x10<sup>5</sup> cells/well in 5% CS the day prior to transfection. The following day, medium was changed to fresh 5% CS containing the

drug of appropriate concentration or vehicle (ethanol) alone. Cells were transiently transfected using the Effectene Transfection Reagent (Qiagen) according to manufacturer's instructions. For each transfection, the DNA/enhancer ratio was kept at 1/8 while the DNA/effectene ratio was kept at 1/15. Forty-eight h post-transfection, media was aspirated off and cells harvested. For reporter gene assays, transfection efficiency was determined by co-transfection of either pCH110 ( $\beta$ -galactosidase expression vector) for  $\beta$ -galactosidase activity (401) or by co-transfection with pRL-tk-luc for renilla luciferase activity. Samples to be analyzed by western blotting were harvested in 100ul of 95°C Joel lysis buffer (0.12M Tris-Cl, pH 6.8, 4% w/v SDS, 20% v/v glycerol, 0.2M DTT) per well of a 6 well plate, collected in a 1.5ml centrifuge tube, vigorously shaken at 95°C for 20 min and stored at -20°C (402).

b) MCF-7 Cells

Human MCF-7 breast cancer cells were routinely grown in 75cm<sup>2</sup> flasks in 5% CM + 10nM E<sub>2</sub>. To obtain estrogen depleted cells, media was changed to PRF-DMEM supplemented with 5% CS (as phenol red may act as a weak estrogen in tissue culture(403)) once cells obtained 30% confluency. Media was replenished every 2 days and cells were grown for 5 days. Cells were seeded at 5x10<sup>5</sup> cells/100mm dish one day prior to transfection. Cells were transiently transfected using the calcium phosphate precipitation method (404). Cells were transfected with 3-5ug reporter plasmid, 2-8ug pCMV5B-Flag-Smad3, 1ug pRL-tk-luc and 5ug pcDNA3.1-ER $\alpha$ , unless otherwise stated. Empty pcDNA3.1 was used to ensure equal molar concentrations of plasmid between samples. Each sample was brought up in 1ml BES-buffered saline (25mM BES, pH 6.96, 140mM NaCl, 0.75mM Na<sub>2</sub>HPO<sub>4</sub>) containing 125mM CaCl<sub>2</sub>, mixed for 10 sec

and incubated at room temperature for 15 min. Fresh PRF-DMEM supplemented with 5% CS was added. The transfection mixture was added drop-wise to plates while being gently swirled and incubated at 37°C and 5% CO<sub>2</sub> overnight. Media was removed and cells were subjected to a 3 min glycerol shock with a 20% v/v glycerol/5% CS solution. Plates were washed 3 times with sterile Isoton™ (Beckman) and new 5% CS media containing vehicle, 10nM E<sub>2</sub>, 100nM 4-hydroxytamoxifen (4OH-Tam) or 500nM ICI 182,780 was added, unless otherwise stated. Forty-eight h later, media was removed and cells were washed with 5ml Isoton™ (Beckman). Samples were harvested in 1ml of 1x Passive Lysis Buffer (Promega), as per manufacturer's instructions, collected in 1.5ml tubes and frozen at -80°C until assayed.

Transfection of ERα and ERβ<sub>1</sub> over-expressing cells was performed as described above with minor modifications. MCF-7 Clone 11 (ERα inducible clone) and MCF-7 Clone 47 (ERβ inducible clone) cells were routinely cultured in 5% CM plus 10nM E<sub>2</sub>, 500ug/ml G418 and 400ug/ml hygromycin B. Five days prior to use, media was changed to 10% CS to obtain estrogen depleted conditions. Cells were set-up at 5x10<sup>5</sup> cells/100mm dish one day prior to transfection in 5% CS containing 2ug/ml doxycycline. The following day, media was changed (5% CS containing 2ug/ml doxycycline) and cells were transiently transfected using the calcium phosphate precipitation method (404). Twenty-four h post-transfection, cells were subjected to a 5 min glycerol shock (20% glycerol v/v in 5% CS) and new media containing vehicle, 10nM E<sub>2</sub>, 100nM 4OH-Tam or 500nM ICI 182,780 was added along with 2ug/ml doxycycline. For dual luciferase assays, samples were harvested in 1ml of 1x Passive Lysis Buffer (Promega). Samples to be used for western blotting were harvested in 300ul of Joel lysis buffer, collected in a

1.5ml centrifuge tube, vigorously shaken at 95°C for 20 min and stored at -20°C until analyzed by SDS-PAGE (402).

iii. *Luciferase and β-Galactosidase Activity*

Cos1 cells transiently transfected with firefly luciferase and β-galacosidase reporter plasmids were scraped into 1ml 100mM K<sub>2</sub>HPO<sub>4</sub> pH 7.8, centrifuged briefly at 10,000 x g and supernatant removed. Cell pellets were resuspended in 100ul of 100mM K<sub>2</sub>HPO<sub>4</sub>, pH 7.8 containing 1mM DTT and cell lysates obtained by 3 cycles of freezing in a dry ice/ethanol bath and thawing at 37°C. Samples were centrifuged at 12,000 x g for 5 min at 4°C and the supernatant was placed in a fresh tube. A 10ul aliquot was used to measure β-galactosidase activity using a standard protocol (401) and a 20ul aliquot was used to determine luciferase activity. Firefly luciferase activity was determined as per manufacturers instructions (Promega) using a plate reading luminometer (Molecular Devices, Sunnyvale, California). To each sample, 100ul of Luciferase Assay Reagent (Promega) was injected into each well and readings were taken every second for 10 sec.

MCF-7 cells transiently transfected with both renilla and firefly reporter plasmids were harvested in 1ml 1x Passive Lysis Buffer (Promega). Samples were placed in 1.5ml tubes and frozen at -80°C until assayed. Samples were thawed at room temperature, mixed briefly and centrifuged at 10,000 x g for 5min. A 20ul aliquot of the supernatant was placed in a well of a 96 well assay plate. Renilla and firefly (dual) luciferase activities were determined as per manufacturers instructions (Dual Luciferase® Reporter Assay System, Promega) using a plate reading luminometer (Molecular Devices, Sunnyvale, California). Dual reporter assays were performed as follows: i) 100ul of Luciferase Assay Reagent II was injected into well, ii) readings for firefly luciferase

activity were taken every second for 10 sec., iii) 100ul of Stop & Glo® Reagent was injected into well and iv) readings for renilla luciferase activity was taken every second for 10 sec.

**iv. In vitro Transcription and Translation**

*In vitro* transcription/translation (TnT) reactions were performed using a coupled transcription/translation system (TnT coupled Reticulocyte Lysate System, Promega). Reactions were performed according to the manufacturer's instructions.

**v. Immunoprecipitation**

Cos1 transiently transfected cells were scrapped into either: i) 1ml ice-cold Triton X-100 immunoprecipitation (IP) buffer containing 1% v/v Triton X-100, 50mM Tris-HCl pH 7.4, 300mM NaCl, 5mM EDTA and Complete Protease Inhibitor (Roche) tablets or ii) 1ml ice-cold NP-40 IP buffer containing 0.5% v/v NP-40, 50mM Tris-HCl pH 8.0, 150mM NaCl, 1mM EDTA and Complete Protease Inhibitor (Roche) tablets. Samples were incubated on ice for 20 min. Cells suspended in NP-40 IP buffer were sonicated for 5 sets of 10 sec each with cooling on ice between sonications. Samples were centrifuged at 12,000 x g for 10 min at 4°C. The supernatant was transferred to a fresh tube containing 50ul of a 1/1 slurry of protein G sepharose beads (Amersham) in Triton X-100 or NP-40 IP buffer and mixed for 1 h at 4°C to pre-clear the supernatant of any non-specific binding proteins. Beads were pelleted by centrifugation at 12,000 x g and 3-5ug of antibody was added to the supernatant. Tubes were incubated overnight at 4°C with rocking. To each sample, 50ul of a 1/1 slurry of protein G sepharose beads (Amersham) in Triton X-100 or NP-40 IP buffer was added and incubated at 4°C for 3 h. Samples

were washed 3 times with 1ml Triton X-100 or NP-40 IP buffer. Final pellets containing beads conjugated to antibody were resuspended in 50ul 5x sample buffer (5% v/v glycerol, 20% v/v 2-β-mercaptoethanol, 0.004% w/v bromophenol blue, 0.8% w/v SDS, 0.125M Tris-HCl pH 6.8). Samples were boiled for 4 min to dissociate antibody from protein G sepharose (Amersham) beads, briefly centrifuged and analyzed on a 10% SDS-PAGE gel (see immunodetection by western blotting).

vi. **DSP Cross-Linking and Immunoprecipitation**

Cos1 cells were seeded at  $5 \times 10^5$  cells/100mm dish and transiently transfected as described previously in 5% CS. Forty-eight h post-transfection, proteins were cross-linked for 2 h at 4°C with 1.5mM DSP dissolved in DMSO. To stop the cross-linking reaction, 20mM Tris-HCl was added and incubated for 15 min. Cells were washed twice with ice cold phosphate buffered saline (PBS; 0.1M phosphate, 0.15M NaCl, pH 7.2) and harvested in 0.5 ml ice cold IP buffer (50mM Tris-HCl pH 8.0, 150mM NaCl, 0.5% IGEPAL, 1mM EDTA, 1mM PMSF, 10mM NaF, 1mM Na<sub>3</sub>VO<sub>4</sub>, 25mM β-glycerophosphate and Complete Protease Inhibitor cocktail), pooling cells from 2 dishes of each treatment. Samples were incubated on ice for 20 min, mixed with a 21 gauge needle, sonicated 8 times at 10 sec each and centrifuged at 10,000 x g for 10 min at 4°C. To preclear the lysate, 50ul of a 1/1 protein G sepharose bead slurry in IP buffer was added and incubated at 4°C for 30 min with agitation. Beads were pelleted by a brief centrifugation at 10,000 x g and the resulting supernatant was placed into a new tube. The supernatant was divided into 2 equal aliquots, one of which was incubated with 3ug of an ERα specific antibody (rabbit polyclonal; Santa Cruz Biotechnology) and one which was incubated with 3ug of the insulin receptor antibody (rabbit polyclonal; Santa

Cruz Biotechnogology). Upon addition of antibody, samples were left overnight at 4°C with agitation. Protein G sepharose beads (50ul of a 1/1 slurry in IP buffer) were added and samples incubated at 4°C for 3 h. Beads were spun down briefly at 10,000 x g and washed 3 times with 1 ml IP buffer. To each sample, 50ul of 5x sample buffer (5% v/v glycerol, 20% v/v 2-β-mercaptoethanol, 0.004% w/v bromophenol blue, 0.8% w/v SDS, 0.125M Tris-HCl pH 6.8) was added and samples were boiled for 5 min, briefly centrifuged and analyzed on a 10% SDS-PAGE gel (see immunodetection by western blotting described below).

vii. Immunodetection by Western Blotting

Samples to be used for western blotting were thawed at 37°C and centrifuged briefly at 10,000 x g. Aliquots of the extracts were analyzed using a 10% SDS-PAGE with a 4% stacking gel at 200V for 45 min at room temperature according to the Laemmli method (405). Gels were equilibrated for 5 min at room temperature in ice cold CAPS transfer buffer (10mM CAPS pH 11, 20% v/v methanol) and transferred to nitrocellulose for 1.5 h at 120V and 4°C. Membranes were baked at 65°C for 20 min and blocked for 6 h at room temperature with 0.2% w/v I-block/TBS. Membranes were incubated with: ERα specific antibody (mouse monoclonal) (NovoCastra), Smad3 antibody (rabbit polyclonal) (Upstate Biotechnology), anti-xpress (mouse monoclonal) (Invitrogen) or anti-HisG (mouse monoclonal) (Invitrogen) antibodies at a dilution of 1/1000 in 0.2% w/v I-block/TBS containing 0.5% v/v Tween 20 (TBS-T) overnight at 4°C and subsequently washed 6 times for 5 min each in TBS-T. For AIB-1 immunodetection, samples were run on a 7.5% SDS-PAGE with a 4% stacking gel and membranes were incubated with a 1/250 dilution of mouse anti-AIB-1 (BD Biosciences) overnight at 4°C.

Membranes were incubated with the appropriate peroxidase-conjugated secondary antibody (see Materials) for 1 h at room temperature at a dilution of 1/5000 in 0.2% w/v I-block/TBS-T and washed 6 times for 5 min each in TBS-T. Immunodetection was carried out using the Supersignal West Dura blotting kit (Pierce) according to the manufacturer's instructions and visualized with the Chemidoc System (Bio-rad). The membranes were stripped (0.2M glycine, 0.1% w/v SDS, 1% v/v Tween-20 pH 2.2) for 1 h at room temperature and blocked for 1 h at room temperature with 0.2% w/v I-block/TBS-T. The membranes were probed with a 1/5000 dilution of mouse anti-tubulin (Neomarkers) in 0.2% w/v I-block/TBS-T overnight at 4°C and washed 5 times for 5 min each in TBS-T. Membranes were incubated for 1 h at room temperature with a 1/10000 dilution of a goat anti-mouse horseradish-peroxidase conjugated secondary antibody (Jackson Laboratories) and washed 5 times for 5 min each. Immunodetection was carried out using the Supersignal West Dura blotting kit (Pierce) and visualized with the Chemidoc system (Bio-rad).

viii. **Protein Assay**

Protein assays were performed using either the BCA (Micro BCA Protein Assay Reagent kit, Pierce) or Bradford method (Bradford protein assay reagent, Bio-rad) as per manufacturer's instructions.

ix. **RT-PCR Reactions**

Total RNA was extracted from cells using TRIzol reagent (GIBCO/BRL) as per manufacturer's instructions. Reverse transcription was performed using 1ug of RNA in a final volume of 30ul. RNA was heated to 65°C for 5 min to denature secondary structure

and 1ug of RNA was reverse transcribed in a final volume of 30ul. Each reaction contained 50mM Tris-HCl (pH 8.3), 40mM KCl, 6mM MgCl<sub>2</sub>, 0.3U/ul RNAsin, 10mM DTT, 5ng/ul random hexamers, 10U/ul M-MLV and 2mM each of deoxyadenosine triphosphate (dATP), deoxythymidine triphosphate (dTTP), deoxyguanosine triphosphate (dGTP) and deoxycytidine triphosphate (dCTP). Samples were left at room temperature for 5 min to allow primers to anneal and incubated at 37°C for 1 h. The reaction was stopped by boiling for 3 min and the resulting cDNA was stored at -20°C until further use.

The primers used for PCR consisted of TGFβ<sub>2</sub>-U (5'-CGG AGG TGA TTT CCA TCT ACA ACA G-3'; sense, located in TGFβ<sub>2</sub> 661-685) and TGFβ<sub>2</sub>-L (5'-AGG CAC TCT GGC TTT TGG GTT C-3'; antisense, located in TGFβ<sub>2</sub> 1016-1037). Nucleotide positions given correspond to sequences of the human TGFβ<sub>2</sub> mRNA (accession number M19154). Each PCR reaction contained 20mM Tris-HCl (pH 8.4), 50mM KCl, 1.5mM MgCl<sub>2</sub>, 0.2mM dATP, 0.2mM dTTP, 0.2mM dGTP, 0.2mM dCTP, 4ng/ul of each primer and 0.02U/ul Taq DNA polymerase (Invitrogen). PCR amplifications consisted of 35 cycles with each cycle consisting of 30 sec at 95°C, 30 sec at 60°C and 30 sec at 72°C. Primers used for AIB1 PCR consisted of AIB1-U (5'-ATA CTT GCT GGA TGG TGG ACT-3'; sense, located in AIB1 110-130) and AIB1-L (5'-TCC TTG CTC TTT TAT TTG ACG-3'; antisense, located in AIB1 438-458) with nucleotide positions corresponding to the human AIB1 gene (accession number AF012108). Each PCR reaction contained 20mM Tris-HCl (pH 8.4), 50mM KCl, 1.5mM MgCl<sub>2</sub>, 0.2mM dATP, 0.2mM dTTP, 0.2mM dGTP, 0.2mM dCTP, 4ng/ul of each primer and 0.02U/ul Taq DNA polymerase (Invitrogen) and PCR amplifications consisted of 30 cycles of 30 sec at

95°C, 30 sec at 55°C and 30 sec at 72°C. Amplification of the ubiquitously expressed glyceraldehyde-3-phosphate dehydrogenase (GAPDH) was performed in parallel. The primers used for PCR consisted of GAP-U (5'-ACC CAC TCC TCC ACC TTT G-3'; sense, located in GAPDH 971-989) and GAP-L (5'- CTC TTG TGC TCT TGC TGG G-3'; antisense, located in GAPDH 1148-1130) with nucleotide positions corresponding to the human GAPDH gene (accession number AF261085). Each PCR reaction contained 20mM Tris-HCl (pH 8.4), 50mM KCl, 1.5mM MgCl<sub>2</sub>, 0.2mM dATP, 0.2mM dTTP, 0.2mM dGTP, 0.2mM dCTP, 4ng/ul of each primer and 0.02U/ul Taq DNA polymerase (Invitrogen). PCR amplifications consisted of 30 cycles of 30 sec at 95°C, 30 sec at 60°C and 30 sec at 72°C followed by 7 min at 72°C. PCR products were resolved by electrophoresis on a 1.2% agarose gel containing 5ug ethidium bromide. Gels were visualized with the GelDoc 2000/CHEMIDOC system (Bio-rad). Quantitative densitometry was performed using the Quantity One Software (version 4.2, Bio-rad). Three independent PCR reactions for TGFβ<sub>2</sub>, AIB1 and GAPDH were performed for each experiment.

x. Electrophoretic Mobility Shift Assay

Nuclear extracts of Cos1 cells were prepared as described previously by de Moissac et al. (406) with modifications. Cos1 cells were transiently transfected in 100mm dishes with 1ug pCMV5B-Flag-Smad3 and 1ug pcDNA3.1-ERα in the presence or absence of 10nM E<sub>2</sub> in CS5% as described above. Forty-eight h post-transfection, media was removed and cells were gently washed with 2 ml Isoton™ (Beckman). Cells were scrapped with a rubber spatula into 5 ml Isoton™ (Beckman), pooling samples from 3 dishes together. Samples were centrifuged briefly at 3,000 x g and the resulting cell

pellet was resuspended in 200ul buffer A (10mM Hepes, pH 7.9, 60mM KCl, 1.0mM EDTA, 1.0mM dithiotreitol, 0.3% v/v IGEPAL) containing 1 tablet/10ml Complete Protease Inhibitor (Roche). Cells were allowed to swell on ice for 15 min and centrifuged at 1,000 x g for 5 min. Supernatant was removed and stored as the cytosolic fraction at -80°C. The remaining pellet was resuspended in 50ul buffer C (200mM Hepes, pH 7.9, 0.4M NaCl, 1.0mM EDTA, 1.0mM EGTA, 1mM dithiothreitol, 1mM phenylmethylsulfonyl fluoride) and shaken vigorously at 4°C for 15 min. Nuclear extract was the supernatant fraction obtained following centrifugation for 5 min at 10,000 x g. Aliquots of the extract were stored at -80°C. Protein concentration was determined using the Bradford method (Bio-rad) as described above.

DNA binding reactions were performed using the Ap1 site from the TGF $\beta$  responsive reporter, p3TP-lux, and consisted of 5'- ATG AGT CAG ACA CCT CTG GCT GTC TGG AAG GG -3' sense and 5'-CCC TTC CAG ACA GCC AGA GGT GTC TGA CTC AT -3' antisense. Oligonucleotides were resuspended in annealing buffer (10mM Tris-HCl pH 7.5, 50mM NaCl and 1mM EDTA) to a concentration of 25pmoles/ul. Equal volumes of sense and antisense oligonucleotides were mixed in a 1.5ml tube and placed in a 95°C heat block for 4 min. Samples were slowly cooled to room temperature yielding a double stranded (ds) oligonucleotide. Oligonucleotides were P<sup>32</sup> end-radiolabelled with  $\gamma$ -ATP<sup>32</sup> in a final volume of 50ul. The reaction consisted of 20ng ds-oligonucleotide, 1U/ul T4 polynucleotide kinase, 50mM Tris-HCl, 10mM MgCl<sub>2</sub>, 100uM EDTA, 5mM DTT, 100uM spermidine pH 8.2 and 2.694MBq  $\gamma$ -ATP<sup>32</sup>. Samples were incubated at 37°C for 1 h and the reaction was stopped by heating at 65°C for 15 min. Radiolabelled oligonucleotides were purified from the reaction

mixture by centrifuging samples through a Bio-spin 6 column (Bio-rad) at 2250 x g for 5 min.

A gel shift mix consisting of 10ug bovine serum albumin, 2.4ug poly dI/dC, 20mM HEPES, pH 7.9, 1% v/v IGEPAL, 5% v/v glycerol, 1mM EDTA and 5mM dithiothreitol was added to 5 - 20ug Cos1 nuclear extract. Samples were incubated on ice for 15 min and 0.8ng of a P<sup>32</sup>-radiolabelled duplex oligonucleotide probe was added. This order of probe to sample has previously been shown to reduce non-specific binding between sample and probe (407). To test for the specificity of the protein-DNA complexes formed, competition studies with 25 – 100 times molar excess of unlabelled oligonucleotide were performed. Unlabelled ds-oligonucleotide was added to the P<sup>32</sup>-radiolabelled duplex oligonucleotide such that the oligonucleotides were added to the samples simultaneously. Reactions were performed on ice for 30 min. To determine which proteins formed complexes with the ds-oligonucleotide probe, antibodies for c-Jun or ER $\alpha$  were added to the gel shift mix prior to being added to the samples. A 5% polyacrylamide gel in 1 x Tris-buffered EDTA (TBE), pH 8.0 was prepared and pre-run for 1 h at 180 V using 1x TBE as running buffer. Nuclear-protein complexes were added and the gel was run for 4 h at 180 V. Gels were dried for 2 h at 80°C on a gel dryer (Bio-rad) and visualized by autoradiography. In addition, gels were exposed to a Phosphorimager screen (Bio-rad) for 24 h, visualized using Storm (Amersham/Pharmacia) and densitometry on specific bands was performed using Quantity One (Bio-rad).

**xi. Chromatin Immunoprecipitation**

Cos1 cells were transiently transfected in 100mm dishes as described previously in this thesis. Thirty-six h post-transfection, media was removed and 8 ml of cold 1% formaldehyde in PBS was added (to cross-link protein and DNA molecules together) and incubated for 10 min at 4°C. To stop further cross-linking, 8 ml of 0.125M glycine solution in PBS was added for 10 min at 4°C. Formaldehyde and glycine were gently removed with suction and cells were harvested into 0.5 ml ice cold PBS, pooling 2 dishes for each treatment. Cells were pelleted by brief centrifugation at 10,000 x g and washed twice with 1ml cold PBS. PBS was gently removed from the tubes by suction and samples were stored at -80°C until further use.

To each sample, 500ul of lysis buffer (5mM 1,4-piperazinediethanesulfonic acid, pH 8.0, 85mM KCl, 0.5% NP-40) containing protease and phosphatase inhibitors (1ug/ml leupeptin, 1ug/ml aprotinin, 1mM PMSF, 10mM NaF) was added. Samples were incubated for 10 min on ice and centrifuged at 13,000 x g for 2 min to pellet nuclei. Nuclear extracts were resuspended in 500ul nuclear lysis buffer (50mM Tris-HCl pH 8.1, 10mM EDTA, 1% SDS) containing protease and phosphate inhibitors (1ug/ml leupeptin, 1ug/ml aprotinin, 1mM PMSF, 10mM NaF) and replicate samples pooled. Extracts were incubated on ice for 10 min, sonicated 3 times for 15 sec each and centrifuged at 13,000 x g for 5 min. Supernatant was transferred to a fresh tube and was diluted with 9 ml ChIP dilution buffer (0.01% SDS, 1.1% Triton X-100, 1.2mM EDTA, 16.7mM Tris, pH 8.1, 167mM NaCl). A 50ul aliquot was taken representing the total amount of DNA sequences available for PCR amplification prior to ChIP (Input). Samples were divided into 2-3 equal volumes (3 - 4.5ml) and 3ug of either an ER $\alpha$  (HC-20) (sc-543; Santa Cruz

Biotechnology), c-Jun (N) (sc-45; Santa Cruz Biotechnology) or insulin receptor (c-19) (sc-711; Santa Cruz Biotechnology) antibody was added. Samples were incubated overnight at 4°C with rotation after which 50ul of a 1/1 slurry of protein G sepharose beads in ChIP dilution buffer were added for 3 h at 4°C. Beads were pelleted by brief centrifugation at 13,000 x g and washed 3 times with 1ml ChIP dilution buffer. To degrade any RNA present in the samples, 100ul of a DNase free RNase A solution (100ug/ml) was added and incubated for 30 min at 37°C. Proteins were digested by addition of 100ul proteinase K solution (500ug/ml proteinase K, 0.5% SDS, 10mM Tris, 1mM EDTA, pH 8.0) for 60 min at 55°C. Samples were incubated overnight at 65°C to reverse the formaldehyde cross-links.

DNA was extracted from samples by phenol/chloroform precipitation. Briefly, 3 ml of phenol/chloroform/isoamyl alcohol (25/24/1) (v/v) was added. Samples were mixed vigorously for 10 sec and centrifuged at 13,000 x g for 5 min to enact phase separation. The upper, aqueous layer was carefully removed and placed in a new tube, avoiding proteins contained within the phenol/chloroform interface. To the aqueous phase, 600ul of 3M sodium acetate was added, mixed 10 sec and 12 ml of ice cold 100% ethanol was added and mixed. Samples were incubated on ice for 5 min, centrifuged at 13,000 x g for 5 min and the resulting DNA pellets were washed twice with 1ml 70% (v/v) ethanol to remove any residual salts. Supernatant was discarded and the pellet was allowed to air dry for 15 min. DNA pellets were dissolved in 30ul TE buffer prior to PCR reaction.

Specific DNA fragments isolated through ChIP were analyzed by PCR. For input DNA, 1ul of DNA was amplified while 5ul were amplified from ChIP extracts. Primers

for the PCR reactions were: p3TP-lux-U 5'-TGG AAG GGA TGA GTC AGA CAC C-3' and p3TP-lux-L 5'-CCA GGA ACC AGG GCG TAT CTC-3'. Each PCR reaction contained 20mM Tris-HCl (pH 8.4), 50mM KCl, 1.5mM MgCl<sub>2</sub>, 0.2mM dATP, 0.2mM dTTP, 0.2mM dGTP, 0.2mM dCTP, 4ng/ul of each primer and 0.02U/ul Taq DNA polymerase (Invitrogen). Samples were incubated at 94°C for 2 min and amplified. PCR amplifications consisted of 35 cycles of 30 sec at 95°C, 30 sec at 60°C and 30 sec at 72°C. PCR products were resolved by gel electrophoresis on a 1% (w/v) agarose gel containing 5ug ethidium bromide. Gels were visualized with the GelDoc 2000/Chemidoc system (Bio-rad). A minimum of three independent PCR reactions were performed for each ChIP.

xii. **Statistical Analysis**

Statistical analysis was performed with Prism Graphpad software (Graphpad Prism v4.00, Graphpad software, San Diego, California). Two-way analysis of variance and Student's t-test were used to determine significant differences. p<0.05 was considered significant. Complex analysis of variance was performed by a qualified statistician.

xiii. **Human Breast Tumors**

One-hundred and nine invasive breast carcinomas consisting of 94 ER<sup>+</sup> (defined as >3 fmol/mg of protein) and 80 PR<sup>+</sup> (defined as >10fmol/mg of protein) tumors were selected from the Manitoba Breast Tumor Bank (Winnipeg, Manitoba, Canada) (Website: [http://www.umanitoba.ca/institutes/manitoba\\_institute\\_cell\\_biology/MBTB/MBTB\\_Homepage.htm](http://www.umanitoba.ca/institutes/manitoba_institute_cell_biology/MBTB/MBTB_Homepage.htm)) with the expertise of Dr. Peter Watson, Department of Pathology, University

of Manitoba and tumor tissue microarrays (TMAs) were prepared. Briefly, areas of pathological interest were identified by Dr. Watson and cores typically 3mm long and 0.6mm in diameter were obtained from this region of interest from a paraffin embedded tissue block. Cores were transferred into a recipient standard paraffin block. As a result, the 109 tissue cores all were contained in one paraffin block and referred to as a tissue microarray. Sections are cut from the array block 4-5  $\mu$  thick that are used primarily in immunohistochemical analysis (see below).

**xiv. Immunohistochemistry**

Five micron sections were cut from the tissue microarrays and stained using the Discovery XT (Ventana Medical Systems) automated slide staining instrument as per manufacturers' recommendations. Slides were stained for phosphorylated c-Jun (Santa Cruz) and Smad3 (Zymed Laboratories) at a final dilution of 1/300 and 1/30, respectively. Antibodies were detected using the iView DAB Detection Kit (Ventana Medical Systems), with biotinylated immunoglobulin secondary antibodies at concentrations less than 120 ug/ml (mouse) and 180 ug/ml (rabbit) in a phosphate buffered saline containing 0.5% Proclin 300. Slides were counter-stained with Hematoxylin and Bluing Reagent (Ventana Medical Systems) to visualize cellular structures. Levels of expression of phosphorylated c-Jun and nuclear Smad3 were determined by scoring the intensity (0 = no staining, 1 = weak staining, 2 = moderate staining and 3 = intense staining) and the percentage of epithelial tumor cells exhibiting staining within the tissue section. The product of the intensity and the percentage was determined to provide a final semi-quantitative immunostaining score (H score, ranging from 0 to 300). Scoring of TMA immunostaining was performed independently by Tracy

Cherlet and Dr. George Skliris, who has had extensive experience and training in immunohistochemical scoring.

xv. ***Statistical Analysis of Immunohistochemistry***

Statistical analysis was performed with Prism Graphpad software (Graphpad Prism v4.00, Graphpad software, San Diego, California). Spearman correlations were used to test correlations between c-Jun, Smad3, ER, PR and tumor characteristics. Differences between tumor subgroups were tested using the Mann-Whitney rank-sum test, two-sided.  $p < 0.05$  was considered statistically significant.

## **RESULTS**

### **SECTION I. FUNCTIONAL INTERACTION BETWEEN ER AND TGF $\beta$**

#### **A. Modulation of ER Activity by Smad3**

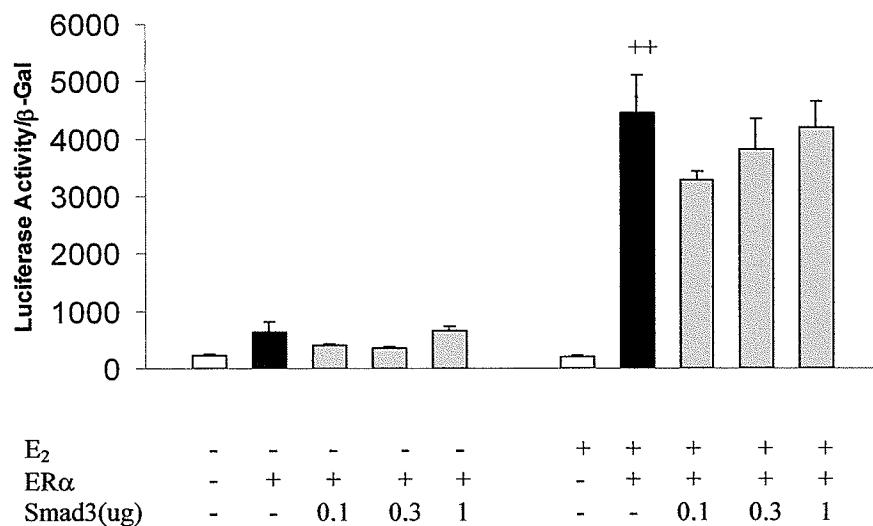
##### **Rationale**

Cross-talk between the TGF $\beta$  and ER signaling pathways has been suggested to occur not only by direct autocrine or paracrine effects but also by ER and TGF $\beta$  directly modulating one another's transcriptional activity. Matsuda et al. (335) have demonstrated that Smad3 inhibits ER transcriptional activity whereas ER transcriptional activity is enhanced by TGF $\beta$  signaling. However, others have shown that TGF $\beta$  does not affect ER activity (320). Due to such inconsistencies in the literature, we initially sought to characterize the functional interaction between TGF $\beta$  and ER signaling pathways in Cos1 (green monkey kidney) and MCF-7 (human breast cancer) cells.

##### **Results**

To test whether Smad3 affects ER $\alpha$  or ER $\beta$  transcriptional activity, we utilized an estrogen responsive luciferase reporter plasmid which contains two EREs from the promoter region of the *Xenopus* vitellogenin gene. This reporter plasmid has been previously used to examine ER transcriptional activity. To ensure that the plasmid was ER responsive, we transiently transfected Cos1 cells with ERE, ER $\alpha$  and a  $\beta$ -galactosidase reference gene (pCH110) in the presence or absence of 10nM E<sub>2</sub> and looked for an increase in ERE activity upon addition of ligand. As expected, upon E<sub>2</sub> stimulation there was a 7-fold ( $p<0.01$ ) increase in luciferase activity in the presence of ER $\alpha$  as compared to vehicle-treated cells (Figure 11). When increasing amounts of

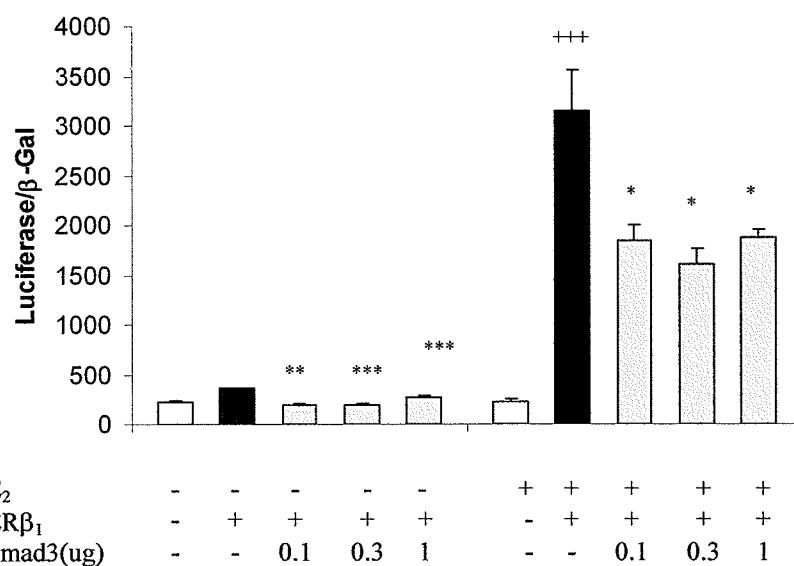
Smad3 expression plasmid was co-transfected into Cos1 cells with the ERE, ER $\alpha$  and pCH110 in the presence or absence of 10nM E<sub>2</sub>, no significant difference in E<sub>2</sub> induced ER $\alpha$  luciferase activity between samples over-expressing or not over-expressing Smad3 was observed (Figure 11).



**Figure 11.** Effect of Smad3 over-expression on ER $\alpha$  transcriptional activity on an estrogen responsive element (ERE) in the presence or absence of 10nM E<sub>2</sub> in Cos1 cells. Cos1 cells were transiently transfected with 100ng pCH110, 200ng ERE-II-luc, 100ng pcDNA4-His/Xpress-ER $\alpha$  and increasing amounts of pCMV5B-Flag-Smad3 (0, 0.1ug, 0.3ug and 1ug) in the presence or absence of 10nM E<sub>2</sub>. Equimolar concentrations of DNA were maintained between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity as described in Methods. Results represent the mean  $\pm$  SEM, n=3 independent experiments. ++ indicates a significant ( $p<0.01$ ) (Student's t-test) difference as compared to untreated cells.

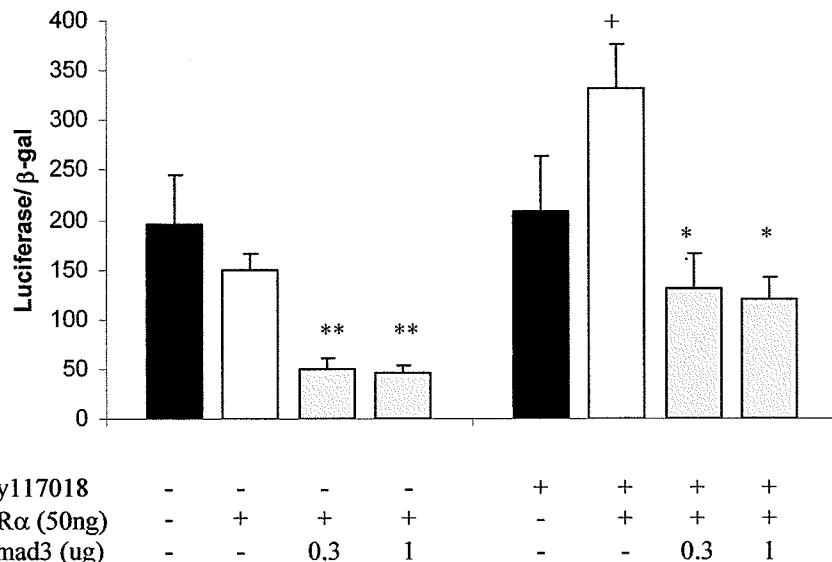
In the presence of ER $\beta$ <sub>1</sub>, E<sub>2</sub> stimulation also significantly ( $p<0.005$ ) increased ERE activity as compared to vehicle treated samples (Figure 12). Unlike ER $\alpha$ , however,

over-expression of Smad3 in the presence of ER $\beta_1$  resulted in a significant decrease in luciferase activity both in the presence and absence of estradiol (Figure 12), suggesting that this effect was ligand independent. As data from our laboratory suggest that the ER $\beta$  variants (i.e. ER $\beta_2$  and ER $\beta_5$ ) do not have transcriptional activity of their own (139), ERE reporter genes have not been used in conjunction with the variants.



**Figure 12. Effect of Smad3 over-expression on ER $\beta_1$  transcriptional activity on an estrogen responsive element (ERE) in the presence or absence of 10nM E<sub>2</sub> in Cos1 cells.** Cos1 cells were transiently transfected with 100ng pCH110, 200ng ERE-II-luc, 50ng pcDNA4-His/Xpress-ER $\beta_1$  and increasing amounts of pCMV5B-Flag-Smad3 (0, 0.1ug, 0.3ug and 1ug) in the presence or absence of 10nM E<sub>2</sub>. Equimolar concentrations of DNA were maintained between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity as described in Methods. Results represent the mean  $\pm$  SEM, n=3 independent experiments. +++ indicates a significant difference ( $p<0.005$ ) (Student's t-test) as compared to untreated cells. \*, \*\* and \*\*\* indicates significant differences ( $p<0.05$ ,  $p<0.01$  and  $p<0.005$ , respectively) (Student's t-test) as compared to the corresponding sample in the presence of ER $\beta_1$  only.

Modulation of ER $\alpha$  transcriptional activity by Smad3 was also examined on the non-ERE containing TGF $\beta_3$ -luc reporter gene, where the DNA binding domain of ER is not required for activity (289, 408). The TGF $\beta_3$ -luc plasmid contains nucleotides -2306/-1848 of the human TGF $\beta_3$  promoter, a region that has been implicated in mediating raloxifene bound ER $\alpha$  transcriptional activity (289). This response element, identified as the raloxifene response element, shows no sequence similarities to either the consensus ERE nor the Ap-1 binding site and removal of the DBD of ER $\alpha$  does not inhibit raloxifene induced TGF $\beta_3$  expression (289). Thus, the TGF $\beta_3$  promoter is an example of a non-classical mode of gene regulation by ER in that no classical ERE sites have been identified. While the mechanism by which ER $\alpha$  modulates TGF $\beta_3$  transcription is unknown, the Ras-MAPK pathway has been implicated (290). We have previously shown that both ER $\alpha$  and ER $\beta$  increase TGF $\beta_3$ -luc transcription in the presence of the raloxifene analog Ly117018 and that the ER $\beta$  variants, ER $\beta_2$  and ER $\beta_5$ , inhibit the effect of activated ER $\alpha$  (139). Therefore, the effect of Smad3 on ER $\alpha$  transcriptional activity on this promoter was examined. ER $\alpha$  transient transfection into Cos1 cells resulted in a 2.2 x increase ( $p<0.05$ ) in TGF $\beta_3$ -luc activity in the presence of 100nM Ly117018 (Figure 13). Smad3 over-expression significantly inhibited the up-regulation of TGF $\beta_3$ -luc transcription by ER $\alpha$  ( $p<0.05$ ) as compared to control (Figure 13). This effect by Smad3 appeared to be ligand-independent as Smad3 similarly inhibited TGF $\beta_3$ -luc activity in the absence of Ly117018 ( $p<0.01$ ) (Figure 13).



**Figure 13.** Effect of Smad3 over-expression on ER $\alpha$  transcriptional activity on the TGF $\beta_3$ -luc promoter in the presence or absence of 100nM Ly117018 in Cos1 cells. Cos1 cells were transiently transfected with 100ng pCH110, 200ng TGF $\beta_3$ -luc, along with 50ng pcDNA4-His/Xpress-ER $\alpha$  and increasing amounts of pCMV5B-Flag-Smad3 (0, 0.3ug or 1ug) in the presence or absence of 100nM Ly117018 as described in Methods. Equimolar concentrations of DNA were kept between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity as described in Methods. Results represent the mean  $\pm$  SEM, n=3 independent experiments. + indicates a significant difference ( $p<0.05$ ) (Student's t-test) as compared to corresponding untreated cells. \* and \*\* indicate significant differences ( $p<0.05$  and  $p<0.01$ ) as compared to the corresponding sample in the presence of 0ng Smad3.

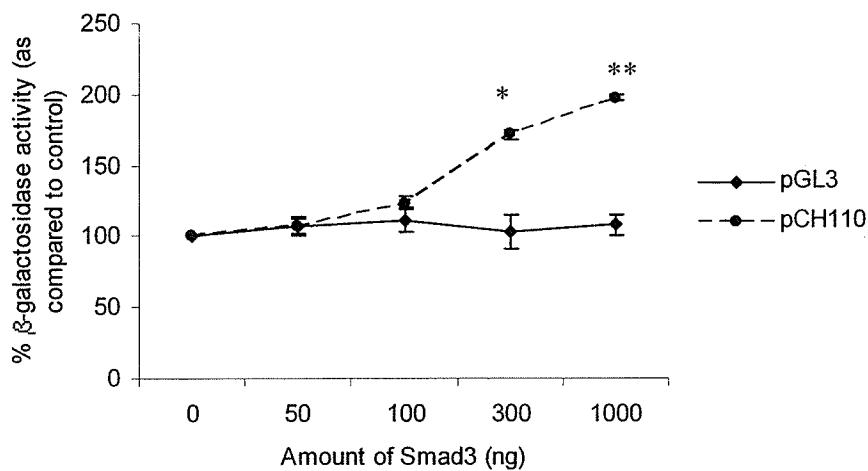
Upon closer examination of the TGF $\beta_3$  luciferase and pCH110  $\beta$ -galactosidase data, raw luciferase activity values were not affected by Smad3 over-expression while the level of  $\beta$ -galactosidase was significantly increased ( $p<0.05$ ) (Table 2), suggesting that Smad3 affects the expression of our internal control. This increase in  $\beta$ -galactosidase activity corresponded to the degree of inhibition observed by Smad3 over-expression on relative TGF $\beta_3$  luciferase activity, suggesting that Smad3 does not affect TGF $\beta_3$ -luc

transcription in Cos1 cells. To ensure that our internal control would not interfere with relative luciferase activity in future studies, we tested another internal control plasmid, pGL3- $\beta$ -galactosidase, to see whether Smad3 over-expression affected its activity. Results suggest that, unlike the pCH110 plasmid, Smad3 does not affect pGL3- $\beta$ -galactosidase activity (Figure 14). Therefore, results from experiments in which Smad3 is over-expressed in the presence of pCH110 will need to be examined closely but utilization of the pGL3- $\beta$ -galactosidase plasmid as an internal control is preferred.

<b><math>\beta</math>-Galactosidase Activity (pCH110)</b>		
<b>Sample (ug Smad3)</b>	<b>Vehicle</b>	<b>100nM Ly117108</b>
0	0.1428±0.03	0.1454±0.03
0.3	0.3274±0.07 *	0.3792±0.11 *
1	0.4286±0.10 *	0.4020±0.09 *

<b>Luciferase Activity (TGF<math>\beta_3</math>-luc)</b>		
<b>Sample (ug Smad3)</b>	<b>Vehicle</b>	<b>100nM Ly117018</b>
0	21.60±3.48	47.37±6.71
0.3	16.03±1.54	44.65±7.26
1	19.41±3.07	45.68±6.35

**Table 2: Effect of Smad3 over-expression on pCH110 and TGF $\beta_3$ -luc activity.** Cos1 cells were transiently transfected with 100ng pCH110, 200ng TGF $\beta_3$ -luc, 50ng pcDNA4-His/Xpress-ER $\alpha$  and increasing amounts of pCMV5B-Flag-Smad3 (0, 0.3ug or 1ug) in the presence or absence of 100nM Ly117018 as described in Methods. Equimolar concentrations of plasmid were kept between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity as described in Methods. Results represent the mean ± SEM, n=3 independent experiments for  $\beta$ -galactosidase (pCH110) and luciferase (TGF $\beta_3$ -luc) activity. \*p<0.05, Student's t-test (as compared to 0ng Smad3).



**Figure 14: Effect of Smad3 over-expression alone on pCH110 and pGL3- $\beta$ -Gal activity.** Cos1 cells were transiently transfected with 100ng pCH110 or 100ng pGL3- $\beta$ -gal and increasing amounts of pCMV5B-Flag-Smad3 (0, 50, 100, 300 or 1000 ng) as described in Methods. Equal molar amounts of plasmid were kept between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and assayed for  $\beta$ -galactosidase activity as described in Methods. Values represent percentage  $\beta$ -galactosidase activity with 0ng Smad3 set as 100% and are expressed as the mean  $\pm$  SEM, n=3 independent experiments. \*p<0.05, \*\*p<0.01 Student's t-test (compared to 0ng Smad3).

As Smad3 over-expression increased the activity of the pCH110 internal control when used with the non-classical TGF $\beta_3$ -luc reporter plasmid, we re-examined the effects of Smad3 on the internal control when used in conjunction with the classical ERE-II-luc reporter. Little if any effects of increasing Smad3 on  $\beta$ -galactosidase activity were seen in the presence of the classical ERE luciferase reporter with ER treated with E<sub>2</sub> (data not shown). Thus, although there was a significant effect of increasing Smad3 on  $\beta$ -galactosidase activity in the internal control with TGF $\beta_3$ -luc, this did not affect the conclusion that increasing Smad3 had little if any effect on ER $\alpha$  or ER $\beta_1$  activity on the ERE-II-luc reporter gene.

## B. Modulation of Smad3 Activity by ER

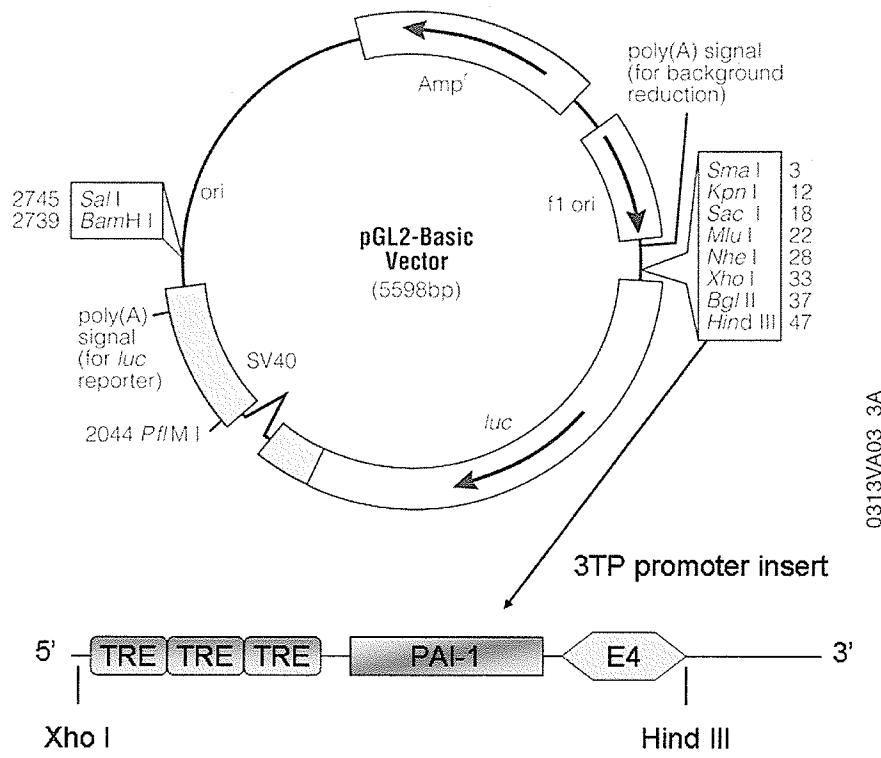
### Rationale

From our experiments in Cos1 cells we have shown that Smad3 has little if any effect on ER transcriptional activity. These results are in accordance with that observed by Yanagisawa et al. (320). While we have determined that TGF $\beta$ , via Smad3, does not modulate ER transcriptional activity in our cell system, the question still remains as to whether ER could modulate Smad3 transcriptional activity. To test whether ER affects Smad3 transcriptional activity, we utilized the Smad3 responsive p3TP-lux reporter plasmid, which contains a TGF $\beta$  responsive element from the plasminogen activator inhibitor-1 (PAI-1) promoter downstream of three TPA-responsive elements of the human collagenase gene (409).

### Results

#### i. Effect of ER $\alpha$ Expression on Smad3 Transcriptional Activity in Cos1 Cells

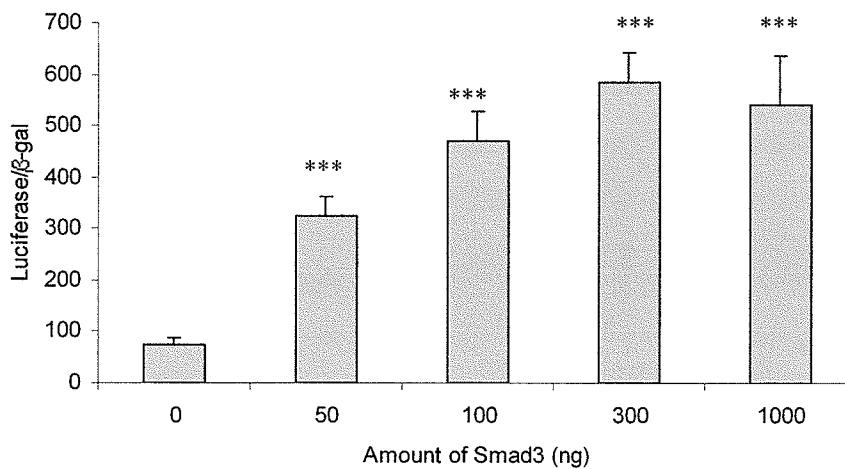
Figure 15 is a diagrammatic representation of the p3TP-lux plasmid and Figure 16 illustrates the nucleotide sequence of the human collagenase and PAI-1 promoter insert. The p3TP-lux plasmid has been well characterized as a TGF $\beta$  responsive promoter and a dose-dependent increase in its activity occurs in the presence of increasing Smad3 expression (Figure 17) ( $p<0.005$ ) (409-412). There was no significant increase in pCH110  $\beta$ -galactosidase activity in contrast to that observed in the TGF $\beta_3$ -luc reporter assays with increasing amounts of transfected Smad3 plasmid. Therefore, Smad3 significantly increased the TGF $\beta$  responsive reporter gene in a dose-dependent manner.



**Figure 15:** Diagrammatic representation of the basic structure of p3TP-lux. From 5' to 3', the 3TP insert consists of: (1) a multimerized TPA-responsive element corresponding to the -73 to -42 region of the human collagenase gene; (2) a TGF $\beta$  responsive element from positions -636 to -740 in the human plasminogen-activator inhibitor-1 promoter; and (3) adenovirus E4 promoter sequences from positions -38 to +38. This 3TP promoter was cloned into Xho-Hind III digested luciferase expression vector (pGL2, basic vector, Promega) generating p3TP-lux. Taken from (409).

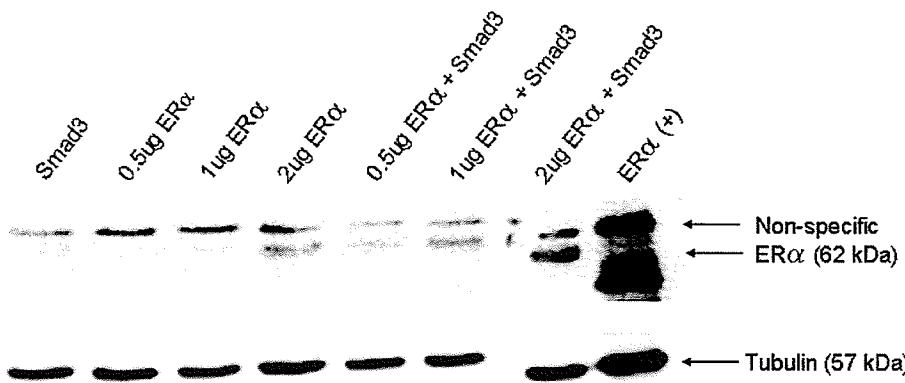
Human Collagenase Promoter #1	Human Collagenase Promoter #2
5'- CCCTTCCAGAAAGCAGAGGTGTC <u><b>TGACTCATATGAGTC</b></u> AACACCTCTGGCT	
Human Collagenase Promoter #3	
GTCTGGAAGGG <u><b>TGAGTC</b></u> AGACACCTCTGGCTTCTGGAAGGGAGCTTGCA	
GCCCTAGAGGATCCAACCTC <u><b>AGCCAGACAAGGTTG</b></u> TGACACAAGAGAGCC	
CTCAGGGCACAGAG <u><b>GTC</b></u> GGACACGTGGGGTCAAGCCGTATCATC	
GGAGGATCCCCAGTCCTATATATACTCGCTCTGCACTTGCCCTTTTACAC	
Plasminogen Activator Inhibitor-1 (PAI-1) Region	
TGTGACTGATTGAGCTGGTGCCGTGTCGGGGTACCGAGCTCGAATTAGCTG	
GCATTCCGGTACTGTTGGTAAAATGGAAGACGCCAAAAACATAAAGAAAGG	
CCCGGGGCCATTCTATCCTCTAGAGGATGGAACCGCTGGAGAGCAACTGCAT	
AAGGCTATGAAGAGATAGCCCTGGTCCTGGAACAATTGCTTTACAGATG	
CACATATCGAGG-3'	

**Figure 16:** Nucleotide sequence of the p3TP-lux insert. The TGF $\beta$  responsive reporter plasmid p3TP-lux is composed of three 5' human collagenase promoter sequences upstream of the plasminogen activator inhibitor-1 (PAI-1) promoter region cloned within a pGL2 vector. The sequence in *italics* represents the TPA-responsive elements while the sequence in **bold** represents the Smad3 binding sites in PAI-1 with the sequence **underlined** representing the core consensus sequence. The sequence in red indicates the presence of a half-ERE.



**Figure 17. Effect of Smad3 over-expression on p3TP-lux activity in Cos1 cells.** Cos1 cells were transiently transfected with 200ng p3TP-lux, 100ng pCH110 and increasing amounts (50-1000ng) of pCMV5B-Flag-Smad3. Empty pcDNA3.1 vector was used to ensure equimolar concentrations of plasmid between samples. Cells were harvested 48 h later and assayed for luciferase and  $\beta$ -galactosidase activity as described in Methods. Values represent the mean  $\pm$  SEM, n=6 independent experiments. \*\*\*p<0.005, Student's t-test (compared to 0ng Smad3).

Cos1 transient transfections with p3TP-lux and either a His/Xpress tagged or untagged ER $\alpha$  protein expression vector shows that ER $\alpha$  does not affect p3TP-lux activity on its own in the presence or absence of estradiol (Table 3). Expression plasmids encoding tagged as well as untagged ER $\alpha$  proteins were utilized to ensure that the His/Xpress tag did not alter the activity of ER $\alpha$  on the reporter plasmid. Figure 18 shows the increase in His/Xpress tagged ER $\alpha$  protein expression as more plasmid is transfected into Cos1 cells (note: due to poor transfer to the nitrocellulose membrane, there is a slight shift in the band corresponding to ER $\alpha$  at the far right of the diagram). In the presence of over-expressed Smad3, ER $\alpha$  caused a significant (p<0.05) decrease in Smad3 transcriptional activity in a ligand-dependent manner (Figure 19a+b). Similar results



**Figure 18.** Western blot of Cos1 cells transiently transfected with Smad3 and ER $\alpha$ . Cos1 cells were transiently transfected with 1ug p3TP-lux, 1ug pCH110, 1ug pCMV5B-Flag-Smad3 and increasing amounts of pcDNA4-His/Xpress ER $\alpha$  as described in Methods. DNA was maintained at equimolar concentrations between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and whole cell protein extracts prepared. 22ul of the 300ul whole cell protein extract was run on an SDS-10% acrylamide gel. Western blotting and immune detection were performed as described in Methods. Immune detection was using an anti-His antibody (Invitrogen) (top panel) and an anti-tubulin antibody (Neomarkers) (bottom panel). The molecular mass of ER $\alpha$  and tubulin is denoted on the left.

were also observed when a His/Xpress tagged ER $\alpha$  protein was expressed (Figure 19b).

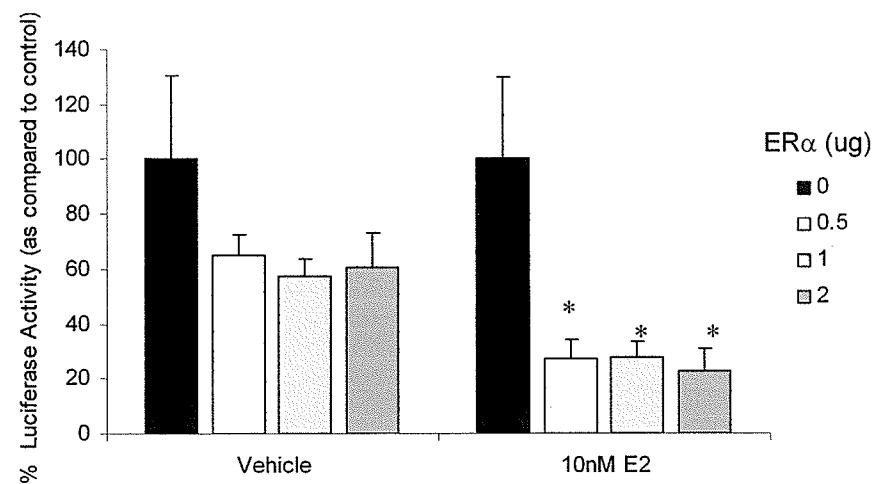
These results were not affected by the pCH110 internal control as equimolar concentration of Smad3 expression plasmid was transfected into each test sample. The decrease in Smad3 activity by estradiol bound ER $\alpha$  was inhibited by co-treatment with an excess of either 4OH-tamoxifen ( $p<0.01$ ) or ICI 182,780 ( $p<0.001$ ) (Figure 20). Antiestrogen treatment did not affect p3TP-lux transcription in the absence of estradiol (data not shown). Tamoxifen is known as a selective estrogen receptor modulator (SERM), in that it may either inhibit or stimulate ER activity depending on the promoter sequence and cellular milieu (149). ICI 182,780, on the other hand, is known as a pure

estrogen antagonist, in that it inhibits ER activity independent of cell background and target gene sequences (160).

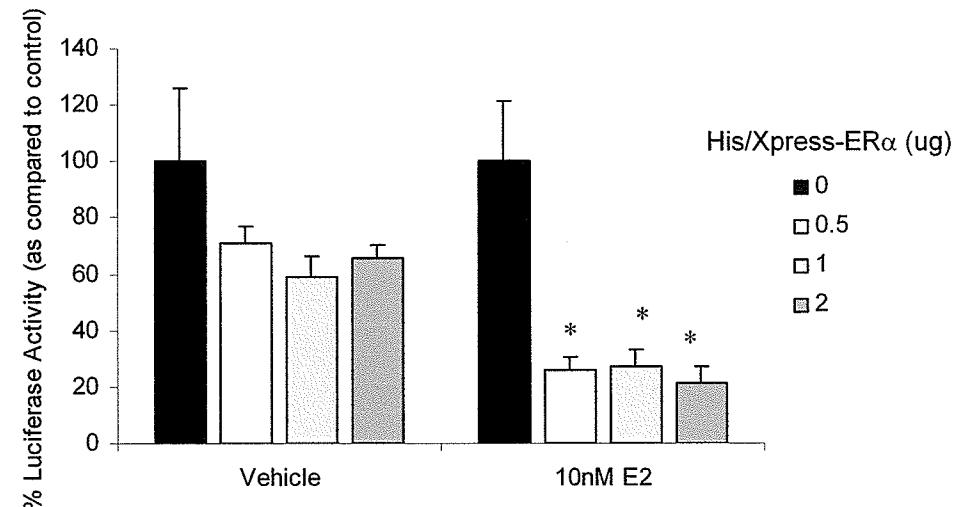
ug ER $\alpha$	pcDNA3.1-ER $\alpha$		pcDNA4-His/Xpress-ER $\alpha$	
	Vehicle	10nM E <sub>2</sub>	Vehicle	10nM E <sub>2</sub>
0	403.40 ± 163.29	374.08 ± 193.49	433.88 ± 147.64	446.61 ± 160.39
0.5	388.72 ± 157.07	258.37 ± 101.11	360.61 ± 116.09	225.18 ± 49.93
1	392.48 ± 148.70	253.83 ± 117.44	359.61 ± 84.70	251.41 ± 64.54
2	358.26 ± 112.42	270.76 ± 118.90	391.19 ± 69.98	238.18 ± 34.13

**Table 3:** Effect of ER $\alpha$  on p3TP-lux activity in Cos1 cells. Cos1 cells were transiently transfected with 1ug p3TP-lux, 1ug pCH110 and increasing amounts (0.5-1ug) of pcDNA3.1-ER $\alpha$  (encodes for an untagged ER $\alpha$  protein) or pcDNA4-His/Xpress-ER $\alpha$  (encodes for a His and Xpress tagged ER $\alpha$  protein) in the presence of vehicle or 10nM E<sub>2</sub> as described in Methods. Empty pcDNA3.1 vector was used to ensure equimolar concentrations of plasmid between samples. Cells were harvested 48 h later and assayed for luciferase and  $\beta$ -galactosidase activity and are expressed as described in Methods. Results represent the mean ± SEM, n=3 independent experiments.

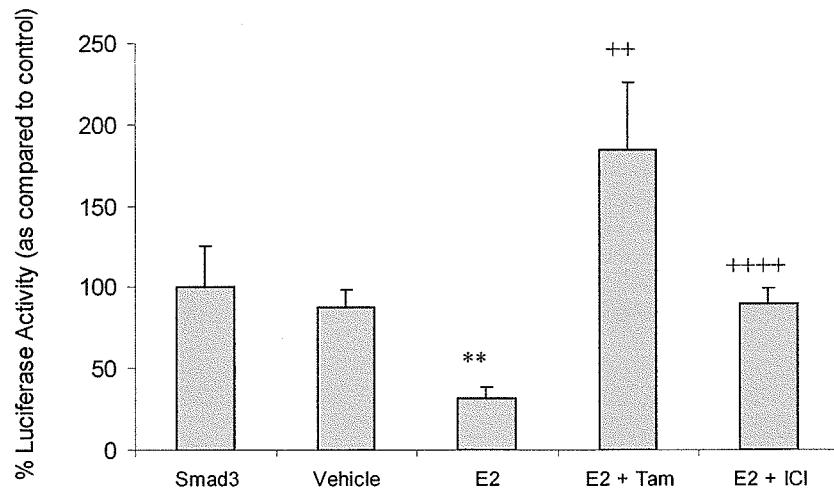
A.



B.

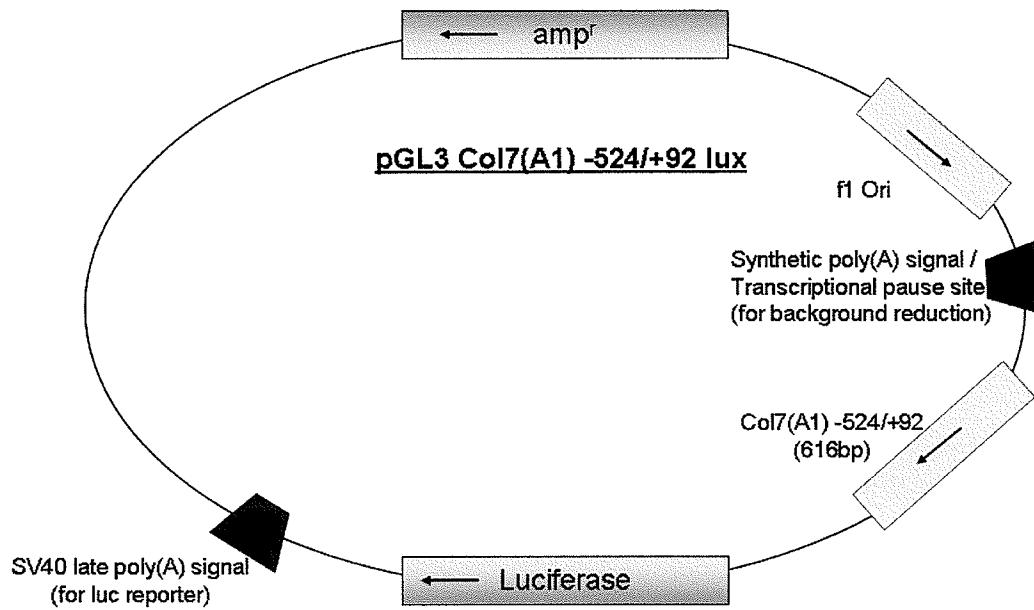


**Figure 19. Effect of ER $\alpha$  on Smad3 induced p3TP-lux activity in the presence or absence of 10nM E<sub>2</sub> in Cos1 cells.** Cos1 cells were transiently transfected with 1ug p3TP-lux, 1ug pCH110, 1ug Smad3 and increasing amounts (0.5-2ug) of (A) pcDNA3.1-ER $\alpha$  or (B) pcDNA4-His/Xpress-ER $\alpha$  in the presence of vehicle (EtOH) or 10nM E<sub>2</sub>. Empty pcDNA3.1 vector was used to ensure equimolar concentrations of plasmid between samples. Cells were harvested 48 h later and assayed for luciferase and  $\beta$ -galactosidase activity as described in Methods. Results represent percentage luciferase activity with 0ug ER $\alpha$  set as 100%. Values represent the mean  $\pm$  SEM, n=3 independent experiments. \*p<0.05, Student's t-test (as compared to cells transfected with 0ug ER $\alpha$ ).



**Figure 20.** Effect of ER $\alpha$  on Smad3 induced p3TP-Lux activity in Cos1 cells in the presence of vehicle, 10nM E $_2$ , 100nM 4OH-tamoxifen plus 10nM E $_2$  or 500nM ICI 182,780 plus 10nM E $_2$ . Cos1 cells were transiently transfected and assayed for luciferase and  $\beta$ -galactosidase activity as described in Methods. Results are expressed as percentage luciferase activity with Smad3 (control) set as 100%. Cells were transiently transfected with 100ng pCH110, 200ng p3TP-Lux, 1ug pCMV5B-Flag-Smad3 and 1ug pcDNA4-His/Xpress-ER $\alpha$  in the presence of vehicle, 10nM E $_2$  (E2), 100nM 4OH-tamoxifen plus 10nM E $_2$  (E2+Tam) and 500nM ICI 182,780 plus 10nM E $_2$  (E2+ICI). Smad3 (control) samples were transfected in the presence of vehicle and do not contain ER $\alpha$ . DNA was maintained at equimolar concentrations between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity. Results represent the mean  $\pm$  SEM, n=6 independent experiments. \*\* indicates significant differences ( $p<0.01$ , Student's t-test) as compared to vehicle and ++ or ++++ indicates significant differences ( $p<0.01$  or  $p<0.001$ , Student's t-test) as compared to E $_2$  treated samples.

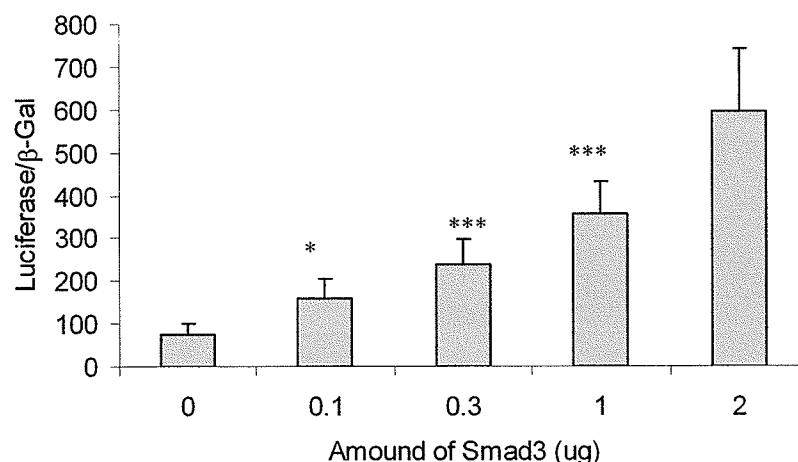
To determine if this inhibitory effect of estradiol bound ER $\alpha$  on Smad3 transcriptional activity was specific for the p3TP-lux promoter or can potentially be applied to several Smad3 responsive genes, the effect of ER $\alpha$  on another known TGF $\beta$ /Smad3 regulated promoter was investigated. Collagen 7(A1) is a type of network forming collagen which helps attach the basal lamina of squamous cell epithelia to the underlying connective tissue and therefore, is especially abundant in the skin. Transcription of collagen 7(A1) has been shown to be increased upon activation of the TGF $\beta$  signaling pathway, whereby phosphorylated Smad3 binds to a SBE in the promoter region (413). The SBE of the collagen 7(A1) promoter has been mapped to nucleotides -496/-444 and is composed of two distinct binding sites whose simultaneous presence is required for Smad binding (414). In addition to TGF $\beta$ , the Ap-1 signaling pathway also plays an important role in modulating collagen 7(A1) transcription. Two consensus Ap-1 sites have been found in the promoter, one located between the bipartite SBE and one located further downstream of the SBE. A diagrammatic representation of the collagen 7(A1) promoter and the nucleotide sequence of the insert is shown in Figure 21.



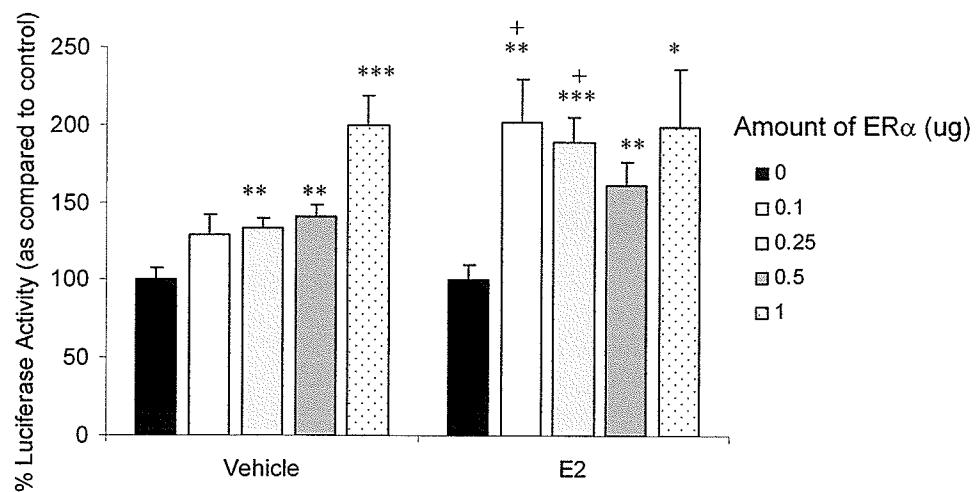
5'-CAGGAGGCCACCA**GACAGA**TGGCTGAATCACAGGAGTGGCCGGCGG  
 GACCCATGGCCTGAGGGCTTGTCTGGGCACCCCCACTGGATTGGGGGTGA  
 GTCATCCCCAACTGCAGCCCCACCCCCCAGGGCCTGCTGCCTGTGGCTC  
 TGCAGGAACCTGTCCACTCCTCAGCCTGGTCACTGTGATTGACCTAAAGCA  
 GCCAAGACCTGTGACCTTAGATGGAGTTAGGGGTACTCCCTCAGCATCTG  
 CCCATGCAGAACCTTCTGGAAATTCCCAGAAGGCCACGGGGGTGGGGGG  
 GTTTATAGTTAAGTGCCTCATATCGTTGTCTGGGGAGGGGTGGGGGG  
 GCGGCGACCTCTCAGGGATATGGTGAGGGCGGGTGCTGGTTCCGCC  
 TGCCGCTCCGCCCGAGATCAGGGACTTTCTGCTCTGCCAGAGA  
 CTGCAGCGGCGGCGGGAGCGGGAGCGGACGCGCAGGCAAGACCAGGAC  
 TCGGGCTGGAGGGCGCTGGACCTGCCAAGGCCACGGGGAGC  
 AAGGGACAGAGGCGGGGTCCTAGCTGACGGCTTTACTGCCTAGG – 3'

**Figure 21:** Diagrammatic representation of the pGL3 Col7(A1) plasmid and the nucleotide sequence of the collagen 7(A1) -524/+92 promoter insert. Upper panel: The TGF $\beta$  responsive reporter plasmid pGL3-collagen 7(A1)-524/+92-luc consists of nucleotides -524/+92 of the collagen 7(A1) gene cloned into a pGL3 vector. Lower panel: The sequence in *italics* represents a known Ap1 responsive sequence, the sequence in **bold** represents a known Smad3 binding site while the sequence in *italics* or **bold** represent putative Ap1 and Smad3 binding sites, respectively. The sequence in red indicates the presence of half ERE sequences.

To determine whether ER $\alpha$  affects Smad3 signaling on the collagen 7A(1) promoter, we transiently transfected Cos1 cells with a reporter plasmid containing the collagen 7(A1)-524/+92 promoter region upstream of the luciferase gene together with the Smad3 and ER $\alpha$  expression vectors in the presence or absence of ligand. Similar to p3TP-lux, over-expression of Smad3 resulted in a dose-dependent increase ( $p<0.05$ ) in collagen 7(A1) promoter activity (Figure 22). In the presence of Smad3, however, ER $\alpha$  significantly increased collagen 7(A1) transcription in a dose-dependent manner in both the presence ( $p<0.05$ ) or absence ( $p<0.01$ ) of estradiol (Figure 23) while ER $\alpha$  alone, in the absence of Smad3, had no effect (data not shown).

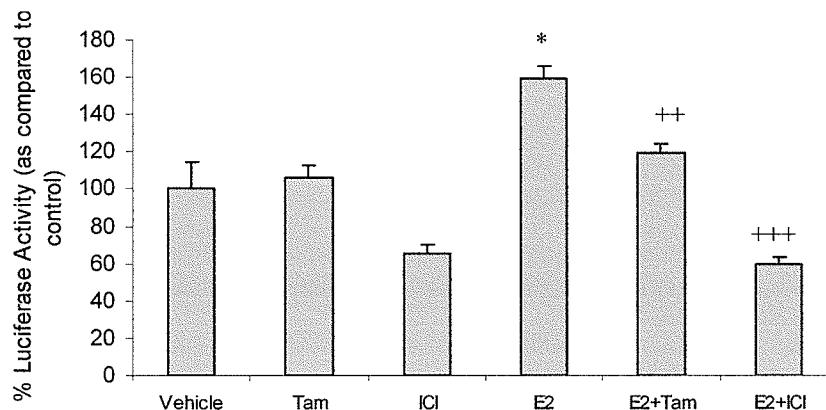


**Figure 22. Effect of Smad3 over-expression on collagen 7(A1)-524/+92 activity in Cos1 cells.** Cos1 cells were transiently transfected with 100ng pcDNA3- $\beta$ -gal, 10ng pGL3-collagen7(A1)-524/+92-luc and increasing (0-2ug) amounts of pCMV5B-Flag-Smad3 expression plasmid as described in Methods. Equimolar concentrations of plasmid were kept between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity. Results represent the mean  $\pm$  SEM, n=4 independent experiments. \* and \*\*\* indicate significant differences ( $p<0.05$  and  $p<0.005$ , Student's t-test) as compared to control samples.



**Figure 23. Effect of ER $\alpha$  on Smad3 induced collagen 7(A1)-524/+92 activity in Cos1 cells.** Cos1 cells were transiently transfected with 100ng pcDNA3- $\beta$ -gal, 10ng pGL3-collagen7(A1)-524/+92-luc, 1ug pCMV5B-Flag-Smad3 and increasing (0-1ug) pcDNA4-His/Xpress ER $\alpha$  in the presence or absence of 10nM E<sub>2</sub> as described in Methods. Equimolar concentrations of plasmid were kept between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity. Results represent the mean  $\pm$  SEM, n=5 independent experiments. \*, \*\* and \*\*\* indicates significant differences ( $p<0.05$ ,  $p<0.01$  and  $p<0.005$ , Student's t-test) as compared to control samples. +  $p<0.05$  (Student's t-test) as compared to samples treated with the corresponding vehicle.

To further characterize the effects of ER $\alpha$  on Smad3 mediated collagen 7(A1) gene transcription, Cos1 cells were transiently transfected with ER $\alpha$  and Smad3 in the presence of estradiol and the antiestrogens 4OH-tamoxifen and ICI 182,780. Results suggest that ligand bound ER $\alpha$  significantly increases ( $p<0.05$ ) Smad3 induced collagen 7(A1) promoter activity (Figures 23, 24) and this effect is inhibited by 4OH-tamoxifen ( $p<0.01$ ) or ICI 182,780 ( $p<0.001$ ) co- treatment (Figure 24). Antiestrogen treatment in the absence of estradiol had no effect on collagen 7(A1) transcription (Figure 24).

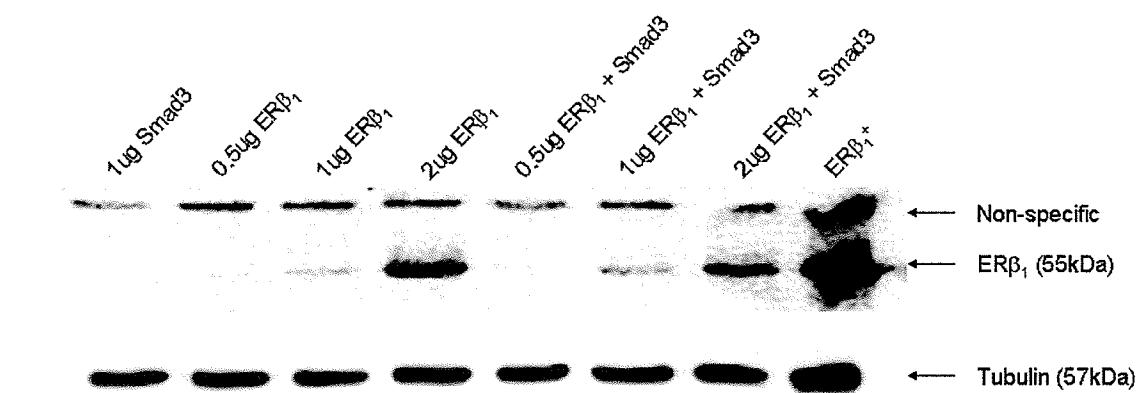


**Figure 24.** Effect of ER $\alpha$  on Smad3 induced collagen 7(A1)-524/+92 activity in Cos1 cells in the presence of E<sub>2</sub> and/or antiestrogens. Cos1 cells were transiently transfected and assayed for luciferase and  $\beta$ -galactosidase activity as described in Methods. Results are expressed as percent luciferase activity with vehicle control set as 100%. Cells were transiently transfected with 100ng pcDNA3- $\beta$ -gal, 10ng pGL3-collagen7(A1)-524/+92-luc, 1ug PCMV5B-Flag-Smad3 and 1ug pcDNA4-His/Xpress-ER $\alpha$  in the presence of vehicle, 100nM 4OH-tamoxifen (Tam), 500nM ICI 182,780 (ICI), 10nM E<sub>2</sub> (E<sub>2</sub>), 100nM 4OH-tamoxifen plus 10nM E<sub>2</sub> (E<sub>2</sub>+Tam) and 500nM ICI 182,780 plus 10nM E<sub>2</sub> (E<sub>2</sub>+ICI). 48 h post-transfection, cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity. Results represent the mean  $\pm$  SEM, n=3 independent experiments. \* indicates a significant difference ( $p<0.05$ , Student's t-test) as compared to vehicle control. ++ and +++ indicates significant differences ( $p<0.01$  and  $p<0.005$ , Student's t-test) as compared to E<sub>2</sub> treated samples.

## ii. Effect of ER $\beta$ Expression on Smad3 Transcriptional Activity in Cos1 Cells

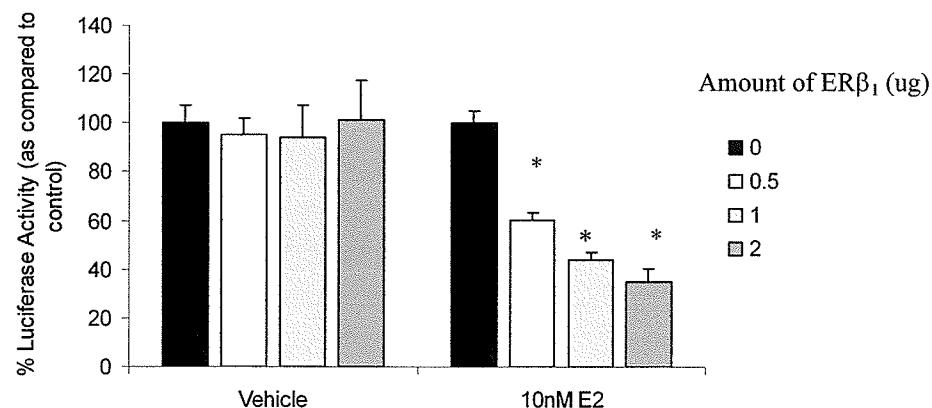
ER $\beta_1$  has a high degree of sequence homology to ER $\alpha$ , sharing approximately 96% of its amino acids within the DBD and 53% within the LBD (68). Thus, both receptors bind similar ligands and EREs (88). Therefore, we were interested in determining whether differences existed between ER $\alpha$  and ER $\beta$  in their ability to modulate Smad3 transcriptional activity. To test this hypothesis, Cos1 cells were transiently transfected with increasing amounts of a His/Xpress tagged ER $\beta_1$  expression

plasmid along with Smad3 and the p3TP-lux reporter plasmid in the presence or absence of estradiol. A western blot demonstrating the increase in His/Xpress ER $\beta$ <sub>1</sub> expression in Cos1 cells is shown in Figure 25. Similar to that observed with ER $\alpha$ , ligand bound ER $\beta$ <sub>1</sub> significantly ( $p<0.05$ ) inhibited Smad3 transcriptional activity on p3TP-lux (Figure 26a) and this effect was inhibited by co-treatment with excess 4OH-tamoxifen ( $p<0.005$ ) or ICI 182,780 ( $p<0.01$ ) (Figure 26b). Antiestrogen treatment had no effect on p3TP-lux transcription in the absence of estradiol (data not shown).

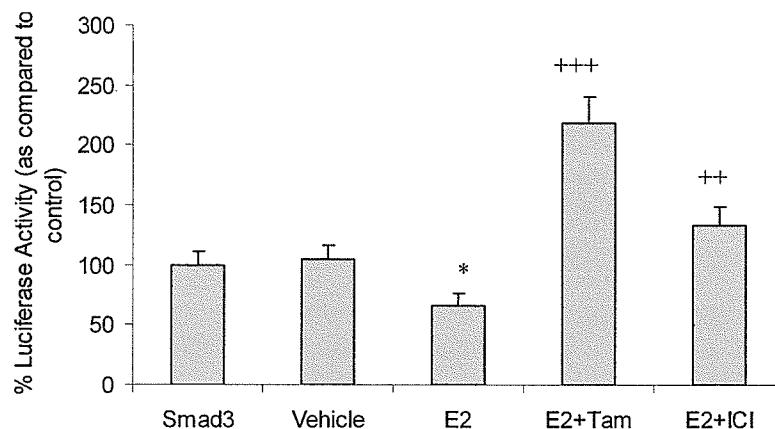


**Figure 25. Western blot of Cos1 cells transiently transfected with Smad3 and ER $\beta$ <sub>1</sub>.** Cos1 cells were transiently transfected with 1ug p3TP-lux, 1ug pCH110, 1ug pCMV5B-Flag-Smad3 and increasing amounts of pcDNA4-His/Xpress ER $\beta$ <sub>1</sub> as described in Methods. DNA was maintained at equimolar concentrations between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and whole cell protein extracts prepared. 22ul of the 300ul whole cell protein extract was run on an SDS-10% acrylamide gel. Western blotting and immune detection were performed as described in Methods. Immune detection was using an anti-His antibody (Invitrogen) (top panel) and an anti-tubulin antibody (Neomarkers) (bottom panel). The molecular mass of ER $\beta$ <sub>1</sub> and tubulin is denoted on the left.

A.

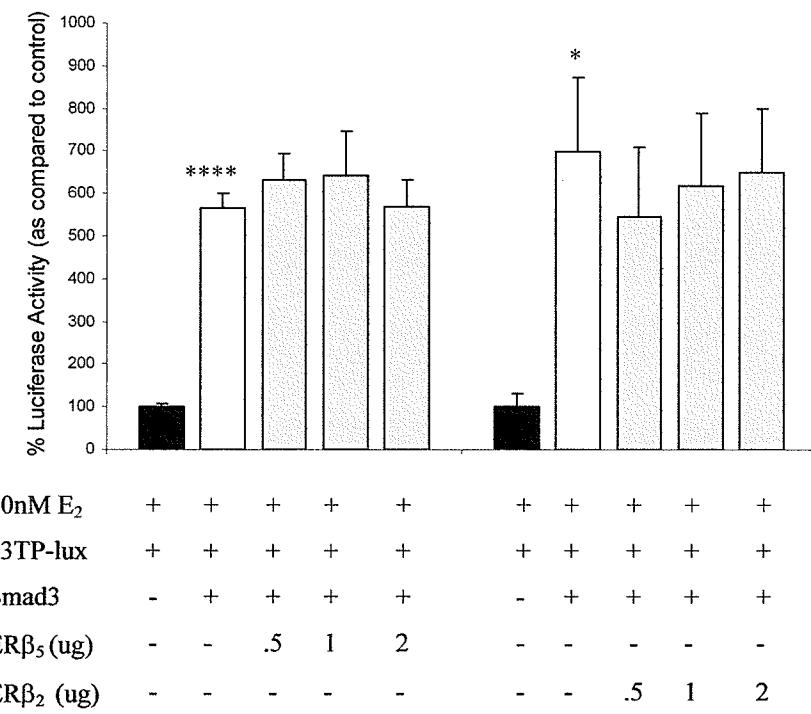


B.

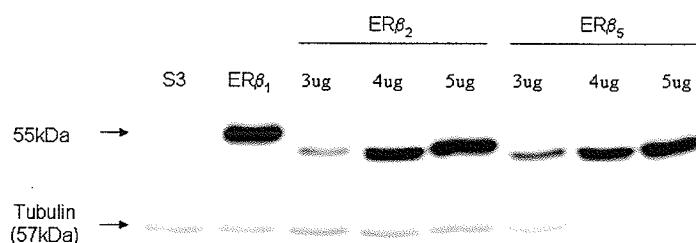


**Figure 26. Effect of ER $\beta$ 1 on Smad3 induced p3TP-Lux activity in Cos1 cells.** Cells were transiently transfected as described in Methods. DNA was maintained at equimolar concentrations between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity. A) Cos1 cells transfected with 100ng pCH110, 200ng p3TP-Lux, 1ug pCMV5B-Flag-Smad3 and increasing (0-2ug) amounts of pcDNA4-His/Xpress ER $\beta$ 1 in the presence or absence of 10nM E<sub>2</sub>. Results are expressed as percent luciferase activity with 0ug ER $\beta$ 1 set as 100% and represent the mean  $\pm$  SEM, n=3 independent experiments. B) Cos1 cells were transfected with 100ng pCH110, 200ng p3TP-Lux, 1ug pCMV5B-Flag-Smad3 and 1ug pcDNA4-His/Xpress-ER $\beta$ 1 in the presence of vehicle, 10nM E<sub>2</sub> (E2), 100nM 4OH-tamoxifen plus 10nM E<sub>2</sub> (E2+Tam) or 500nM ICI 182,780 plus 10nM E<sub>2</sub> (E2+ICI). Results are expressed as percent luciferase activity with 1ug Smad3 set as 100% and represent the mean  $\pm$  SEM, A) n=6 or B) n=5 independent experiments. \* indicates a significant difference (p<0.05, Student's t-test) as compared to A) Smad3 or B) vehicle control. ++ or +++ indicates significant differences (p<0.01 or p<0.005, Student's t-test) as compared to E<sub>2</sub> treated samples.

The effect of the ER $\beta$  variants, ER $\beta_2$  and ER $\beta_5$ , on Smad3 induced p3TP-lux promoter activity was also determined. As mentioned previously, ER $\beta_2$  and ER $\beta_5$  are similar in sequence to ER $\beta_1$  but have a shorter C-terminus and evidence suggests that they do not bind E<sub>2</sub> (139). ER $\beta$  variants were over-expressed in Cos1 cells along with Smad3 and the p3TP-lux reporter plasmid in Cos1 cells. Results are shown in Figure 27 and demonstrate no significant effect on Smad3 transcriptional activity. However, Western blot analysis of our transfected cells (Figure 28) suggest that ER $\beta_2$  and ER $\beta_5$  were expressed at much lower levels compared to that of ER $\beta_1$ , which may account for the differences. Attempts to attain similar levels of expression by increasing the amount of variant expression plasmids transfected into our cells were unsuccessful (data not shown).



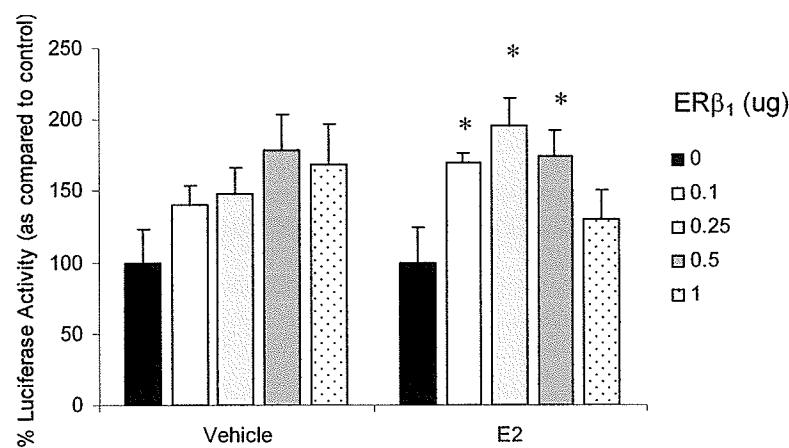
**Figure 27.** Effect of ER $\beta_2$  and ER $\beta_5$  on Smad3 induced p3TP-Lux activity in Cos1 cells in the presence of 10nM E<sub>2</sub>. Cos1 cells were transiently transfected with 1ug p3TP-lux, 1ug pCH110, 1ug pCMV5B-Flag-Smad3 and increasing (0-2ug) amounts of pcDNA4-His/Xpress-ER $\beta_2$  or pcDNA4-His/Xpress-ER $\beta_5$  in the presence of 10nM E<sub>2</sub> as described in Methods. DNA was maintained at equimolar concentrations between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity as described in Methods. Results are expressed as percent luciferase activity with cells transfected with p3TP-lux only set as 100%. Values represent mean  $\pm$  SEM, n=3 independent experiments. \*p<0.05 and \*\*\*p<0.001 (Student's t-test), as compared to p3TP-lux control.



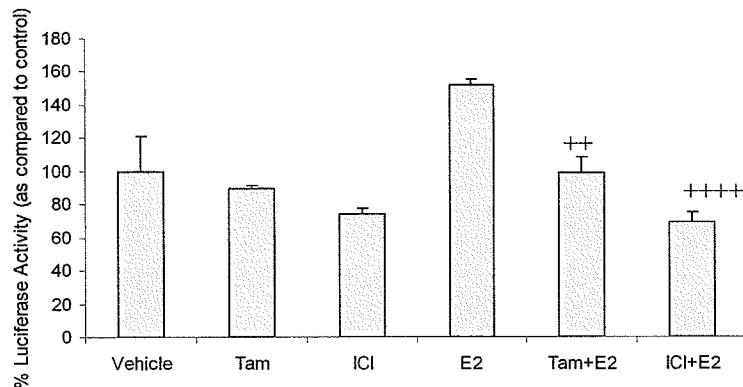
**Figure 28. Western blot of Cos1 cells transiently transfected with ER $\beta_2$  and ER $\beta_5$ .** Cos1 cells were transiently transfected with 1ug p3TP-lux, 1ug pCH110, 1ug pCMV5B-Flag-Smad3 and either 1ug pcDNA4-His/Xpress-ER $\beta_1$  or increasing (0-5ug) amounts of pcDNA4-His/Xpress-ER $\beta_2$  or pcDNA4-His/Xpress-ER $\beta_5$  in the presence of 10nM E $_2$  as described in Methods. DNA was maintained at equimolar concentrations between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and whole cell protein extracts prepared. 22ul of the 300ul whole cell protein extract was run on an SDS-10% acrylamide gel. Western blotting and immune detection were performed as described in Methods. Immune detection was using an anti-Xpress antibody (Invitrogen) (top panel) and an anti-tubulin antibody (Neomarkers) (bottom panel). Molecular mass markers are denoted on the left (Bio-rad).

The effect of ER $\beta_1$  on Smad3 transcriptional activity was also tested on the collagen 7(A1)-524/+92 luciferase plasmid. ER $\beta_1$  over-expression significantly ( $p<0.05$ ) increased Smad3 induced collagen 7(A1) promoter activity in a ligand-dependent manner (Figure 29a) (as compared to cells transfected with no ER $\beta_1$  plasmid); no significant effect of ER $\beta_1$  was observed in the absence of ligand although there was a trend towards an increase. In contrast to ER $\alpha$ , ER $\beta_1$  did not increase Smad3 induced collagen 7(A1)-524/+92 activity in the presence of E $_2$  (as compared to cells transfected with ER $\beta_1$  plasmid in the absence of estradiol) although there was a trend towards an increase in activity (Figure 29a+b). However, both 4OH-tamoxifen ( $p<0.01$ ) and ICI 182,780 ( $p<0.001$ ) significantly inhibited the effect of ligand activated ER $\beta_1$  (Figure 29b); antiestrogen treatment alone did not alter promoter activity (Figure 29b).

A.



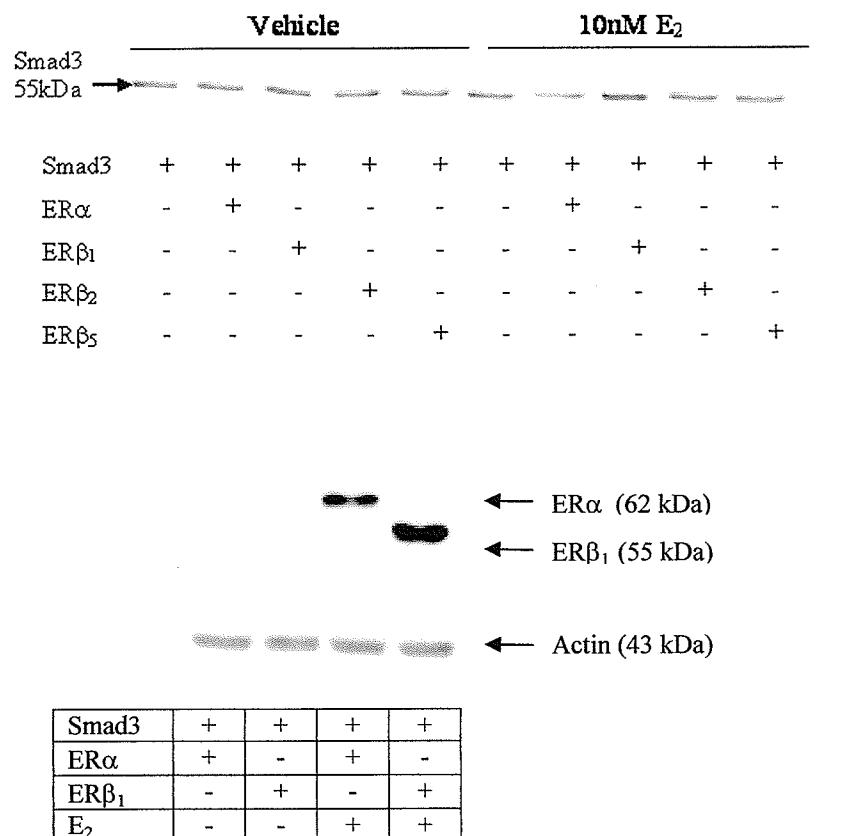
B.



**Figure 29. Effect of ER $\beta$ 1 on Smad3 induced collagen 7(A1)-524/+92 activity in Cos1 cells.** Cells were transiently transfected as described in Methods. DNA was maintained at equimolar concentrations between samples by addition of empty pcDNA3.1 vector. 48 h post-transfection, cells were harvested and assayed for luciferase and  $\beta$ -galactosidase activity. A) Cos1 cells transfected with 100ng pcDNA3- $\beta$ -gal, 10ng pGL3-collagen7(A1)-524/+92-luc, 1ug pCMV5B-Flag-Smad3 and increasing (0-1ug) amounts of pcDNA4-His/Xpress-ER $\beta$ 1 in the presence or absence of 10nM E<sub>2</sub>. B) Cos1 cells transfected with 100ng pcDNA3- $\beta$ -gal, 10ng pGL3-collagen7(A1)-524/+92-luc, 1ug pCMV5B-Flag-Smad3 and 1ug pcDNA4-His/Xpress-ER $\beta$ 1 in the presence of vehicle, 100nM 4OH-tamoxifen (Tam), 500nM ICI 182,780 (ICI), 10nM E<sub>2</sub> (E2), 100nM 4OH-tamoxifen plus 10nM E<sub>2</sub> (Tam+E2) or 500nM ICI 182,780 (ICI) plus 10nM E<sub>2</sub> (ICI+E2). Results are expressed as percent luciferase activity with control set as 100%. Results represent the mean  $\pm$  SEM, n=3 independent experiments. \*, \*\* and \*\*\*\* indicates significant differences (p<0.05, p<0.01 and p<0.001, Student's t-test) as compared to A) corresponding control or B) E<sub>2</sub> treated samples.

One possible mechanism through which ER $\alpha$ / $\beta_1$  may inhibit Smad3 signaling is through a decrease in Smad3 protein levels. However, western blot analysis of whole cell extracts from Cos1 cells transiently transfected with ER $\alpha$ / $\beta_1$  and Smad3 in the presence or absence of E<sub>2</sub> suggest that activated ER does not affect Smad3 protein expression in Cos1 cells (Figure 30a). Interestingly however, ER $\alpha$  and ER $\beta_1$  expression appeared to be higher in samples treated with 10nM E<sub>2</sub> for 48 h than vehicle control ( $p<0.05$ ) while no significant differences were observed between ER $\alpha$  and ER $\beta_1$  expression (Figure 30b). In this case, both ER expression vectors which were transiently transfected into Cos1 cells encoded proteins which were tagged at the N-terminus with an Xpress epitope, allowing for the simultaneous detection of ER $\alpha$  and ER $\beta$  upon immunoblotting with an Xpress antibody. The regulation of ER by estrogen appears to be cell and/or tissue type specific. In the human mammary gland and in cultured MCF-7 breast cancer cells, E<sub>2</sub> has been shown to increase the degradation of ER $\alpha$  protein levels by targeting the ER to the proteasome (408, 415) and thereby decreasing steady state protein levels (416). This observation in cell culture closely resembles studies utilizing human breast biopsy tissue in which ER $\alpha$  expression is greater in tissues taken from postmenopausal women than those from premenopausal women (362, 417-419). In contrast, E<sub>2</sub> increases the expression of ER $\alpha$  in human pituitary, kidney and retinal pigment epithelial cells (420-422). While limited data are available with respect to ER $\beta$  turnover, it has been shown that in MCF-7 cells over-expressing ER $\beta$ , estradiol decreases the expression of the ER $\beta$  protein (423, 424). In contrast, ER $\beta$  mRNA and protein expression increases with estradiol treatment in the breast cancer cell line, T47D (424). As Cos1 cells are African green monkey kidney cells, the up-regulation of ER by ligand may be a true observation

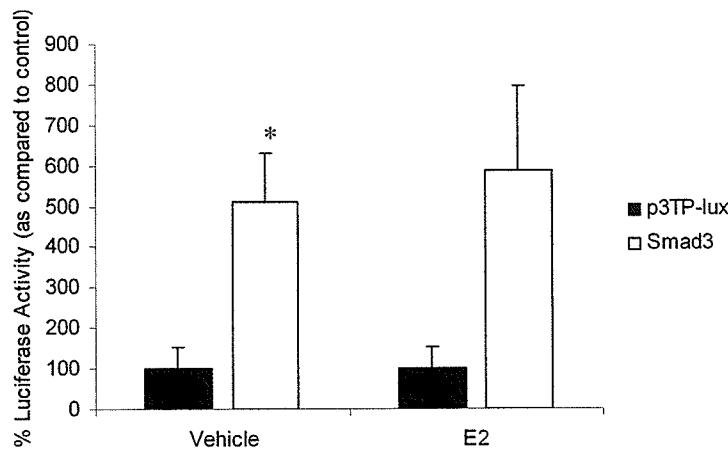
in this system. However, one should keep in mind that we are transiently transfecting an ER plasmid into these cells and thus, the normal regulatory mechanism of transcription may be disrupted in part because of the lack of chromatin organization.



**Figure 30. Western blot of Smad3 and ER in Cos1 transient transfections.** Cos1 cells were transiently transfected with 1ug p3TP-lux, 1ug pCH110, 1ug pCMV5B-Flag-Smad3 and either 2ug pcDNA4-His/Xpress ERα, 2ug pcDNA4-His/Xpress ERβ<sub>1</sub>, 2ug pcDNA4-His/Xpress ERβ<sub>2</sub> or 2ug pcDNA4-His/Xpress ERβ<sub>5</sub> in the absence or presence of 10nM E<sub>2</sub>. Equimolar concentrations of plasmid were kept between samples by addition of empty pcDNA3.1. Cells were harvested 48 h later with hot Joel lysis buffer to obtain whole cell protein extracts. 22ul of a 300ul whole cell protein extract was run on an SDS-10% polyacrylamide gel. Western blotting and immune detection were performed as described in Methods. Immune detection was using an anti-Smad3 antibody (Upstate Biotechnology) or an anti-Xpress antibody (Invitrogen), n=3 independent experiments.

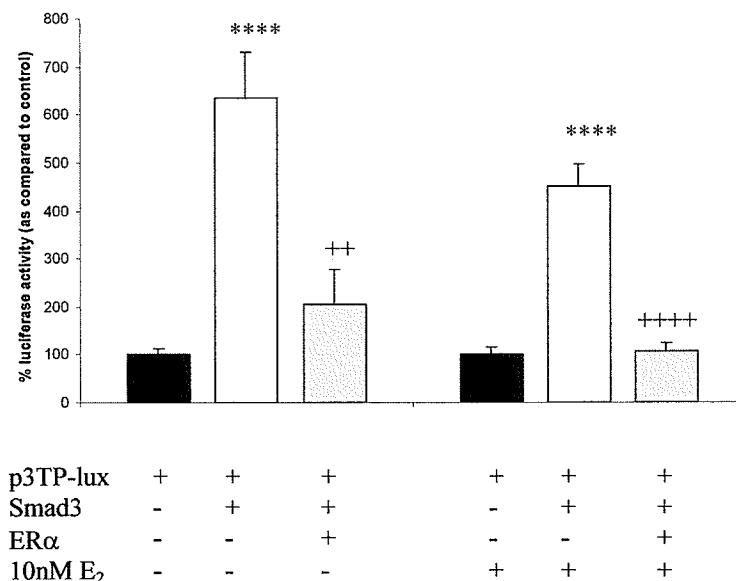
*iii. Effect of ER Expression on Smad3 Transcriptional Activity in MCF-7 Cells*

To determine the functional interaction between ER $\alpha$  and Smad3 in a breast cell background, we examined whether ER $\alpha$  affects Smad3 transcriptional activity in the MCF-7 human breast cancer cell line. MCF-7 cells are ER $\alpha$  positive human breast cancer cells, which are growth sensitive to E<sub>2</sub> and TGF $\beta$  (424-428). MCF-7 cells over-expressing Smad3 had a 5-fold increase in p3TP-lux transcriptional activity as compared to control cells not transfected with Smad3 ( $p<0.05$ ) (Figure 31). Initial experiments with cells grown under estrogen deplete conditions suggest that E<sub>2</sub> treatment had little if any effect on Smad3 activation of p3TP-lux (Figure 31). However, as the expression of ER $\alpha$  in MCF-7 cells is relatively low (20 - 45fmoles/mg cytosolic protein) (unpublished data) as compared to that found in ER positive breast tumors (often >50fmoles/mg cytosolic protein), it is reasonable to assume that an ER response may not be observed under these conditions. Therefore, we transiently over-expressed ER $\alpha$  in MCF-7 cells in order to increase its expression within these cells. This practice has been done previously in order to observe an ER response (281). As MCF-7 cells are difficult to transiently transfect, with generally low transfection efficiencies, western blot analysis of MCF-7 cells transiently transfected with ER $\alpha$  did not demonstrate any increase in ER $\alpha$  protein level (data not shown). However, the expression of ER $\alpha$  may have increased dramatically within a single cell that would not have been reflected under western blot conditions.

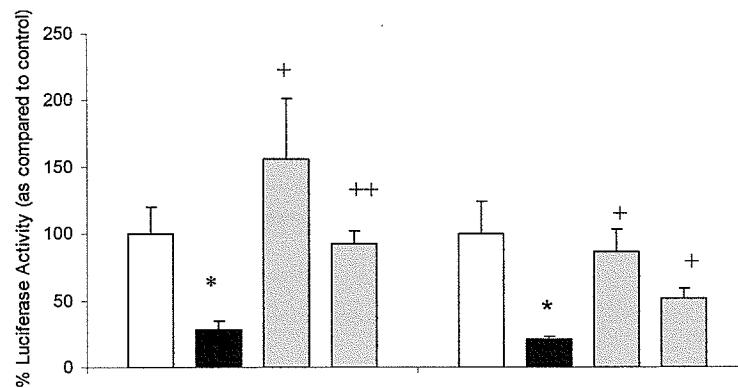


**Figure 31: p3TP-lux activity in MCF-7 cells over-expressing Smad3 in the presence or absence of estrogen.** MCF-7 cells were transiently transfected with 5ug p3TP-lux, 5ug pcMV5B-Flag Smad3 and 1ug pRL-tk-luc in the presence or absence of 10nM E<sub>2</sub> (E2). Empty pcDNA3.1 plasmid was used to ensure equimolar concentrations of plasmid between samples. 24 h post-transfection, cells were subjected to a 3 minute glycerol shock and new media containing either vehicle or 10nM E<sub>2</sub>, was added. Samples were collected 48 h post-transfection and dual luciferase assays were performed as described in Methods. Results represent the mean ±SEM, n=4 independent experiments. \* indicates a significant difference ( $p<0.05$ , Student's t-test) as compared to control cells not transfected with Smad3.

MCF-7 cells over-expressing ER $\alpha$  in the presence of p3TP-lux and Smad3 demonstrated a marked decrease ( $p<0.01$ ) in Smad3 activity that was independent of E<sub>2</sub> (Figures 32 and 33). No significant change in luciferase activity was observed between samples transfected with Smad3 and ER $\alpha$  in the presence or absence of estradiol (Figures 32 and 33). Co-treatment with either 4OH-tamoxifen ( $p<0.05$ ) or ICI 182,780 ( $p<0.05$ ) resulted in an inhibition of the effect of increased ER $\alpha$  expression on p3TP-lux transcription (Figure 33). Thus, while estradiol may not be required to mediate an altered response on Smad3 mediated p3TP-lux transcription in MCF-7 cells, ER $\alpha$  is involved.



**Figure 32:** p3TP-lux activity in MCF-7 cells transiently transfected with ER $\alpha$ . MCF-7 cells were transiently transfected with 5ug p3TP-lux, 5ug pCMV5B-Flag Smad3, 1ug pRL-tk-luc and 5ug pcDNA3.1 ER $\alpha$  in the presence or absence of 10nM E<sub>2</sub>. Empty pcDNA3.1 plasmid was used to ensure equimolar concentrations of plasmid between samples. 24 h post-transfection, cells were subjected to a three minute glycerol shock and new media containing vehicle or 10nM E<sub>2</sub> was added. Samples were collected 48 h post-transfection and dual luciferase assays were performed as described in Methods. Results represent the mean  $\pm$ SEM, n=7 independent experiments. \*\*\*p<0.001 (Student's t-test) as compared to cells transfected with p3TP-lux only. ++ and +++++ indicate significant differences (p<0.01 and p<0.001, Student's t-test) as compared to cells transfected with Smad3 only in the presence or absence of ligand.



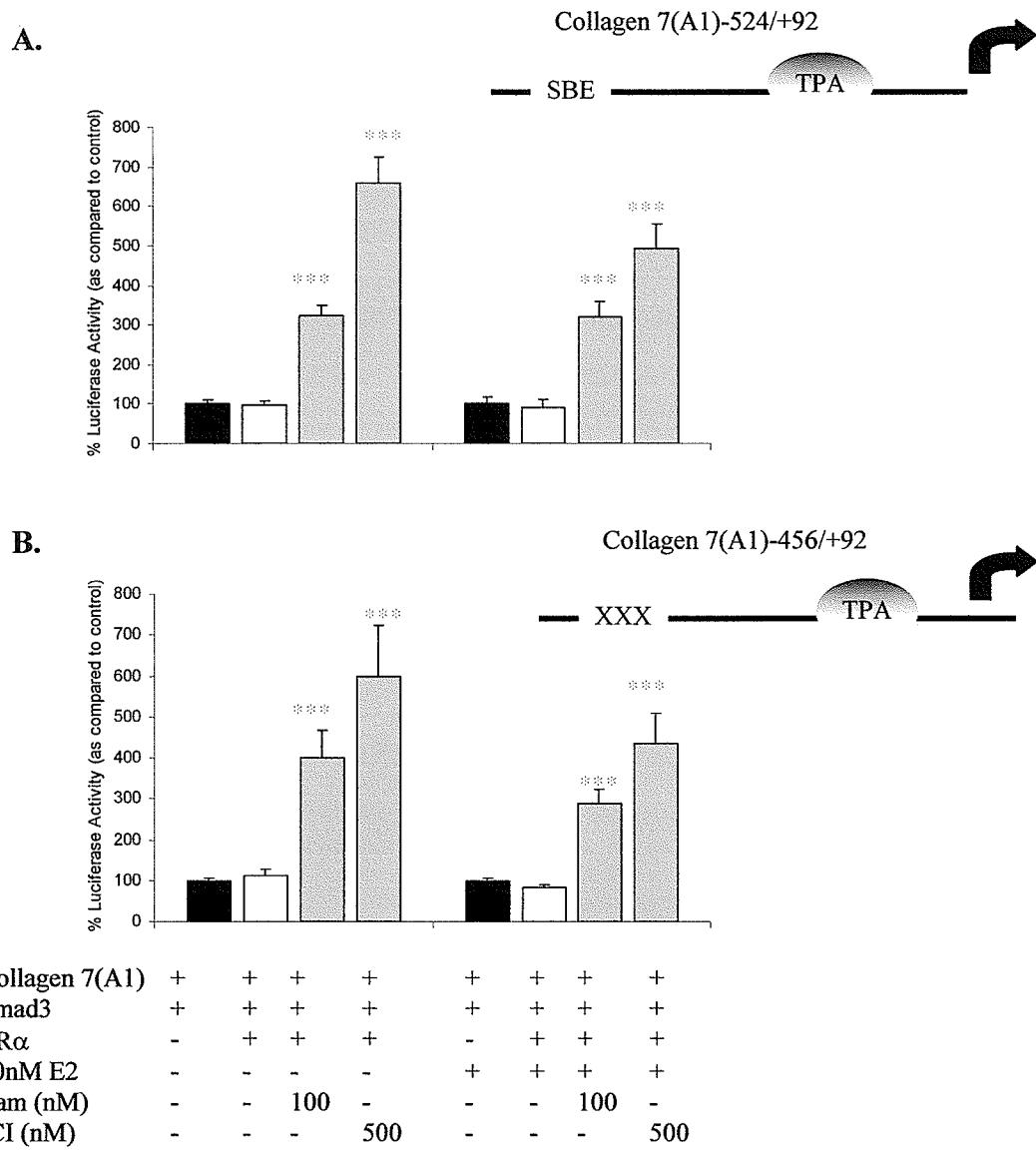
Smad3	+	+	+	+	+	+	+	+
ER $\alpha$	-	+	+	+	-	+	+	+
10nM E <sub>2</sub>	-	-	-	-	+	+	+	+
Tam (nM)	-	-	100	-	-	-	100	-
ICI (nM)	-	-	-	500	-	-	-	500

**Figure 33:** p3TP-lux activity in MCF-7 cells transiently transfected with ER $\alpha$  in the presence of antiestrogens. MCF-7 cells were transiently transfected with 5ug p3TP-lux, 5ug pCMV5B-Flag Smad3, 1ug pRL-tk-luc and 5ug pcDNA3.1 ER $\alpha$ . Empty pcDNA3.1 plasmid was used to ensure equimolar concentrations of plasmid between samples. 24 h post-transfection, cells were subjected to a 3 minute glycerol shock and new media containing vehicle, 10nM E<sub>2</sub>, 10nM E<sub>2</sub> + 100nM 4OH-tamoxifen (Tam) or 10nM E<sub>2</sub> + 500nM ICI 182,780 (ICI) was added. Samples were collected 48 h post-transfection and dual luciferase assays were performed as described in Methods. Results represent the mean  $\pm$ SEM, n=3 independent experiments. \*p<0.05 (Student's t-test) as compared to samples not transfected with ER $\alpha$ . + indicates significant differences (p<0.05, Student's t-test) as compared to samples transfected with ER $\alpha$  in the presence or absence of E<sub>2</sub>, respectively.

The effect of over-expressing ER $\alpha$  in MCF-7 cells on the collagen 7(A1) promoter was also tested. Over-expression of Smad3 in MCF-7 cells resulted in a 2-fold increase in collagen 7(A1) -524/+92 transcriptional activity (p<0.001) (data not shown). In contrast to the p3TP-lux promoter, over-expression of ER $\alpha$  in MCF-7 cells did not affect promoter activity in the presence or absence of 10nM E<sub>2</sub> (Figure 34a). However,

tamoxifen ( $p<0.001$ ) and ICI 182,780 ( $p<0.001$ ) up-regulated luciferase activity (Figure 34a), suggesting that ER $\alpha$  may affect collagen 7(A1) transcription through antiestrogens. The collagen 7(A1) -456/+92 luciferase plasmid contains a segment of the collagen 7(A1) promoter but lacks the SBE and thus, lacks TGF $\beta$  responsiveness (Figure 34b) (413). Therefore, over-expression of Smad3 in MCF-7 transient transfections did not affect promoter activity. However, in the presence of antiestrogens, there was a significant increase in luciferase activity ( $p<0.001$ ) while E $_2$  had no effect (Figure 34b). This response to antiestrogens mimicked that of the full length promoter sequence in which the SBE was present. Indeed, upon comparing the response to antiestrogens between these two constructs, no significant differences were observed (two-way ANOVA), suggesting that the SBE does not play a significant role in the increase of transcriptional activity by antiestrogens.

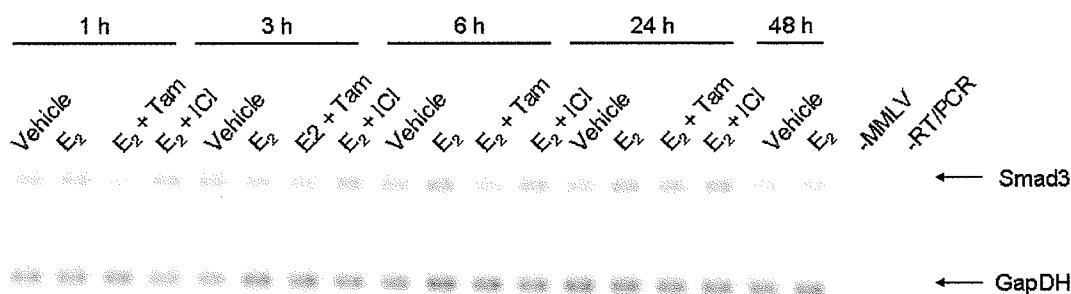
The TGF $\beta$  signaling pathway is mediated by Smad2 and Smad3, which are phosphorylated by T $\beta$ RI upon ligand binding, and by Smad4, which heterodimerizes with Smad2/3 (305). It has been suggested that antiestrogen treatment increases the phosphorylation of Smad2 and down-regulates Smad2 protein expression levels in MCF-7 cells (429). Therefore, we wanted to establish whether altered endogenous Smad3 expression is involved in the antiestrogen up-regulation of TGF $\beta$  responsive genes. MCF-7 cells were grown under estrogen deplete conditions for 4 days and treated with E $_2$  in the presence or absence of 100nM 4OH-tamoxifen or 500nM ICI 182,780 for various times. PCR and western blot analysis suggest that Smad3 mRNA (Figure 35) and protein expression levels do not change upon estrogen or antiestrogen treatment (results not shown).



Collagen 7(A1)	+	+	+	+	+	+	+	+
Smad3	+	+	+	+	+	+	+	+
ER $\alpha$	-	+	+	+	-	+	+	+
10nM E2	-	-	-	-	+	+	+	+
Tam (nM)	-	-	100	-	-	-	100	-
ICI (nM)	-	-	-	500	-	-	-	500

**Figure 34: Collagen 7(A1) activity in MCF-7 cells.** MCF-7 cells were transiently transfected with 2ug collagen 7(A1)-524/+92 (A), 2ug collagen 7(A1)-456/+92 (B), 3ug pCMV5B-Flag Smad3, 1ug pRL-tk-luc and 5ug pcDNA3.1 ER $\alpha$ . Empty pcDNA3.1 plasmid was used to ensure equimolar concentrations of plasmid between samples. 24 h post-transfection, cells were subjected to a 3 minute glycerol shock and new media containing vehicle, 10nM E<sub>2</sub>, 10nM E<sub>2</sub> + 100nM 4OH-tamoxifen (Tam) or 10nM E<sub>2</sub> + 500nM ICI 182,780 (ICI) was added. Samples were collected 48 h post-transfection and dual luciferase assays were performed as described in Methods. Results represent the mean  $\pm$ SEM, n=6 (A) or n=5 (B) independent experiments. \*\*\* indicates significant differences ( $p<0.001$ , Student's t-test) as compared to control samples.

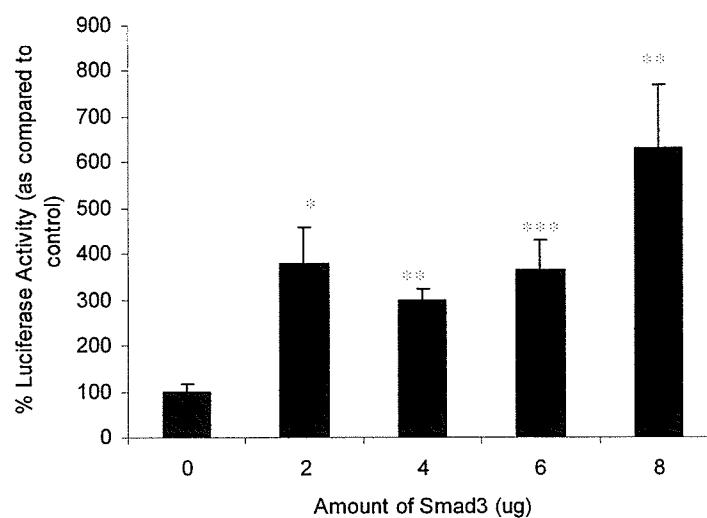
To ensure that this observation was not limited to one source of MCF-7 cells, we also tested the T5 human breast cancer cell line. Similar to that observed in MCF-7 cells, E<sub>2</sub> and antiestrogen treatment did not affect Smad3 mRNA or protein expression (results not shown). However, these results do not exclude the involvement of Smad2 expression in the antiestrogen up-regulation of TGF $\beta$  responsive genes as Smad2 levels were not determined.



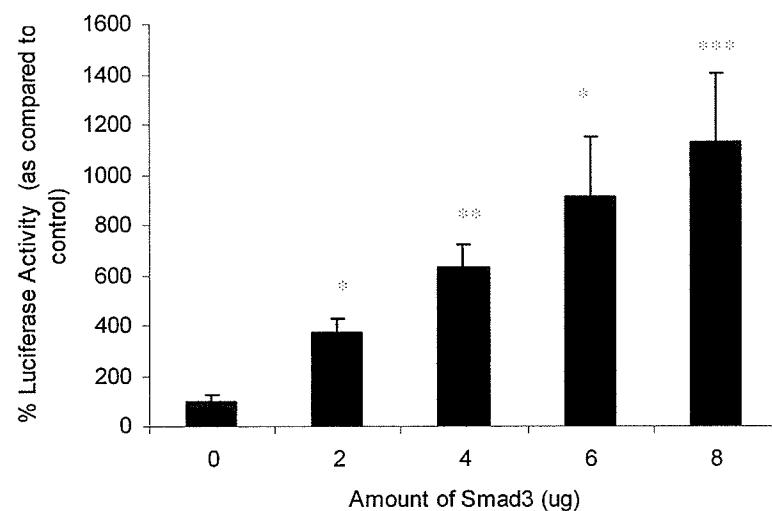
**Figure 35: Smad3 mRNA expression in MCF-7 cells.** MCF-7 cells were set-up in 6 well plates at  $5 \times 10^4$  cells/well in CS5%. Four days later, cells were exposed to vehicle, 10nM E<sub>2</sub>, 10nM E<sub>2</sub> + 100nM 4OH-tamoxifen or 10nM E<sub>2</sub> + 500nM ICI 182,780 over 1, 3, 6, 24 or 48 hours (h). Cells were harvested and total RNA was extracted, reverse transcribed and PCR amplified using Smad3 and GapDH primer pairs as described in Methods. PCR products were run out on a 1% agarose gel and visualized with the Chemidoc system. Representative gel of n = 3 independent experiments.

To further investigate the effect of increased ER expression in human breast cancer cells on TGF $\beta$ /Smad3 transcriptional activity, we have stably expressed tetracycline-inducible (TET-ON) human ER $\alpha$  and ER $\beta_1$  in MCF-7 human breast cancer cells. The generation and characterization of MCF-7 cells stably expressing rTA (reverse tetracycline transactivator, clone 89rTA), the doxycycline-inducible GFP tagged ER $\alpha$  (clone 11) and His/Xpress epitope tagged ER $\beta_1$  (clone 47) have been previously described (399, 424). Maximal induction of ER $\alpha$  and ER $\beta_1$  was achieved by treating the cells with 2ug/mL doxycycline for 48 h, as determined by western blot (data not shown). Ligand binding assays also suggest that the level of ER $\alpha$  and ER $\beta_1$  induction by doxycycline is similar (424). As expected, over-expression of Smad3 in the ER $\alpha$  and ER $\beta_1$  expressing clones resulted in a significant increase ( $p<0.05$ ) in p3TP-lux activity (Figure 36a+b). Transient transfection experiments with p3TP-lux and Smad3 in the ER $\beta_1$  over-expressing cells show that 4OH-tamoxifen ( $p<0.005$ ) and ICI 182,780 ( $p<0.01$ ) significantly increased p3TP-lux activity in samples treated with doxycycline as compared to samples treated with vehicle alone in the absence of estradiol (Figure 37a). No significant effect of antiestrogens in the absence of over-expressed ER $\beta_1$  (i.e. no doxycycline) was observed under estrogen deplete conditions. Estrogen treatment resulted in a significant decrease ( $p<0.05$ ) in p3TP-lux activity in the doxycycline treated samples (compared to vehicle control) and this effect was inhibited by co-treatment with 4OH-tamoxifen ( $p<0.005$ ) or ICI 182,780 ( $p<0.01$ ) (Figure 37a). In the absence of doxycycline, estradiol had no effect on Smad3 transcriptional activity. However, antiestrogen treatment significantly ( $p<0.05$ ) increased p3TP-lux activation in the presence of estradiol but in the absence of doxycycline, albeit to a lesser extent than

A.



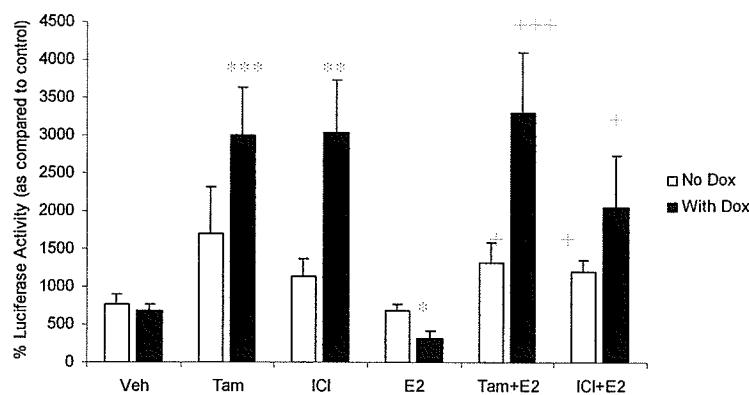
B.



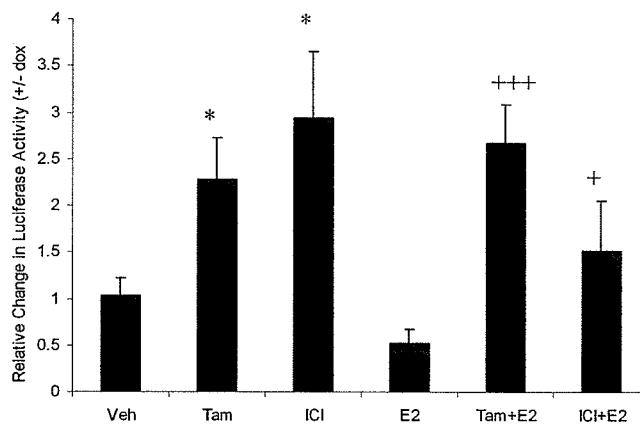
**Figure 36. Effect of Smad3 on p3TP-lux activity in ER $\alpha$  and ER $\beta_1$  inducible MCF-7 cells.** MCF-7 cells over-expressing (A) ER $\alpha$  and (B) ER $\beta_1$  were transiently transfected with 5ug p3TP-lux, 1ug pRL-tk-luc and increasing amounts (2-8ug) of pcDNA3.1-Flag-Smad3. Empty pcDNA3.1 plasmid was used to ensure equimolar concentrations of plasmid between samples. 24 h post-transfection, cells were subjected to a 5 minute glycerol shock and new media was added. Samples were collected 48 h post-transfection. Dual luciferase assays of ER $\alpha$  and ER $\beta_1$  over-expressing MCF-7 cells were performed as described in Methods. Values represent the percent luciferase activity with 0ng Smad3 set as 100%. Results are expressed as the mean  $\pm$ SEM, n=4 independent experiments. \*p<0.05, \*\*p<0.01 and \*\*\*p<0.005 Student's t-test (compared to 0ng Smad3).

that observed in the presence of doxycycline (Figure 37a). In comparing the relative change in luciferase activity between samples treated with doxycycline and those not treated (i.e. plus doxycycline/no doxycycline), there was a significant increase in p3TP-lux activity in samples treated with tamoxifen ( $p<0.05$ ) or ICI 182,780 ( $p<0.05$ ) as compared to vehicle control (Figure 37b), suggesting that ER $\beta_1$  over-expression resulted in an increase in Smad3 mediated transcription in the presence of antiestrogens. A similar effect was also observed in the presence of estradiol (Figure 37b). Western blot analysis of whole cell extracts demonstrate that the ER $\beta_1$  transgene was induced under our conditions and that similar levels of expression were obtained between experimental replicates (Figure 38).

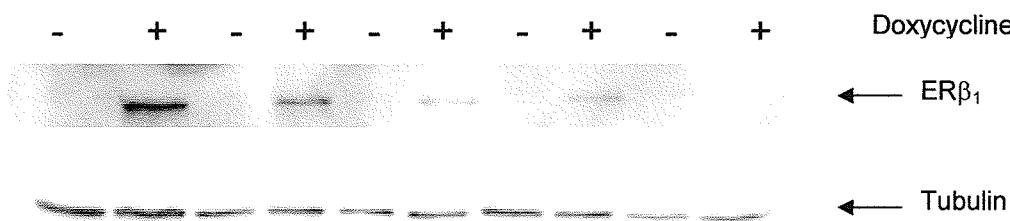
A.



B.



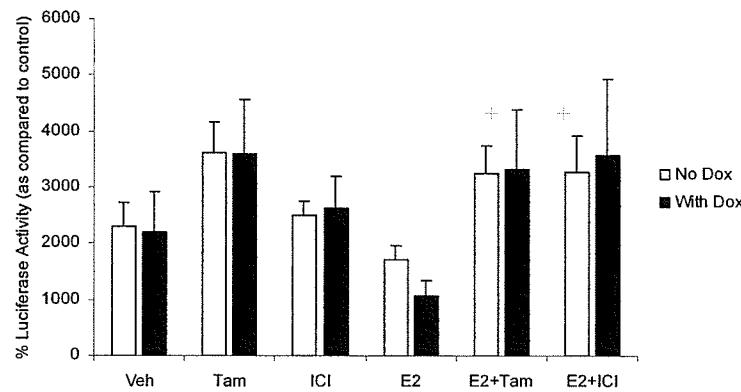
**Figure 37:** p3TP-lux activity in ER $\beta_1$  inducible MCF-7 cells in the presence or absence of doxycycline. ER $\beta_1$  over-expressing MCF-7 cells were transiently transfected with 5ug p3TP-lux, 2ug pcDNA3.1-Flag Smad3 and 1ug pRL-tk-luc in the presence or absence of doxycycline. Empty pcDNA3.1 plasmid was used to ensure equimolar concentrations of plasmid between samples. 24 h post-transfection, cells were subjected to 5 min glycerol shock and new media containing vehicle (Veh), 100nM 4OH-tamoxifen (Tam), 500nM ICI 182,780, 10nM E<sub>2</sub> (E2), 10nM E<sub>2</sub> + 100nM 4OH-tamoxifen (Tam+E2) or 10nM E<sub>2</sub> + 500nM ICI 182,780 (ICI+E2) was added. Samples were collected 48 h post-transfection. Dual luciferase assays were performed as described in Methods. A) ER $\beta_1$  over-expressing MCF-7 cells treated with or without doxycycline for 48 h. Values represent the percent luciferase activity with cells not transfected with Smad3 set as 100%. B) Relative change in luciferase activity between those samples treated with doxycycline and those not treated with doxycycline (+/- dox). Data represents the mean  $\pm$ SEM, n=6 independent experiments. \*p<0.05, \*\*p<0.01 and \*\*\*p<0.005 indicates significant differences (Student's t-test) as compared to vehicle control samples. +p<0.05 and +++p<0.005 indicates significant differences (Student's t-test) as compared to E2 treated samples.



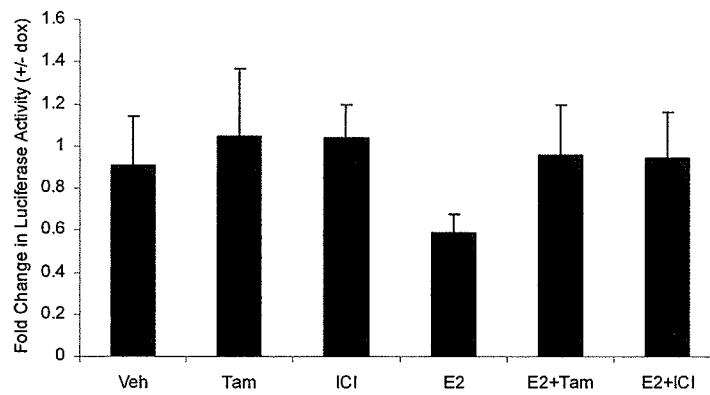
**Figure 38:** Western blot of ER $\beta$ <sub>1</sub> in doxycycline inducible MCF-7 cells. ER $\beta$ <sub>1</sub> over-expressing MCF-7 cells were treated without or with doxycycline for 24 h. Cells were subjected to a 5 min glycerol shock and new media containing vehicle or doxycycline was added. 24 h later, whole cell extracts were prepared as described in Methods. 22ul from a 300ul extract was run on an SDS-10% acrylamide gel. Western blotting and immune detection were performed as described in Methods. Immune detection was using an anti-xpress antibody (Invitrogen) or an anti-tubulin antibody (Neomarkers). (+) samples treated with doxycycline for 48 h in n=5 independent experiments; (-) samples not treated with doxycycline for n=5 independent experiments.

In the ER $\alpha$  over-expressing clones however, there was only a significant increase in p3TP-lux activity in the absence of doxycycline with antiestrogen treatment in the presence of estradiol (Figure 39a). No significant change in luciferase activity between samples treated with doxycycline was observed either in the presence or absence of ligand (Figure 39a). When comparing the relative change in Smad3 mediated p3TP-lux activation, there was no significant difference between those samples over-expressing ER $\alpha$  and those that did not, suggesting that ER $\alpha$  had little effect on Smad3 mediated activation under these conditions (Figure 39b).

A.

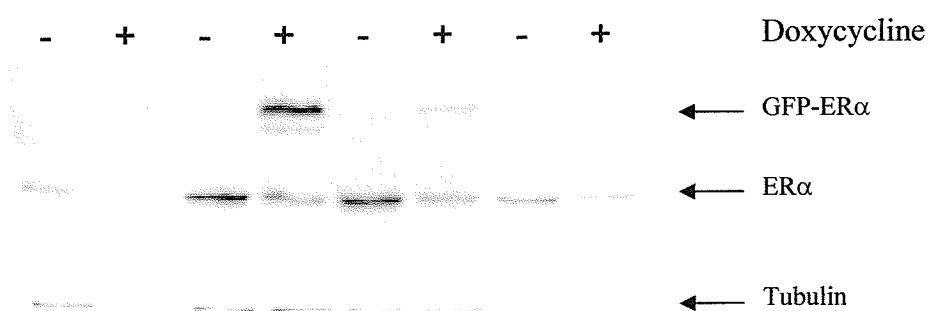


B.



**Figure 39:** p3TP-lux activity in the ER $\alpha$  inducible MCF-7 cells. MCF-7 cells over-expressing ER $\alpha$  were transiently transfected with 5ug p3TP-lux, 4ug pcDNA3.1-Flag Smad3 and 1ug pRL-tk-luc in the presence or absence of doxycycline. Empty pcDNA3.1 plasmid was used to ensure equimolar concentrations of plasmid between samples. 24 h post-transfection, cells were glycerol shocked and new media containing vehicle (Veh), 10nM E<sub>2</sub>, 100nM 4OH-tamoxifen (Tam), 100nM 4OH-tamoxifen + 10nM E<sub>2</sub> (Tam+E2), 500nM ICI 182,780 (ICI) or 500nM ICI 182,780 + 10nM E<sub>2</sub> (ICI+E2) was added. Samples were collected 48 h post-transfection and dual luciferase assays were performed as described in Methods. A) ER $\alpha$  over-expressing MCF-7 cells treated with or without doxycycline for 48 h. Values represent the percent luciferase activity with cells not transfected with Smad3 set as 100%. B) Relative change in luciferase activity between those samples treated with doxycycline and those not treated with doxycycline (+/- dox). Data represents the mean  $\pm$ SEM, n=6 independent experiments. <sup>+</sup> p<0.05, indicates significant differences (Student's t-test) compared to samples treated with E2 only in the absence of doxycycline.

Western blot analysis of whole cell extracts show that the level of ER $\alpha$  protein expression varies widely between experiments and the ratio between endogenous ER $\alpha$  and that of the transgene also is altered between replicate samples (Figure 40), even though ligand binding assays demonstrate a significant increase in total ER $\alpha$  expression (382). Thus, the interpretation of these results is difficult.



**Figure 40:** Western blot of ER $\alpha$  in doxycycline inducible MCF-7 cells. ER $\alpha$  over-expressing MCF-7 cells were treated without or with doxycycline for 24 h. Cells were glycerol shocked for 5 min and new media containing vehicle or doxycycline was added. 24 h later, whole cell extracts were prepared as described in Methods. 22ul of a 300ul extract was run on a SDS-10% acrylamide gel. Western blotting and immune detection were performed as described in Methods. Immune detection was using an anti-ER $\alpha$  antibody (NovoCastra) or an anti-tubulin antibody (Neomarkers), n=4 independent experiments. (+) samples treated with doxycycline for 48 h; (-) samples not treated with doxycycline.

### **Key Findings from Section I**

In Section I of the results for this thesis, we have characterized the functional interaction between Smad3, a downstream signaling protein of the TGF $\beta$  signal transduction pathway, and ER in Cos1 and MCF-7 cells. Table 4 summarizes results obtained. In addition, we have also demonstrated:

1. Smad3 has little if any effect on ER $\alpha$  nor ER $\beta_1$  transcriptional activity on an ERE containing reporter plasmid, despite a significant increase in ER transcriptional activity in the presence of estrogen in Cos1 cells.
2. Smad3 does not affect ER $\alpha$  transcriptional activity on the TGF $\beta_3$ -luc reporter plasmid (a plasmid that models the non-classical mechanism of ER gene regulation), despite a significant increase in ligand-induced reporter plasmid activity in Cos1 cells.
3. Total Smad3 mRNA and protein expression are not altered upon estrogen or antiestrogen treatment in MCF-7 cells.

Having characterized the functional interaction between ER and Smad3, we next sought to examine the molecular mechanism by which ER modulates Smad3 transcriptional activity in section II of the results.

p3TP-lux Reporter Plasmid		
Expression Plasmid	Cos1	MCF-7
Smad3	↑ Smad3 overexpression ↑ Smad3 + Ap1	↑ Smad3 overexpression
ERα	ERα alone – no effect	---
Smad3 + ERα	↓ + E <sub>2</sub> ↑ + Antiestrogens (inhibited effect of E <sub>2</sub> -ERα)	↓ Ligand-independent (ERα overexpression) ↑ + Antiestrogens (inhibited effect of ERα overexpression)
ERβ <sub>1</sub>	ERβ <sub>1</sub> alone – no effect	---
Smad3 + ERβ <sub>1</sub>	↓ + E <sub>2</sub> + Antiestrogens (reversed effect of E <sub>2</sub> -ERβ <sub>1</sub> )	---
ERβ <sub>2</sub> /ERβ <sub>5</sub>	No effect	---
Collagen 7(A1)-524/+92 Reporter Plasmid		
Expression Plasmid	Cos1	MCF-7
Smad3	↑ Smad3 overexpression ↓ Smad3 + Ap1	---
ERα	ERα alone – no effect	---
Smad3 + ERα	↑ Ligand-independent ↓ + Antiestrogens (inhibited effect of E <sub>2</sub> -ERα)	No effect ↑ + Antiestrogens (independent of SBE)
ERβ <sub>1</sub>	---	---
Smad3 + ERβ <sub>1</sub>	↑ + E <sub>2</sub> ↓ + Antiestrogens (inhibited effect of E <sub>2</sub> -ERβ <sub>1</sub> )	---

**Table 4: Effects of ERα and ERβ on Smad3 transcriptional activity in Cos1 and MCF-7 cells (summary).**

## **SECTION II. MECHANISM OF CROSS-TALK BETWEEN ER AND TGF $\beta$**

### **A. Direct Interaction between ER and Smad3**

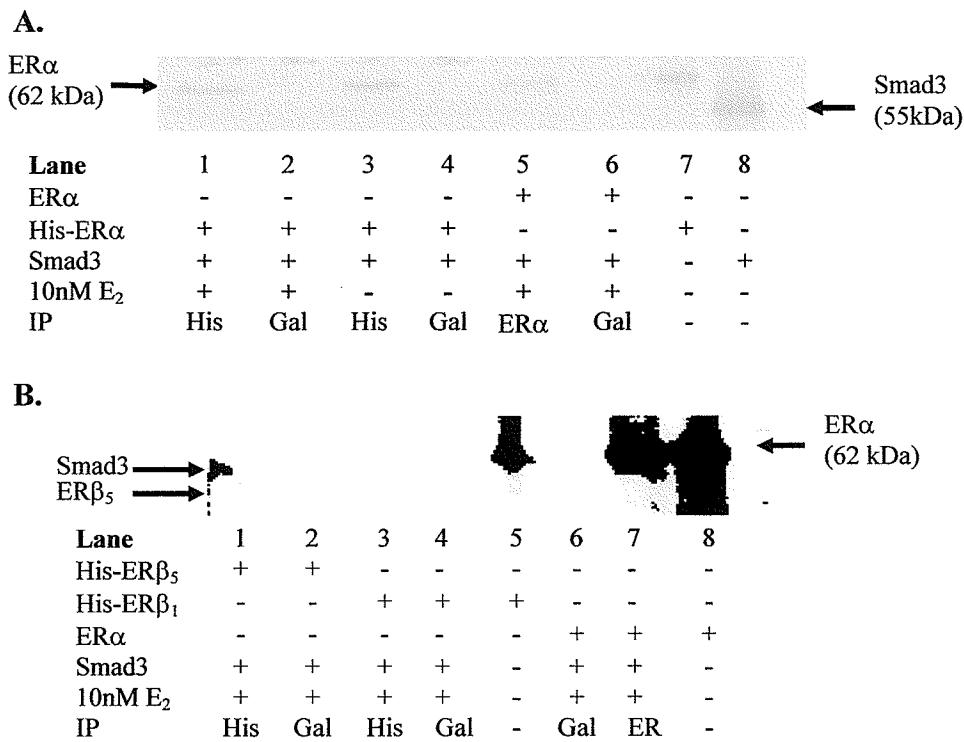
#### **Rationale**

From section I of our results, it is evident that while Smad3 does not affect ER transcriptional activity, ER $\alpha$  and ER $\beta$  clearly influence Smad3 transcriptional activity in Cos1 cells. Thus, we next wanted to determine the molecular mechanism(s) by which ER modulates Smad3 transcriptional activity. One possible mechanism is through direct protein:protein interactions between ER and Smad3. Interactions between other steroid receptors, including VDR, AR and GR, and the TGF $\beta$  signaling pathway have been demonstrated by other laboratories (320, 322, 396). Thus, we wanted to confirm the observation that a direct interaction between ER and Smad3 occurs in mammalian cells and co-immunoprecipitation (co-IP) experiments were performed both *in vitro* and *in situ*.

#### **Results**

To determine whether ER could directly bind to Smad3 *in vitro*,  $^{35}$ S radiolabeled ER and Smad3 were generated by *in vitro* transcription/translation using the TnT<sup>®</sup> Coupled Reticulocyte Lysate System (Promega) as described in Methods. Proteins were mixed on ice in the presence or absence of 10nM E<sub>2</sub> for 24 h and immunoprecipitated (IP) with antibodies to either ER $\alpha$ , His (recognizes the histidine residues on the tagged ER) or  $\beta$ -galactosidase. The  $\beta$ -galactosidase antibody served as a negative control for the IP as it is an isotype matched antibody to that of ER $\alpha$  (mouse monoclonal IgG). IPs with a Smad3 specific antibody were not performed *in vitro* as this antibody was raised in rabbits and the reticulocyte lysate in which the proteins were produced is also rabbit. IP

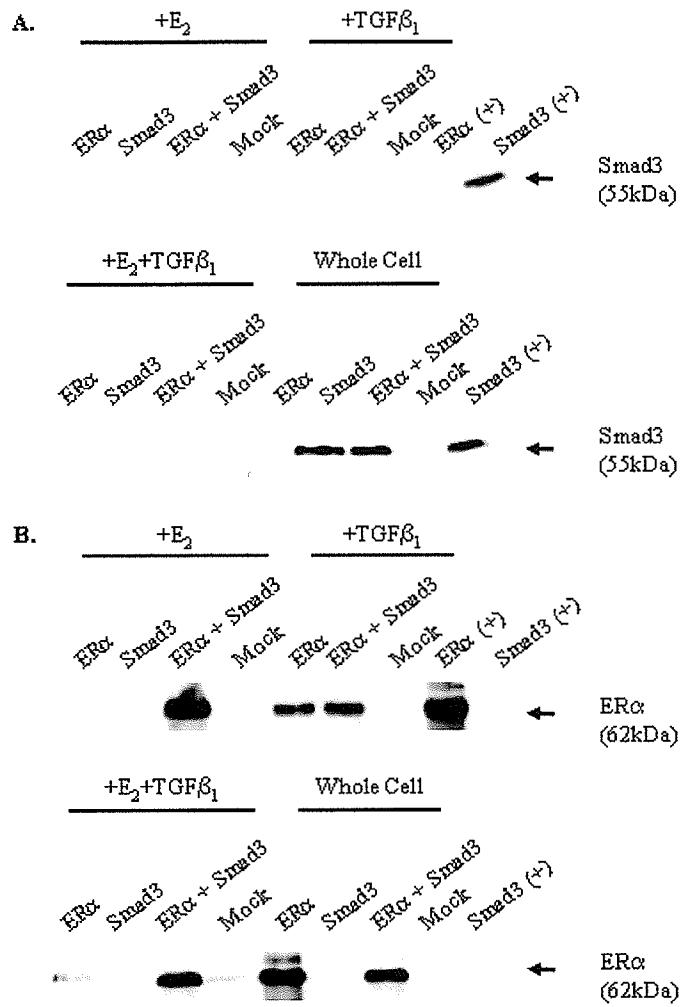
products were analyzed by electrophoresis on a 10% SDS-PAGE gel and visualized by autoradiography. No detectable ER $\alpha$  signal was observed when IP was undertaken using the  $\beta$ -galactosidase antibody (Figure 41a, lane 6). However, *in vitro* translated ER $\alpha$  was detected after IP with either an ER $\alpha$  specific antibody (Figure 41a, lane 5) or with the His antibody (Figure 41a, lanes 1 and 3), which recognizes the His tag on the His/Xpress-ER $\alpha$ . These data provide evidence for the successful IP of *in vitro* translated ER $\alpha$  from solution. However, under these IP conditions, no band corresponding to Smad3 was detected suggesting that Smad3 did not co-IP with ER $\alpha$  either in the presence or absence of estradiol, in spite of Smad3 successfully being *in vitro* translated (Figure 41a, lane 8). Similar results were obtained in attempting to co-IP Smad3 with ER $\beta_1$  and ER $\beta_5$  (Figure 41b). A non-specific band corresponding to Smad3 was found both in the specific and non-specific IP lanes at similar intensities (Figure 41b, lanes 2 and 4), suggesting that Smad3 was not specifically co-IP with ER $\beta_5$  or ER $\beta_1$  under these conditions.



**Figure 41:** Lack of co-immunoprecipitation of *in vitro* transcribed/translated ER and Smad3 in the presence or absence of 10nM E<sub>2</sub>. ER and Smad3 were *in vitro* transcribed/translated as described in Methods. Samples were mixed in the presence or absence of ligand for 24 h and subsequently IP with either His, ER $\alpha$  or  $\beta$ -galactosidase (Gal) antibodies. Samples were run out on a 10% SDS-PAGE gel, dried and visualized by autoradiography. A) *In vitro* transcribed/translated His/Xpress tagged ER $\alpha$  or untagged ER $\alpha$  IP. Lanes 7 and 8 represent the presence of *in vitro* transcribed/translated His/Xpress tagged ER $\alpha$  or Smad3 before IP, respectively. B) *In vitro* translated His/Xpress tagged ER $\beta_5$  and ER $\beta_1$  IP. Lanes 5 and 8 represent the presence of *in vitro* transcribed/translated ER $\beta_1$  or ER $\alpha$  before IP, respectively. Arrows indicate the molecular mass (kDa) of the bands of interest as determined by a molecular mass standard run in parallel with samples. Results are representative of n=3 independent experiments.

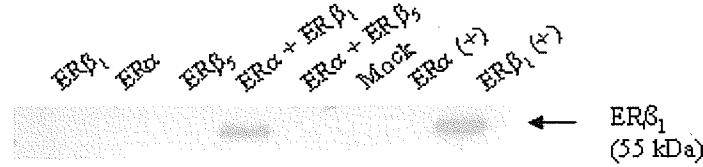
Several attempts were also made to determine if the ER/Smad3 interaction may be observed *in situ* in Cos1 cells. Cells were transiently transfected with ER and Smad3 in the presence or absence of 10nM E<sub>2</sub>. Cell lysates were prepared 48 h later and IP for ER $\alpha$  as described in Methods. Smad3 protein is absent upon immunoblot of ER $\alpha$  IP

samples (Figure 42a) while the presence of ER $\alpha$  protein can be detected in ER $\alpha$  transfected, IP cells (Figure 42b). A band corresponding to the molecular mass of Smad3 (55 kDa) was found in untransfected (mock) Cos1 cell samples (Figure 42a), suggesting that this band is not indicative of successful Smad3 co-IP with ER. Similar results were obtained when Smad3 was used to IP and membranes were immunoblotted for ER $\alpha$  (results not shown). Therefore, results from these experiments suggest either that direct binding of ER and Smad3 does not occur *in situ* in Cos1 cells or that the interaction could not be detected using the IP methodology. To ensure that our methodology would successfully co-IP two proteins, we performed the same experiments as outlined above using ER $\alpha$  and ER $\beta_1$ . The heterodimerization of these two proteins has been previously demonstrated (82). Similar to results previously published, we were able to successfully co-IP ER $\alpha$  and ER $\beta_1$  in Cos1 cells transiently transfected with ER in the presence of estradiol, suggesting that IP of two proteins under these conditions is possible (Figure 43).

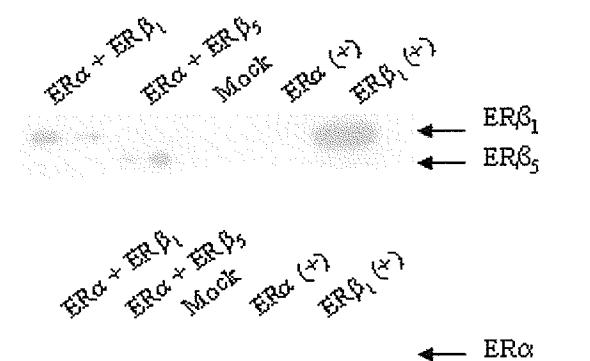


**Figure 42:** Lack of co-immunoprecipitation of ER $\alpha$  and Smad3 in Cos1 cells. Cos1 cells were set-up in 100mm dishes and transiently transfected with 1ug pcDNA3.1-ER $\alpha$  and 1ug pCMV5B-Flag-Smad3 in the presence of 10nM E<sub>2</sub> or 10ng/ml TGF $\beta$ <sub>1</sub> as described in Methods. Mock transfected cells were used as negative control. 48 h later, samples were harvested and IP with 3ug mouse monoclonal ER $\alpha$  antibody (NovoCastr). Samples were analyzed by 10% SDS-PAGE and western blotting. (A) Membranes IB for Smad3 (Upstate Biotechnology). Arrows indicate the expected molecular mass of Smad3 (55 kDa). (B) Membranes from A were stripped and subsequently IB for ER $\alpha$  (NovoCastr). Arrows indicate the expected molecular mass of transfected ER $\alpha$  (62kDa). Whole cell is the whole cell lysate proteins present in the sample prior to IP (22ul of a 300ul sample), representing 18% of the IP. Results are representative of n=2 independent experiments.

**A. ER $\alpha$  IP**



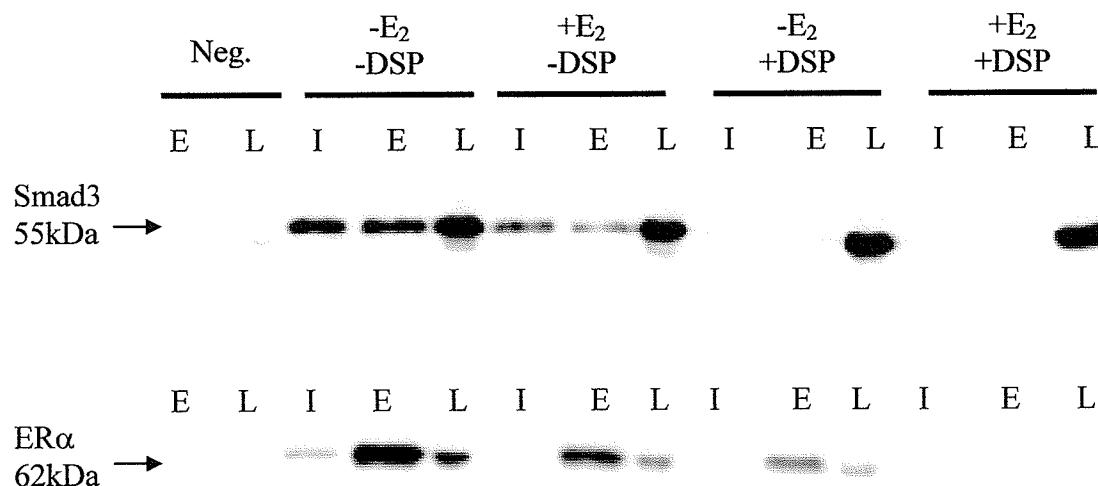
**B. His IP**



**Figure 43: Co-immunoprecipitation of ER $\alpha$  and ER $\beta_1$  in Cos1 cells.**  
Cos1 cells were transiently transfected with 1ug pcDNA3.1-ER $\alpha$ , 1ug pcDNA4-His/Xpress ER $\beta_1$  or 1ug pcDNA4-His/Xpress ER $\beta_5$  as described in Methods. Cells were harvested 48 h later and IP with A) 1ug mouse monoclonal ER $\alpha$  (NovoCastra) or B) 1ug mouse monoclonal His G (Invitrogen). Samples were analyzed by a 10% SDS-PAGE and western blotting. Membranes were immunoblotted for Xpress (Invitrogen), of which recognizes the Xpress tag on ER $\beta$  protein, or immunoblotted for ER $\alpha$  (NovoCastra). Results are representative of n=3 independent experiments.

Further experiments within our laboratory have validated the use of cross-linking agents in the determination of protein-protein interactions. DSP (dithiobis[succinimidylpropionate]), is a homobifunctional N-hydroxysuccimide ester that reversibly conjugates proteins through their amino groups (430). Several other laboratories have used this compound in the identification of protein-protein interactions (431, 432) and recent results from our laboratory suggest that the interaction between ER $\alpha$  and ER $\beta_1$  with the ER coactivator, AIB1, can only be detected using this cross-linking agent. Thus, with the technical assistance of Kanyarat Ung, a technician in Dr. Murphy's laboratory, cross-linking experiments using DSP were conducted to determine whether an interaction between ER and Smad3 could be observed in Cos1 cells. Cos1 cells were transiently transfected with ER and Smad3 in the presence or absence of E<sub>2</sub>. Forty-eight hours post-transfection, cells were cross-linked with DSP as described in Methods and IPs with ER $\alpha$  and a non-specific antibody of the same class (insulin receptor) were performed. While a band corresponding to the molecular mass of Smad3 was observed upon IP with an ER $\alpha$  specific antibody, a band of similar intensity and mass was also observed with our non-specific antibody (Figure 44). We concluded that Smad3 was being IP from solution in a non-specific fashion (i.e. Smad3 may be "sticky" in that it may bind non-specifically to the protein G sepharose beads or to the IP antibody), clearly demonstrating the need for appropriate negative controls in an IP experiment. These results provide further evidence supporting the observation that ER either does not directly interact with Smad3 under our conditions or that they interact through a site precluding the IP antibody. Interestingly, while these experiments were being conducted, the physical interaction between Smad3 and ER was described by

others (335). Through a series of co-IPs, Matsdua et. al. (335) demonstrated that Smad3 interacts with ER $\alpha$  and ER $\beta_1$  in 293T and MCF-7 cells and that this interaction was dependent on activation of both the estrogen and TGF $\beta$  signaling cascades. Further studies by these authors showed that ER $\alpha$  and ER $\beta_1$  interact with Smads 1, 2, 3 and 4 upon stimulation of the ER and TGF $\beta$  pathways (335, 336). Therefore, cell type specific factors may influence the interaction of ERs and Smad3.



**Figure 44:** Lack of co-immunoprecipitation of ER $\alpha$  and Smad3 in Cos1 cells using DSP as a cross-linking agent. Cos1 cells were transiently transfected with 1ug pcDNA3.1-ER $\alpha$  and 1ug pCMV5B-Flag-Smad3 in the presence or absence of 10nM E<sub>2</sub> as described in Methods. Mock transfected cells (Neg.) were used as negative control. 48 h post-transfection, proteins were cross-linked with DSP for 2 h, harvested in IP buffer and subsequently IP with either 3ug rabbit polyclonal ER $\alpha$  (Santa Cruz; lanes indicated "E") or 3ug rabbit polyclonal insulin receptor (Santa Cruz; lanes indicated "I"). Samples were analyzed by 10% SDS-PAGE and western blotting. Top panel: membranes IB for Smad3 (Upstate Biotechnology). Arrows indicate the expected molecular mass of Smad3 (55 kDa). Bottom panel: membranes previously IB for Smad3 were stripped as described in Methods and subsequently IB for ER $\alpha$  (NovoCastra). Arrows indicate the expected molecular mass of transfected ER $\alpha$  (62kDa). Whole cell lysates (lanes indicated "L") represent proteins present in the sample prior to IP (30ul of a 300ul sample). Results are representative of n=2 independent experiments.

## B. Involvement of Ap-1 Transcription Factors

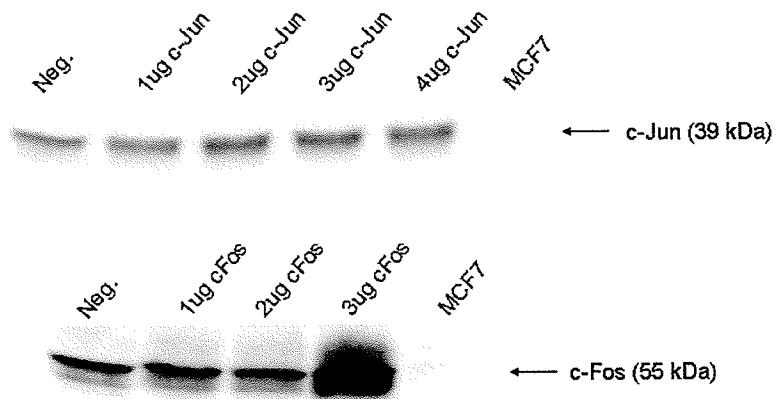
### Rationale

Having disproved the hypothesis that ER modulates TGF $\beta$  signaling through direct protein interactions with Smad3, we sought to explore other possible mechanisms through which activated ER may modulate Smad3 transcriptional activity. ER $\alpha$  has been shown to directly bind to and interact with c-Jun but not Fos family members (224, 225, 231, 287) thereby, modulating specific Ap-1 transcriptional responses (225). Stimulation of Ap-1 transcription factors have been shown to increase Smad3 transcriptional activity on the p3TP-lux reporter plasmid but inhibit Smad3 transcriptional activity on the collagen 7(A1)-luc reporter plasmid (397, 412) (Table 4); this modulatory effect is thought to be mediated by Smad3 interacting with the Ap-1 member, c-Jun (433, 434). Therefore, we hypothesized that when Ap-1 transcription factors, specifically c-Jun, are limiting and when ER $\alpha$  is up-regulated and activated there would be an interference with Smad3 transcriptional activity as ER $\alpha$  interacts directly with c-Jun and thereby, altering Ap-1 and TGF $\beta$  signaling activity.

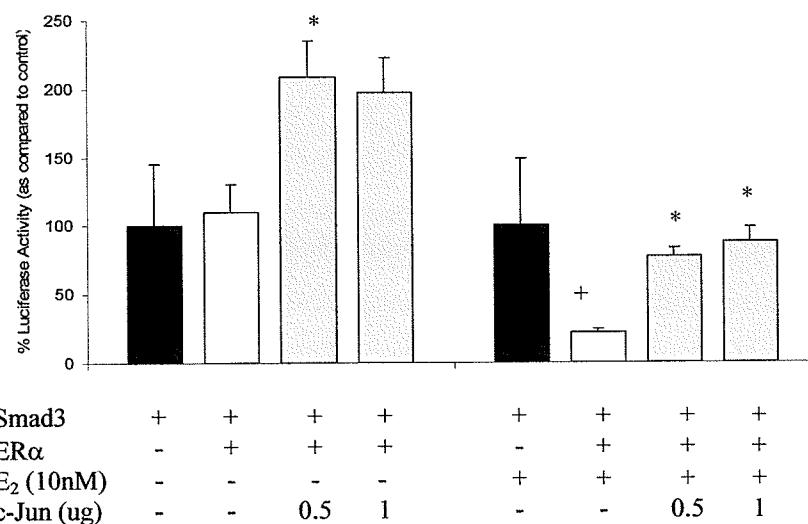
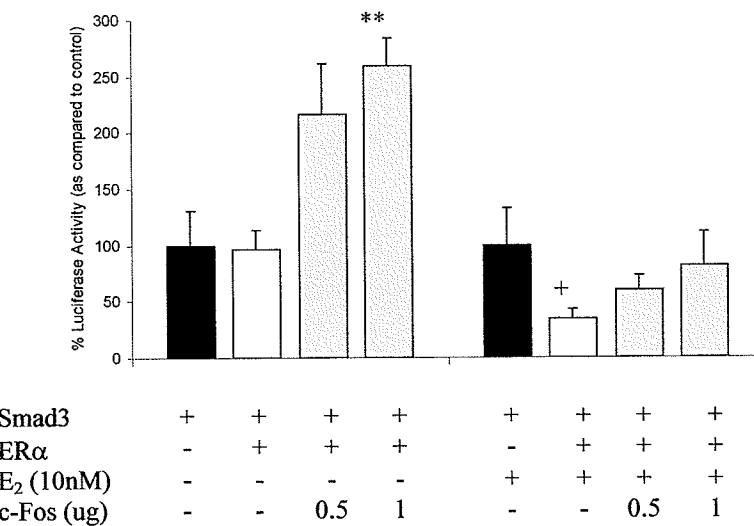
### Results

To investigate this hypothesis, Cos1 cells were transiently transfected with c-Jun or c-Fos expression vectors. Expression of c-Jun and c-Fos in transiently transfected Cos1 cells is shown in Figure 45. Transient transfection of c-Jun ( $p<0.05$ ) and c-Fos ( $p<0.01$ ) expression plasmids significantly increased Smad3 induced p3TP-lux activity (Figure 46a+b). In the presence of E<sub>2</sub>, ER $\alpha$  decreased Smad3 mediated p3TP-lux activity ( $p<0.05$ ) and this effect was reversed by over-expression of c-Jun ( $p<0.05$ ) but not c-Fos (Figure 46a, b). A similar effect was also observed with ER $\beta$  (Figure 47a+b), although in

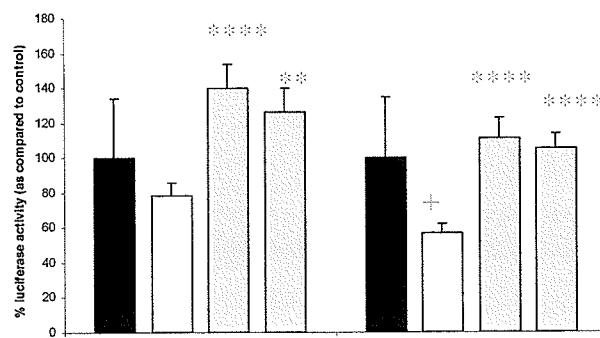
this case the decrease in p3TP-lux transcription in the presence of E<sub>2</sub> was inhibited by both c-Jun ( $p<0.001$ ) and c-Fos ( $p<0.001$ ) transient transfection. The ability of c-Jun to inhibit the effect of activated ER $\alpha$  on Smad3 transcriptional activity was not due to limiting or squelching of other ER $\alpha$  co-activators that can be commonly recruited by ER $\alpha$  or Ap-1 transcription factors as over-expression of SRC-1 or SRC-3 (AIB1) did not affect the ability of ER $\alpha$  to inhibit Smad3 activity (Figure 48). SRC-1 has been shown to form direct protein:protein interactions with ER $\alpha$  (183); interactions between Smad3 and SRC-1 have also been described (although this interaction may not be direct) (320). SRC-3, on the other hand, has been shown to interact directly with ER $\alpha$  (180)but no interactions between Smad3 and TGF $\beta$ /Smad3 have been described.



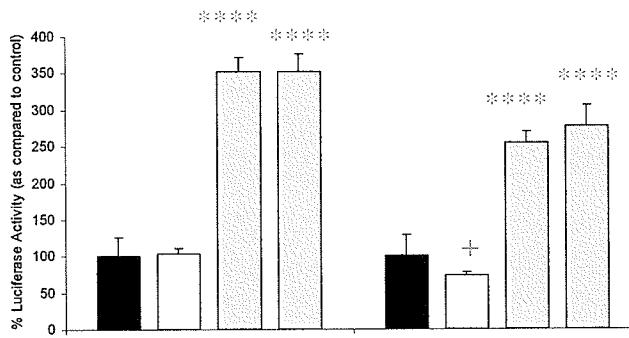
**Figure 45:** Expression of c-Jun and c-Fos in Cos1 transiently transfected cells. Cos1 cells were transiently transfected with increasing amounts of c-Jun (1- 4ug pRSV c-Jun) or c-Fos (1-3 ug pRSV c-Fos) expression plasmids as described in Methods. Equimolar concentrations of plasmid were kept between samples by addition of empty pcDNA3.1. Neg. represents mock transfected Cos1 cells. Forty-eight h post-transfection, whole cell extracts were prepared as described in Methods. 22ul of a 300ul extract was run on a SDS-10% acrylamide gel. Western blotting and immune detection were performed as described in Methods. Immune detection was using an anti-c-Jun antibody (Santa Cruz Biotechnology) or an anti-c-Fos antibody (Santa Cruz Biotechnology). Results represent n=1 experiments.

**A.****B.**

**Figure 46: Affect of Ap-1 and ER $\alpha$  on Smad3 transcriptional activity in Cos1 cells.** Cos1 cells were transiently transfected with 1ug pcDNA4-His/Xpress ER $\alpha$ , 1ug pCMV5B-Flag-Smad3, 100ng pCH110, 200ng p3TP-lux and 0.5ug or 1ug of either A) pRSV c-Jun or B) pRSV c-Fos in the presence or absence of 10nM E $_2$ . Empty pcDNA3.1 plasmid was used to ensure equimolar concentrations of plasmid between samples. 48 h later, samples were collected and luciferase and  $\beta$ -galactosidase activities were determined as described in Methods. Results represent the mean  $\pm$ SEM, n=3 independent experiments. \* and \*\* indicate significant differences (p<0.05 and p<0.01; Student's t-test) as compared to the corresponding sample transfected with ER $\alpha$  and Smad3 in the presence or absence of E $_2$ , respectively. + indicates a significant difference (p<0.05) compared to the corresponding sample in the absence of E $_2$ .

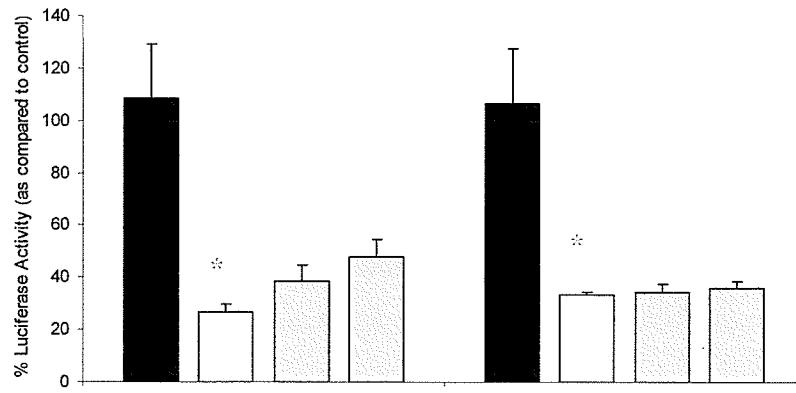
**A.**

Smad3	+	+	+	+	+	+	+	+
ER $\beta_1$	-	+	+	+	-	+	+	+
E <sub>2</sub> (10nM)	-	-	-	-	+	+	+	+
c-Jun (ug)	-	-	0.5	1	-	-	0.5	1

**B.**

Smad3	+	+	+	+	+	+	+	+
ER $\beta_1$	-	+	+	+	-	+	+	+
E <sub>2</sub> (10nM)	-	-	-	-	+	+	+	+
c-Fos (ug)	-	-	0.5	1	-	-	0.5	1

**Figure 47: Affect of Ap-1 and ER $\beta_1$  on Smad3 transcriptional activity in Cos1 cells.** Cos1 cells were transiently transfected with 1ug pcDNA4-His/Xpress ER $\beta_1$ , 1ug pCMV5B-Flag-Smad3, 100ng pCH110, 200ng p3TP-lux and increasing amounts (0.5 or 1ug) of either A) pRSV c-Jun or B) pRSV c-Fos in the presence or absence of 10nM E<sub>2</sub>. Empty pcDNA3.1 plasmid was used to ensure equimolar concentrations of plasmid between samples. 48 h later, samples were collected and luciferase and  $\beta$ -galactosidase activities were determined as described in Methods. Results represent the mean  $\pm$  SEM n=10 independent experiments. \*\* and \*\*\* indicate significant differences ( $p<0.01$  and  $p<0.00001$ ; Student's t-test) as compared to the corresponding sample transfected with ER $\alpha$  and Smad3 in the presence or absence of E<sub>2</sub>, respectively. + indicates a significant difference ( $p<0.05$ ) compared to the corresponding sample in the absence of E<sub>2</sub>.

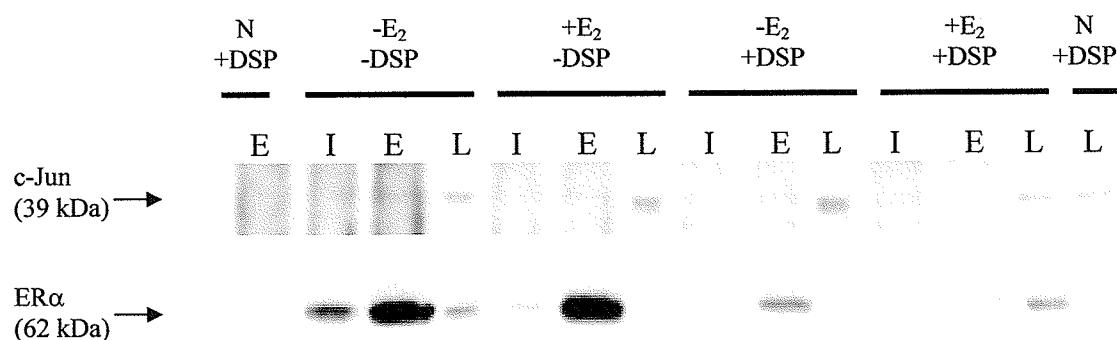


E <sub>2</sub> (10nM)	-	+	+	+	-	+	+	+
Smad3	+	+	+	+	+	+	+	+
ER $\alpha$	+	+	+	+	+	+	+	+
SRC-1 (ug)	-	-	0.5	1	-	-	-	-
SRC-3 (ug)	-	-	-	-	-	-	0.5	1

**Figure 48: Affect of SRC-1 and SRC-3 on Smad3 transcriptional activity in Cos1 cells.** Cos1 cells were transiently transfected with 1ug pcDNA4-His/Xpress ER $\alpha$ , 1ug pCMV5B-Flag-Smad3, 100ng pCH110, 200ng p3TP-lux and increasing amounts (0.5 or 1ug) of either SRC-1 or SRC-3 in the presence of 10nM E<sub>2</sub>. Empty pcDNA3.1 plasmid was used to ensure equimolar concentrations of plasmid between samples. 48 h later, samples were collected and luciferase and  $\beta$ -galactosidase activities were determined as described in Methods. Results represent the mean  $\pm$  SEM of n=3 independent experiments. \*p<0.05 (Student's t-test) as compared to control samples.

The results from our Cos1 transient transfections provide evidence to suggest that c-Jun may be limiting in Smad3 mediated transcription of p3TP-lux in the presence of activated ER $\alpha$ . This premise is on the assumption that upon ligand binding, ER $\alpha$  is able to interact specifically with c-Jun but not c-Fos and thereby, preventing c-Jun binding to Ap-1 sites. Several authors have examined the protein:protein interactions of Ap-1 factors and ER and their results suggest that ER $\alpha$  interacts with c-Jun in a ligand-dependent manner and that this interaction is inhibited by antiestrogen treatment (224). To further support our hypothesis that ER sequesters c-Jun away from the p3TP-lux

promoter, co-IP studies were performed in which Cos1 cells were transiently transfected with ER $\alpha$  and treated either with E<sub>2</sub>, the Ap-1 activator TPA, or a combination of E<sub>2</sub> and TPA, as evidence suggests that ER $\alpha$  has a higher binding affinity towards activated c-Jun in MCF-7 cells (287). Our results show that ER $\alpha$  does not form a stable interaction with c-Jun in Cos1 cells, as indicated by the absence of c-Jun protein following IP with an ER $\alpha$  specific antibody (Figure 49). Several attempts were made to optimize the interaction and the conditions of immunoprecipitation, including: (i) various incubation times with E<sub>2</sub> and TPA, (ii) the use of various ER $\alpha$  antibodies which recognize different regions of ER, (iii) the use of various c-Jun antibodies and (iv) in the instance that the ER/c-Jun interaction was weak, formaldehyde or DSP protein-protein cross-linking was used to stabilize potential weak interactions (Figure 49). However, all results obtained were negative in that c-Jun could not be detected despite successful ER $\alpha$  immunoprecipitation (ER $\alpha$  could be detected upon western blotting) (Figure 49). While this was quite disturbing, it does not completely disregard the idea that ER $\alpha$  interacts with c-Jun in a ligand-dependent fashion as the optimal conditions to observe the interaction between ER and c-Jun may not have been achieved, despite our best efforts. Of the authors who observed an interaction between ER and c-Jun, only one described the interaction between endogenously expressed proteins (287), all others utilized either GST pull-down assays (224, 231), over-expressed tagged proteins (224, 287), or *in vitro* transcribed/translated systems (224).



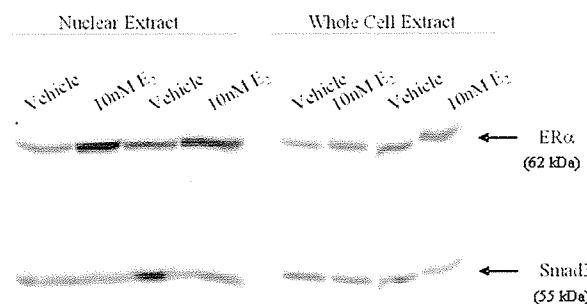
**Figure 49:** Lack of co-immunoprecipitation of ER $\alpha$  and c-Jun in Cos1 cells using DSP as a cross-linking agent. Cos1 cells were transiently transfected with 1ug pcDNA3.1-ER $\alpha$  in the presence or absence of 10nM E $_2$  as described in Methods. Mock transfected cells (N) were used as negative control. 48 h post-transfection, proteins were cross-linked with DSP for 2 h, harvested in IP buffer and subsequently IP with 3ug rabbit polyclonal ER $\alpha$  (Santa Cruz; lanes indicated "E") or 3ug rabbit polyclonal insulin receptor (Santa Cruz; lanes indicated "I"). Samples were analyzed by 10% SDS-PAGE and western blotting. Top panel: membranes IB for c-Jun (Santa Cruz). Arrows indicate the expected molecular mass of c-Jun (39kDa). Bottom panel: membranes previously IB for c-Jun were stripped as described in Methods and subsequently IB for ER $\alpha$  (NovoCastra). Arrows indicate the expected molecular mass of transfected ER $\alpha$  (62kDa). Whole cell lysates (L) represent proteins present in the sample prior to IP (30ul of a 300ul sample). Results are representative of n=2 independent experiments.

While the protein-protein interactions between ER and Ap-1 members have been described, whether ER affects Jun DNA binding at Ap-1 sites is unclear. It has been suggested that on the PR promoter, ligand activated ER binds to an ERE half-site immediately adjacent to an Ap-1 site enhancing the binding of Fos and Jun (132). Thus, by forming an active transcription complex with the Fos/Jun heterodimer at an Ap-1 site, ER is capable of modulating Ap-1 gene transcription. The p3TP-lux promoter contains three consecutive Ap-1 sites from the human collagenase promoter that bind Jun and Fos. While p3TP-lux does not contain a consensus ERE binding site, it does contain an ERE

half-site within the PAI-1 promoter region of the plasmid insert approximately 100 bp downstream of the collagenase Ap-1 sites. However, the ability of this ERE half-site to mediate transcription is unknown. Evidence has suggested that the ER interacts with multiprotein complexes containing c-Jun both *in vitro* and *in situ* (224). Thus, it seems reasonable to hypothesize that the ER may sequester c-Jun containing complexes away from the Ap-1 DNA binding site and thereby, inhibit c-Jun transcriptional activity on the p3TP-lux luciferase promoter. Alternatively, binding of ER to complexes containing c-Jun may inhibit the ability of c-Jun to activate target gene transcription either by (i) competitively binding to proteins important in mediating Ap-1 gene transcription by c-Jun or (ii) altering the conformation of c-Jun such that it no longer is able to bind either to DNA or to other factors important for Ap-1 gene transcription. For example, it has previously been shown that c-Jun interacts directly with the general transcription machinery (435, 436) regardless of whether c-Jun is bound to DNA or free in solution as either a homo- or hetero-dimer with Fos (435).

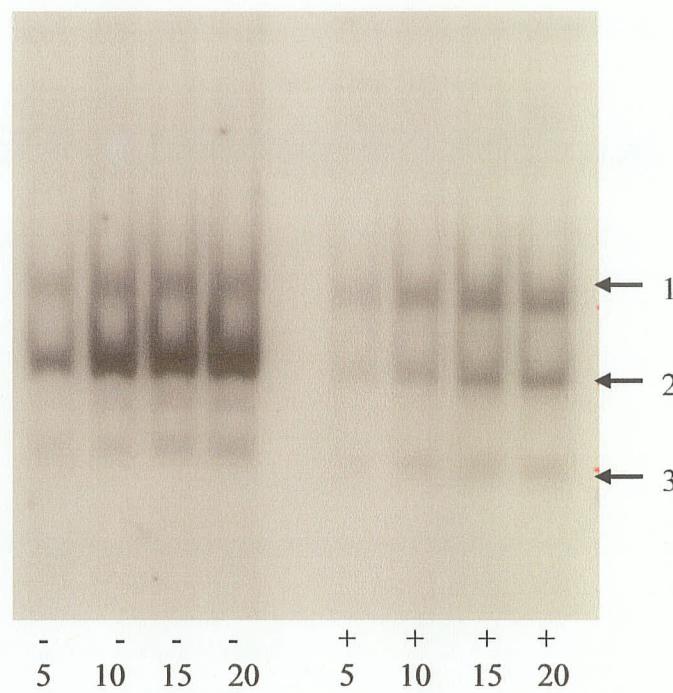
The interaction of Jun with the general transcription machinery has been mapped to the C-terminal region which consists of the basic region and leucine zipper (bZIP region) (435). As the ER also interacts with the C-terminal region of c-Jun (224), the ER may compete with the general transcription machinery for c-Jun binding. On the other hand, ER binding to c-Jun may alter the three dimensional structure of c-Jun such that it no longer is able to interact with the general transcriptional machinery resulting in an inhibition of target gene transcription. To determine whether activation of ER affects Ap-1 binding to its cognate sequence, an oligonucleotide corresponding to the p3TP-lux Ap-1 site was used in EMSAs. Labelled oligonucleotides were incubated with nuclear

extracts from Cos1 cells transiently transfected with ER $\alpha$  in the presence or absence of estradiol as described in Methods. Figure 50 demonstrates the presence of ER $\alpha$  and Smad3 proteins in transiently transfected Cos1 nuclear and whole cell extracts.

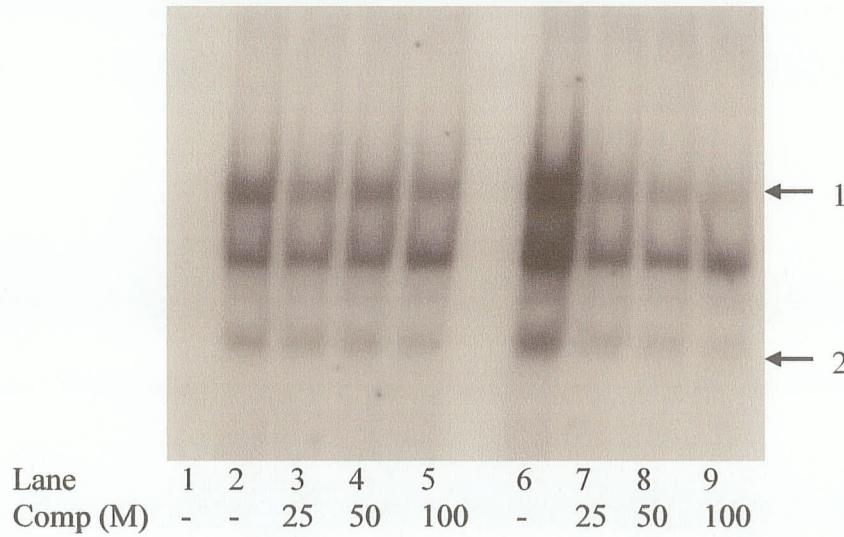


**Figure 50: ER $\alpha$  and Smad3 expression in Cos1 nuclear extracts.** Cos1 cells were transiently transfected with 1ug pCMV5B-Flag Smad3 and 1ug pcDNA3.1-ER $\alpha$  in the presence or absence of 10nM E<sub>2</sub>. 48 h post-transfection, cells were harvested and whole cell or nuclear extracts were prepared as described in Methods. 10ul from a 300ul whole cell extract and 100ug of nuclear extract were run on a 10% SDS-acrylamide gel. Western blotting and immune detection were performed as described in Methods. Immune detection was using an anti-ER $\alpha$  antibody (NovoCastra) or an anti-Smad3 antibody (Upstate Biotechnology), n=3 independent experiments.

Proteins present in the Cos1 nuclear extract bound to the Ap-1 site in a dose dependent manner (Figure 51). To test for the specificity of the protein-DNA complexes observed, competition studies with 25 – 100 times molar excess of unlabelled oligonucleotide were undertaken (Figure 52). When the excess unlabelled oligonucleotide was added, two DNA-protein complexes diminished in intensity (Figure 52, lanes 7-9), suggesting that these bands correspond to a specific interaction between the Cos1 nuclear extract and probe.



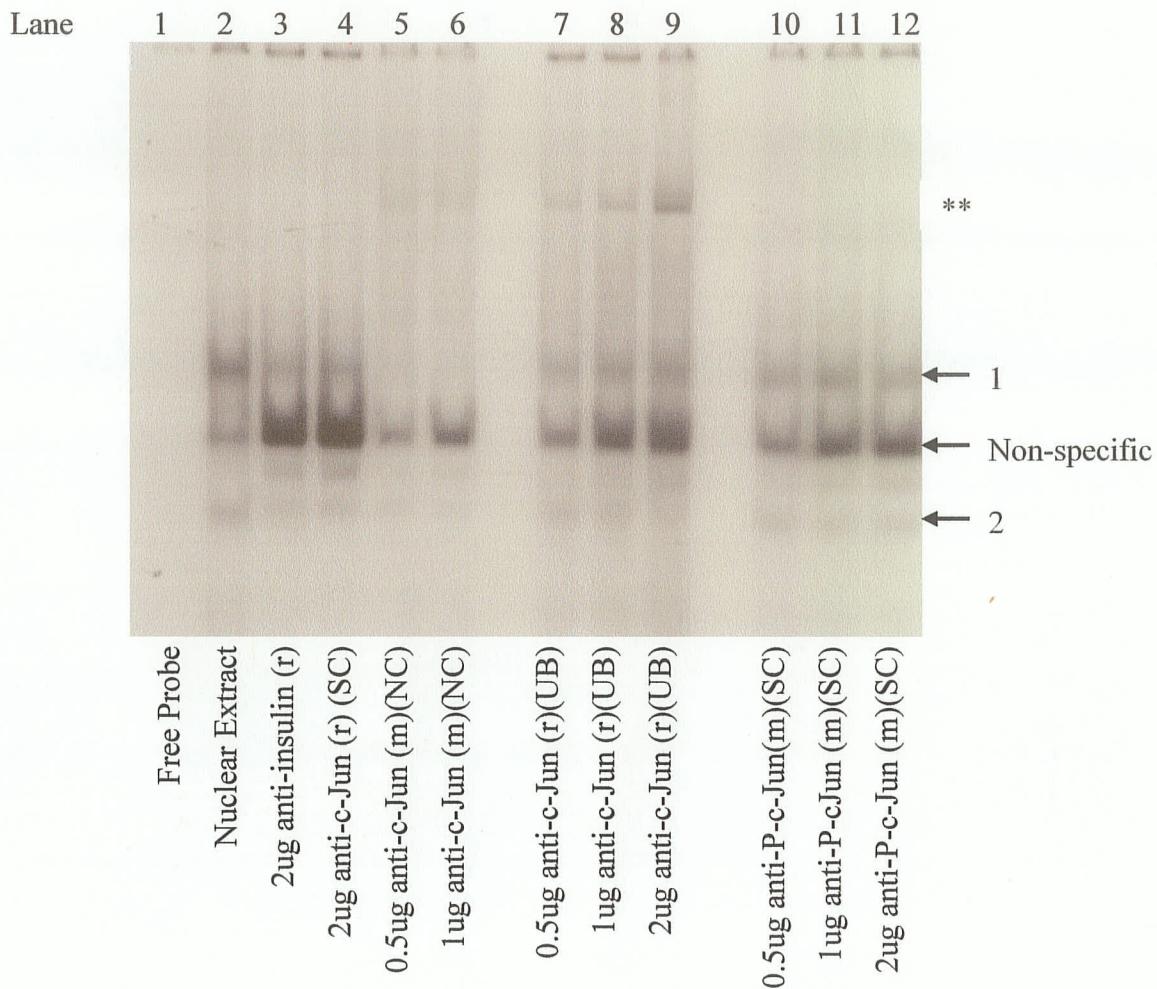
**Figure 51: Effect of increasing amounts of nuclear extract on Ap-1 EMSA.** Nuclear extracts from Cos1 cells transiently transfected with Smad3 and ER $\alpha$  in the presence or absence of 10nM E<sub>2</sub> were incubated with a [<sup>32</sup>P] labelled Ap-1 oligonucleotide from p3TP-lux as described in Methods. Increasing amounts of nuclear extract (5-20ug) was used in each instance. E<sub>2</sub> = treatment with 10nM E<sub>2</sub> for 48 h. N(ug) = ug of nuclear extract protein used in assay. Arrows indicate protein-DNA complexes formed.



**Figure 52:** Competition experiments in nuclear EMSA assay. Nuclear extracts from Cos1 cells transiently transfected with Smad3 and ER $\alpha$  in the presence of 10nM E $_2$  were incubated with a [ $^{32}$ P] labelled Ap-1 oligonucleotide from p3TP-lux as described in Methods. 15ug of nuclear extract was used in each instance. Lane 1 = Free probe; Lanes 2-5 = Competitor oligonucleotide added 5 min prior to [ $^{32}$ P] labelled oligonucleotide; Lanes 6-9 = Competitor oligonucleotide added at the same time as the [ $^{32}$ P] labelled oligonucleotide. Comp (M) = molar excess of competitor oligonucleotide added to reaction. Arrows indicate specific protein-DNA complexes formed.

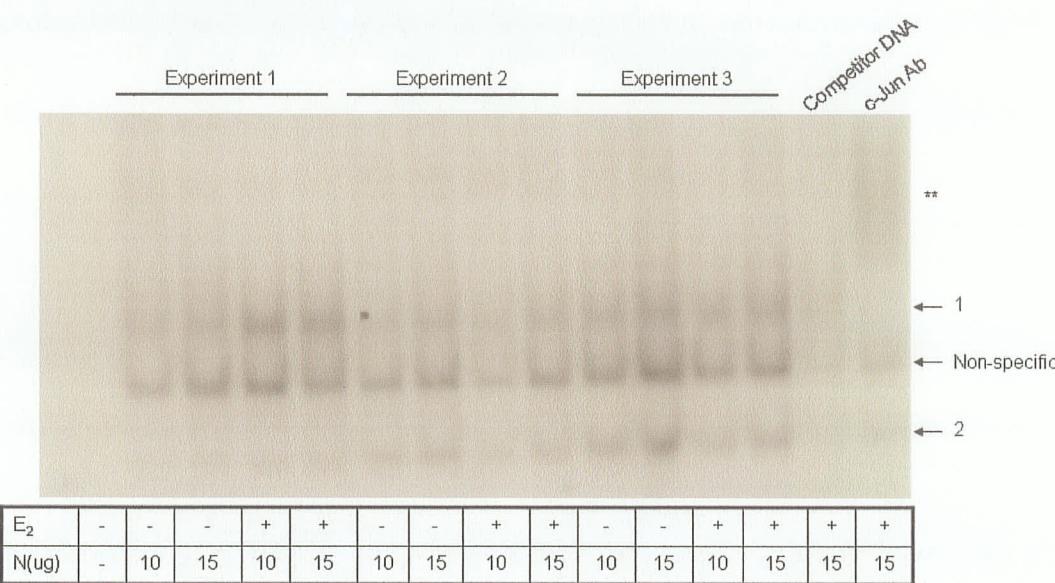
To determine whether c-Jun binds specifically to the oligonucleotide probe, antibodies raised to various regions of the c-Jun protein by various companies (Upstate Biotechnology, Santa Cruz Biotechnology and NovoCastra Laboratories) were utilized. The presence of c-Jun within the retarded complexes was demonstrated by the ability of specific antibodies to supershift the retarded complexes (Figure 53, lanes 5-9) with a concurrent decrease in band intensity (Figure 53, lanes 5-6). The presence of the supershift band was dependent on the region of c-Jun to which the antibodies were developed as some antibodies did not supershift the complex (Figure 53, lanes 4-6).

These findings demonstrate that c-Jun is part of the DNA-protein complexes formed from Cos1 nuclear extracts.



**Figure 53: Supershift experiments in nuclear EMSA assay.** Nuclear extracts from Cos1 cells transiently transfected with Smad3 and ER $\alpha$  in the presence of 10nM E $_2$  were incubated with a [ $^{32}$ P] labelled Ap-1 oligonucleotide from p3TP-lux as described in Methods. 15ug of nuclear extract was used in each instance and antibodies were added during the pre-incubation step as described in Methods. R = rabbit, m = mouse and p = phosphorylated. Lanes 4 and 10-12 used antibodies from Santa Cruz (SC) Biotechnology, lanes 5-6 were from NovoCastra (NC) and lanes 7-9 were from Upstate Biotechnology (UB). Arrows indicate specific protein-DNA complexes formed. \*\* indicates presence of supershifted band in the presence of c-Jun antibody.

To determine whether the presence of an activated ER affects c-Jun binding to an Ap-1 site in p3TP-lux, nuclear extracts from Cos1 transient transfactions were incubated with the [<sup>32</sup>P] labelled Ap-1 oligonucleotide as described in Methods. A representative EMSA from three independent assays is shown in Figure 54. Densitometric analysis of DNA-protein specific complexes is shown in Table 5. Comparison of estrogen treated samples to the corresponding control suggests that activated ER $\alpha$  does not affect c-Jun binding to the Ap-1 site found in p3TP-lux (Student's t-test, unpaired). Thus, it does not appear as though ER $\alpha$  sequesters c-Jun away from the promoter as determined by this *in vitro* system. It is important to note, however, that the extraction of proteins from the nucleus may disrupt protein-protein interactions important for DNA binding resulting in a negative result. Furthermore, the oligonucleotide used for these assays consisted of a small fragment of the p3TP-lux plasmid insert and thus, the absence of surrounding promoter sequences may also disrupt protein-DNA binding.



**Figure 54: Effect of activated ER $\alpha$  and Smad3 on Ap-1 EMSA.** Nuclear extracts from Cos1 cells transiently transfected with Smad3 and ER $\alpha$  in the presence or absence of 10nM E<sub>2</sub> were incubated with a [<sup>32</sup>P] labelled Ap1 site from p3TP-lux as described in Methods. 10ug or 15ug of nuclear extract were used in each instance. N(ug) = ug of nuclear extract used in assay. Comp = addition of 100 x molar concentration competitor oligonucleotide. cJun = addition of 1ug cJun antibody (NovoCastra) to assay. Numbers indicate specific protein-DNA complexes formed. \*\* indicates presence of supershift band in the presence of c-Jun antibody.

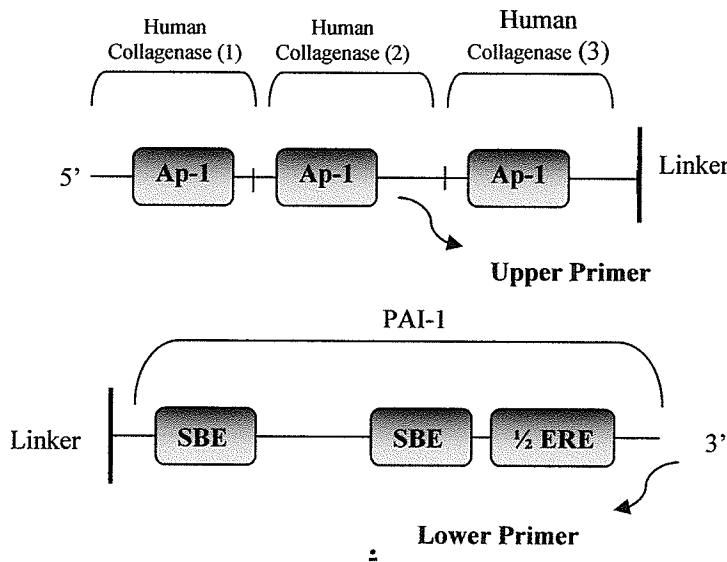
<b>10ug NE</b>	<b>Band 1</b>	<b>Non-Specific</b>	<b>Band 2</b>
Control	89.86 ± 20.42	74.81 ± 15.54	94.17 ± 20.39
10nM E2	105.16 ± 28.47	72.05 ± 0.35	97.20 ± 16.37
<b>15ug NE</b>			
Control	115.70 ± 31.52	100.32 ± 25.91	106.58 ± 27.04
10nM E2	120.89 ± 18.26	96.55 ± 4.88	111.53 ± 16.30

**Table 5: Densitometric analysis of EMSA assays.** Nuclear extracts from Cos1 cells transiently transfected with Smad3 and ER $\alpha$  in the presence or absence of 10nM E<sub>2</sub> were incubated with a [<sup>32</sup>P] labelled Ap1 oligonucleotide from p3TP-lux as described in Methods. 10ug or 15ug of nuclear extract was used in each instance and two independent Cos1 nuclear extracts were prepared. Bands corresponding to specific DNA-protein complexes were quantified by scanning using Quantity One (Bio-rad). Three independent EMSAs were performed. A value of 100 was arbitrarily assigned to one particular sample and all signals are expressed relative to this signal. NE = amount of nuclear extract used in assay.

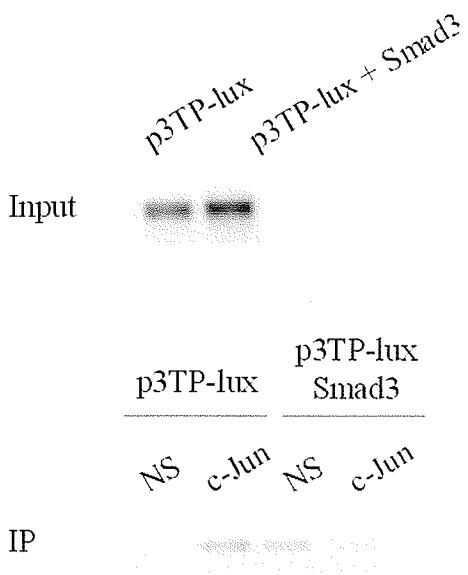
While ER $\alpha$  does not appear to sequester activated c-Jun away from an Ap-1 oligonucleotide, ER may affect Smad3 transcriptional activity on p3TP-lux by interacting with Ap-1 transcription factors on the oligonucleotide. To determine whether ER $\alpha$  is part of a protein-DNA complex, gel super-shift experiments were performed using antibodies specific for ER $\alpha$  (antibodies recognizing full-length ER $\alpha$  as well as the C-terminal or N-terminal regions were also used). While several protein-DNA complexes were observed upon incubation of the Ap-1 oligonucleotide with Cos1 nuclear extracts from cells transiently transfected with ER $\alpha$  and Smad3, no complexes were super-shifted by the ER $\alpha$  antibodies and no complexes disappeared upon incubation with an antibody (data not shown). Thus, it does not appear as though ER $\alpha$  is part of a protein-DNA complex on an Ap-1 oligonucleotide under these EMSA conditions.

The chromatin immunoprecipitation (ChIP) protocol has recently been developed to study the association of transcription factors with DNA. In this technique, proteins are cross-linked to DNA with formaldehyde and subsequently IP from solution while still bound to their cognate DNA sequences (437). The protein component of the immune complex is then digested away from the DNA sequence and the resulting DNA is amplified with specific primers in a PCR reaction. Thus, protein binding to a specific DNA sequence, in this case the p3TP-lux promoter region, may be determined under varying cellular conditions. Cos1 cells were transiently transfected with p3TP-lux, ER $\alpha$  and Smad3 in the presence or absence of estradiol. ChIP analysis with either an ER $\alpha$  or c-Jun antibody was performed with the technical assistance of Kanyarat Ung on Cos1 cell lysates. The sequence of p3TP-lux that was PCR amplified and the location of the Ap-1 and Smad3 binding sites is depicted in Figure 55. Six independent transient transfections

were carried out with six corresponding ChIP assays. Results were very inconclusive in that some experiments suggested an increase in ER $\alpha$  binding in the presence of ligand; others showed a decrease in ER $\alpha$  binding; while yet others showed no difference. Inconsistent results were also obtained when cell lysates were IP with a c-Jun antibody under these conditions. To determine the effect of Smad3 on c-Jun binding to the promoter sequence in p3TP-lux, Cos1 cells were transiently transfected with p3TP-lux in the presence or absence of Smad3 and ChIP assays were performed with the c-Jun antibody. Amplification of the region by PCR demonstrates that while c-Jun is able to bind the promoter sequence in the absence of over-expressed Smad3, it no longer binds to DNA in the presence of Smad3 (Figure 56), suggesting that Smad3 inhibits c-Jun binding to the Ap-1 sequence in p3TP-lux.



**Figure 55:** Schematic of p3TP-lux insert showing the location of primers used in ChIP analysis. The TGF $\beta$  responsive reporter plasmid p3TP-lux is composed of three human collagenase gene sequences containing Ap-1 binding sites upstream of the plasminogen activator inhibitor-1 (PAI-1) promoter region cloned within a pGL2 vector. Arrows represent the location of the upper and lower primers used in ChIP analysis.



**Figure 56:** Chromatin immunoprecipitation of c-Jun on p3TP-lux in the presence or absence of Smad3 in Cos1 cells. Cos1 cells were transiently transfected with p3TP-lux along with Smad3. Cells were cross-linked with formaldehyde and cell lysates prepared as described in Methods. Lysates were immunoprecipitated under ChIP conditions with either c-Jun (Santa Cruz Biotechnology) or a non-specific antibody (NS) (insulin receptor, Santa Cruz Biotechnology). Input represents the initial total pool of DNA fragments used in the ChIP assay. IP represents DNA immunoprecipitated with either c-Jun or a non-specific antibody, n = 3 independent experiments.

## **Key Findings from Section II**

In section II of the results, we have explored the mechanism through which ER may modulate Smad3 transcriptional activity. Specifically, we have shown that:

1. ER and Smad3 do not directly interact with one another either *in vitro* or *in situ* indicating that the original hypothesis in which ER modules TGF $\beta$  signaling by forming direct protein:protein interactions with Smad3 may not occur in our model system.
2. Over-expression of the Ap-1 transcription factor c-Jun, but not c-Fos, in Cos1 cells relieved the inhibitory effect of activated ER $\alpha$  on Smad3 transcriptional activity. This observation led us to the hypothesis that ligand-bound ER $\alpha$  inhibits Smad3 mediated transcription by binding to and sequestering limiting amounts of c-Jun away from the promoter region of TGF $\beta$  responsive genes.
3. Co-immunoprecipitation experiments of ER $\alpha$  and c-Jun demonstrated that these two proteins do not bind with one another despite great efforts to optimize the interaction and IP conditions in this model system.
4. Electrophoretic mobility shift assays and chromatin immunoprecipitation experiments suggest that ER $\alpha$  does not alter c-Jun binding to DNA, suggesting that ligand-activated ER $\alpha$  may not sequester c-Jun away from a Smad3 responsive promoter.
5. Due to the negative results obtained from this section of the thesis, we cannot say for certain what the molecular mechanism is through which ER modulates Smad3 transcription in this model system.

### **SECTION III. RELEVANCE TO BREAST CANCER**

#### **A. Relation of Ap-1, ER and Smad3 in Human Breast Tumors**

##### **Rationale**

In a study of approximately 50 breast cancer cases, nuclear Smad3 (a surrogate marker for a functional TGF $\beta$  signaling pathway) was higher in normal breast tissue than in the adjacent matched invasive breast tumor (438). Conversely, ER $\alpha$  expression increases in breast tumors as compared to matched normal tissues. This suggests that Smad3 activity is decreased in tumors at the same time that ER $\alpha$  activity generally is increased. Evidence suggests that within breast tumors themselves nuclear Smad3 is associated with ER+ status and generally related to good prognostic markers (438). However, ER expression varies widely in human breast cancers and this study only looked at ER status as a binary factor (+ve or -ve), had a small number of tumors and did not evaluate Ap-1 activity in the form of phosphorylated c-Jun expression. Data from this thesis suggest that a complex interplay between ER, Smad3 and Ap-1 factors may be important in breast cancer. As demonstrated in section II, functional modulation of Smad3 transcriptional activity by activated ER involves c-Jun. All three of these factors must be expressed within the same breast tissue in order for this interaction to occur. Therefore, we examined the expression of phosphorylated c-Jun and Smad3 in human breast tumor tissues and determined whether correlations existed between c-Jun, Smad3 and ER protein expression.

## Results

To determine whether interactions between ER $\alpha$ , TGF $\beta$  and Ap-1 signaling pathways could occur in breast cancer *in vivo*, human breast tumor tissue microarrays (TMAs) were used for immunohistochemical staining of Smad3 and phosphorylated c-Jun. Breast tumor TMAs were produced by and available for our use by the Manitoba Breast Tumor Bank. Summary of the clinicopathological characteristics of the patients used in the tumor TMAs is shown in Table 6. Tumors were identified according to their ER or PR status as defined by ligand-binding assay. Of the 112 tumors on the TMAs, 99 (88%) were ER $^+$  (ER positive defined as >3 fmol/mg protein) and 13 (12%) were ER $^-$ ; 83 (74%) were PR $^+$  (PR positive defined as >10 fmol/mg protein) and 29 (26%) were PR $^-$ . Of the ER $^+$  tumors, 74 were also PR $^+$  (66%) and 9 of the ER $^-$  tumors were PR $^+$  (8%). In a population of randomly selected breast tumors, one would expect approximately 30% of the tumors to be ER $^-$  and 70% to be ER $^+$  (29, 30). Therefore, our study sample is slightly skewed towards an ER $^+$  status. It has been shown that approximately 50% of the ER $^+$  tumors will also be PR $^+$ , while only a small proportion of ER $^-$  tumors are PR $^+$  (439); our values are consistent with these. As PR is a downstream marker of a functional ER, it was expected that ER expression positively correlates with PR expression (Spearman  $r=0.2900$ ;  $p=0.0019$ ).

Characteristic	Number of Patients	% of Tumors
<b>Total number of patients</b>	112	
<b>ER Status</b>		
ER <sup>+</sup> (>3 fmol/mg protein)	99	88%
ER <sup>-</sup> (<3 fmol/mg protein)	13	12%
<b>PR Status</b>		
PR <sup>+</sup> (>10 fmol/mg protein)	83	74%
PR <sup>-</sup> (<10 fmol/mg protein)	29	26%
<b>Tumor Size (cm)</b>		
≤2.0	24	22%
>2.0	86	78%
<b>Lymph Node Status</b>		
Positive	61	59%
Negative	42	41%
<b>Histological Grade</b>		
Low Grade (4-6)	19	42%
High Grade (7-9)	26	58%

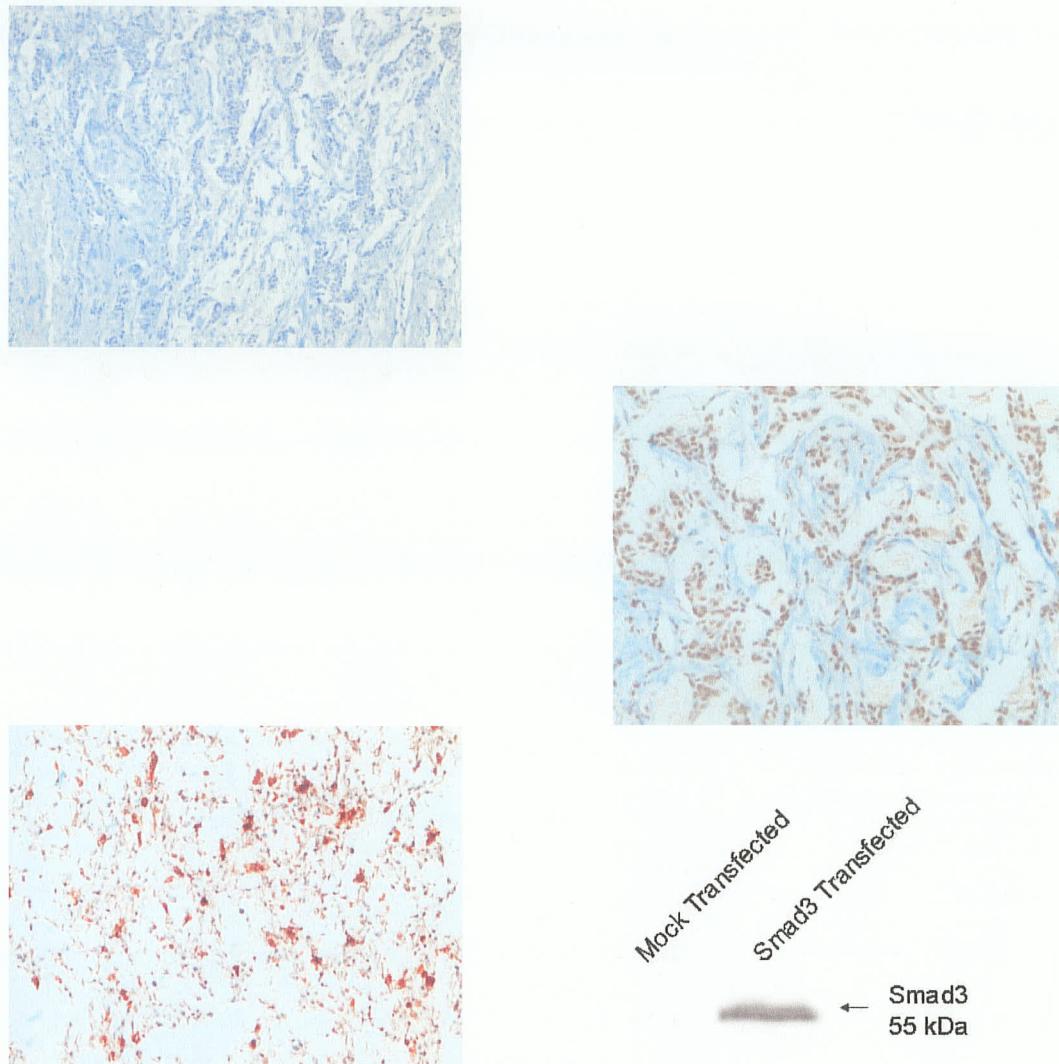
**Table 6.** Clinicopathological characteristics of patients used in the tumor tissue microarrays.

To extend previous data suggesting that Smad3 expression is positively associated with ER, we used a polyclonal antibody that recognizes Smad3 protein (Zymed Laboratories). The immunohistochemical validation of this Smad3 antibody has been previously published within breast tumor tissues (438). The specificity of this antibody for Smad3 is shown in Figure 57. Western blot analysis indicates specific detection for Smad3 in Smad3 transfected Cos1 cells; the corresponding band was not detected in mock transfected cells. Strong nuclear and cytoplasmic staining for Smad3 was observed in Cos1 cells which were transfected with Smad3 (Figure 57, bottom panel) due to its over-expression in these cells. In addition, nuclear and cytoplasmic staining of Smad3 was observed in a formalin-fixed, paraffin-embedded archival breast tissue block while no staining for Smad3 was observed in control sections stained with secondary antibody

only (Figure 57). Therefore, this antibody was used for additional immunohistochemical analysis of Smad3 in the human breast tumor TMAs.

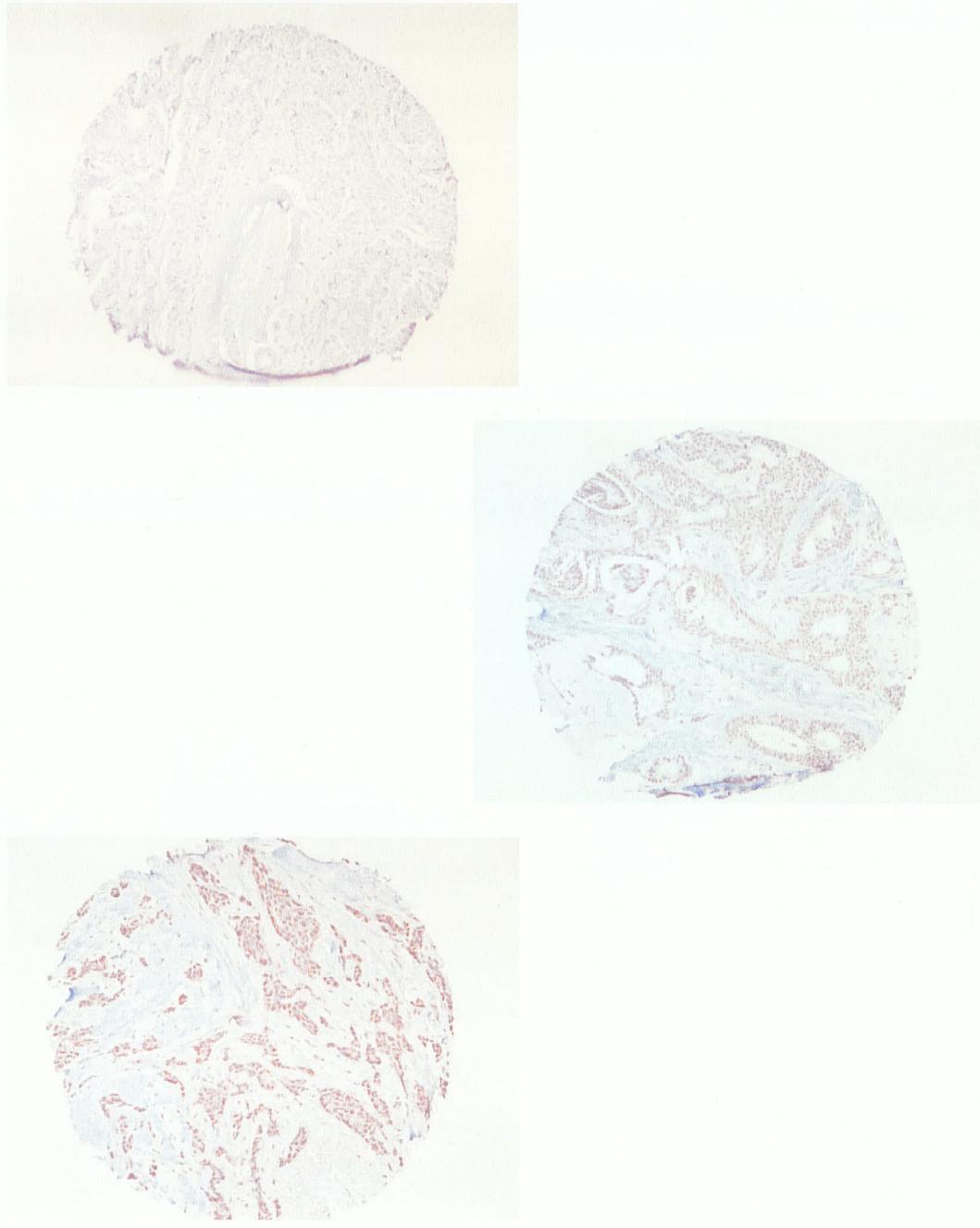
Immunohistochemical staining of tumor TMAs with Smad3 showed both nuclear and cytoplasmic staining. As the presence of nuclear Smad3 represents a functional and activated TGF $\beta$  signaling pathway, only nuclear Smad3 was scored for the purposes of this thesis. For each tumor, the corresponding nuclear Smad3 expression was quantified and expressed as an H-score, as described in Methods. Nuclear Smad3 H-scores ranged from 0-300; median = 90 with 8 tumors displaying no detectable nuclear Smad3 staining. Representative staining of negative, low and high expressing nuclear Smad3 tumors is shown in Figure 58.

When the cohort of cases was considered as a whole (n=112), no correlation was observed between nuclear Smad3 H-score and ER ( $r=0.1034$ ,  $p=0.2778$ , Spearman) or PR levels ( $r=0.02952$ ,  $p=0.7573$ , Spearman). Although there was a trend towards higher levels of nuclear Smad3 in ER $^+$  (median = 99, n=99) compared to ER $^-$  (median = 70, n=13) tumors, there was no statistically significant difference in Smad3 expression ( $p=0.5338$ ; Mann-Whitney). Similar levels of nuclear Smad3 were also observed in PR $^+$  (median = 99, n=83) and PR $^-$  tumors (median = 60, n=29) ( $p=0.4157$ , Mann-Whitney). Furthermore, Smad3 levels were not different between ER $^+$ /PR $^+$  (median = 99, n=74) and ER $^-$ /PR $^-$  (median = 60, n=4) ( $p=0.6042$ , Mann-Whitney) tumors and between ER $^+$ /PR $^+$  (median = 99, n = 74) and ER $^+$ /PR $^-$  (median = 60, n = 25) tumors. Potential relationships between nuclear Smad3 expression and tumor characteristics were tested using nuclear Smad3 H-scores and known tumor characteristics, including tumor size, grade and nodal status. No associations were observed with grade. When tumors were divided into node

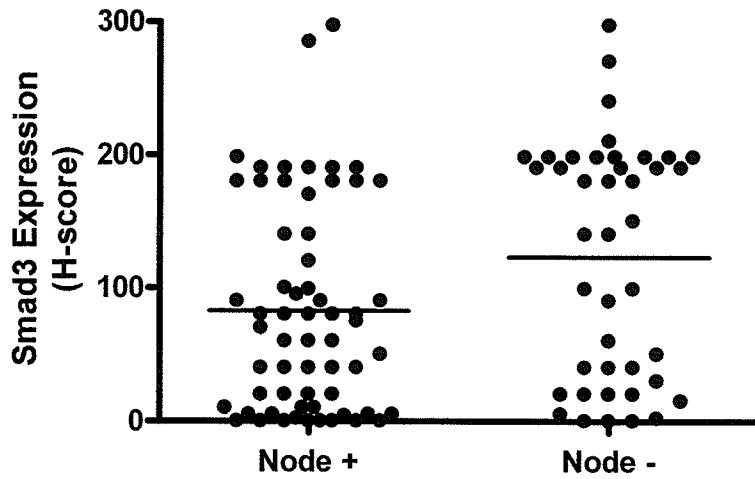


**Figure 57:** Verification and characterization of Smad3 immunohistochemistry in human breast cancer sections and Cos1 cells. *Top panel:* immunohistochemical analysis of breast tumor tissue stained with secondary antibody only (negative control) (magnification x100); *Middle panel:* human breast cancer biopsy positive for Smad3 (magnification: x200); *Bottom panel:* immunohistochemical analysis (magnification: x100) of Cos1 cells transiently transfected with Smad3. Forty-eight hours post-transfection, cells were embedded in agarose, formalin fixed, paraffin embedded and Smad3 immunohistochemistry was performed on these blocks. Inset: Western blot of Cos1 cells mock transfected or transfected with 1ug pCMV5B-Flag-Smad3. Whole cell extracts were prepared in Joel lysis buffer as described in Methods. 22ul of a 300ul whole cell extract was run on a SDS-10% acrylamide gel. Western blotting and immune detection was performed as described in Methods. Immune detection was using an anti-Smad3 antibody (Zymed Laboratories).

negative (no presence of breast cancer metastasis) and node positive (presence of breast cancer metastasis) groups, nuclear Smad3 expression was significantly lower in the node positive (median = 70, n= 61) cohort than in the node negative cohort (median = 145, n = 42) ( $p<0.05$ , Mann-Whitney) (Figure 59). No relationship was found between Smad3 expression and small ( $\leq 2\text{cm}$ ) (median = 135, n = 24) or large ( $>2\text{cm}$ )(median = 80, n = 86) tumors ( $p=0.1004$ ; Mann-Whitney). While we were unable to confirm the previously reported relationship between Smad3 and ER $\alpha$ , the association we found between Smad3 and node involvement suggests that Smad3 expression may be associated with less aggressive tumors.



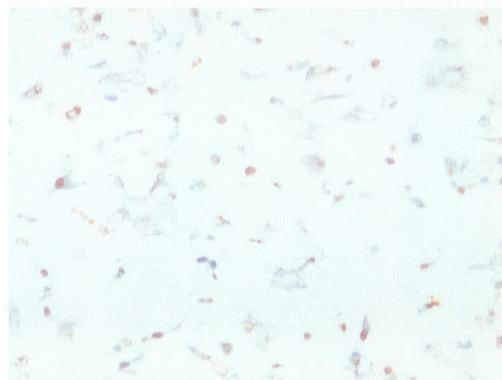
**Figure 58:** Smad3 immunostaining in human breast tumor tissue microarrays. Immunohistochemistry with rabbit polyclonal antibody to Smad3 (Zymed Laboratories) on primary tumors, showing no staining (top panel), moderate staining (middle panel) and intense staining (bottom panel) for Smad3 (magnification x100).



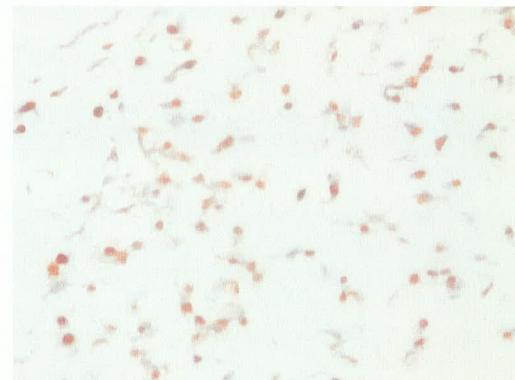
**Figure 59:** Smad3 H-score in node + and node – tumor tissues. Human breast tumor tissue microarrays were stained with a polyclonal Smad3 antibody (Zymed Laboratories) and expression was quantified by H-score analysis as described in “Methods.” The tumors were divided into node + (lymph nodes containing metastatic breast cancer cells) and node – (lymph nodes with no detectable metastatic breast cancer cells). The results are presented as a scatter graph. Lines indicate the median value in each group. Significant differences ( $p < 0.05$ ; Mann-Whitney, two-tailed) were observed between the two groups.

Adjacent sections to those stained for Smad3 from the tumor TMAs were stained for phosphorylated c-Jun. To detect the expression of phosphorylated c-Jun, a mouse monoclonal antibody which specifically recognizes c-Jun phosphorylation at serine 63 (Santa Cruz Biotechnology), a marker of Ap-1 activity, was utilized. The c-Jun antibody was validated by determining the expression of phosphorylated c-Jun in Cos1 cells treated with the Ap-1 activator, TPA, for 30 minutes as compared to Cos1 cells not treated with TPA. Upon treatment, cells were pelleted, embedded in agar and formalin fixed prior to IHC. The presence of phosphorylated c-Jun represents an active Ap-1 signaling pathway. Results are shown in Figure 60.

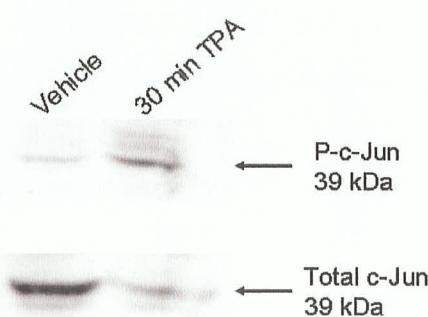
A.



B.



C.

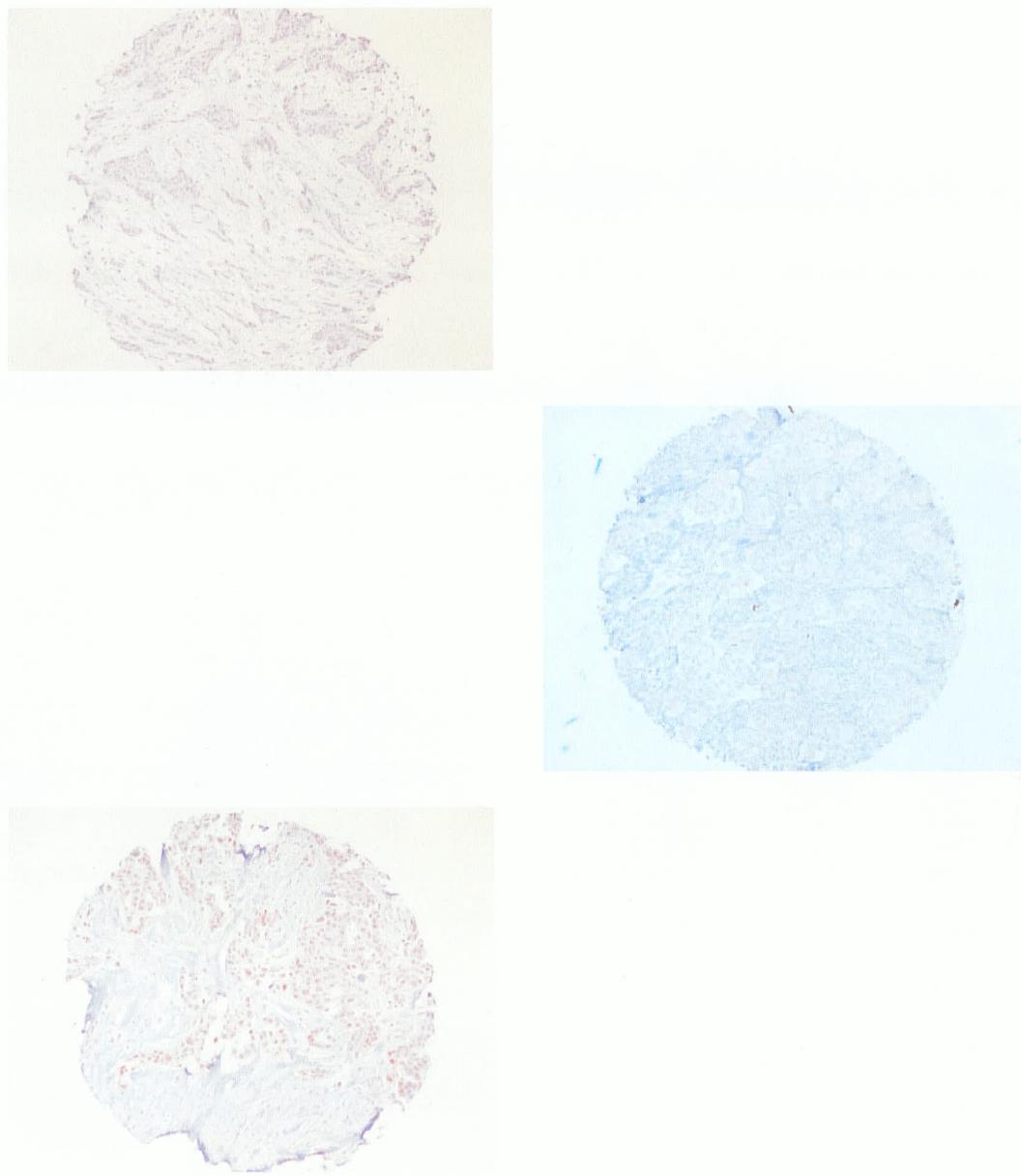


**Figure 60: Phosphorylated c-Jun expression in Cos1 cells determined immunohistochemically and by western blot.** A) Phosphorylated c-Jun expression in cells not treated with TPA (magnification x500). B) Phosphorylated c-Jun expression in Cos1 cells treated with TPA for 30 minutes, detected using mouse monoclonal antibody (Santa Cruz Biotechnology) (magnification x 500). C) Western blot of Cos1 cells treated with vehicle or TPA for 30 minutes. Whole cell extracts were prepared as described in Methods. 22ul of a 300ul extract was run on a SDS-10% acrylamide gel. Western blotting and immune detection was performed as described in Methods. Immune detection was using an anti-P-c-Jun antibody (Santa Cruz) and an antibody that recognizes total c-Jun expression (Santa Cruz).

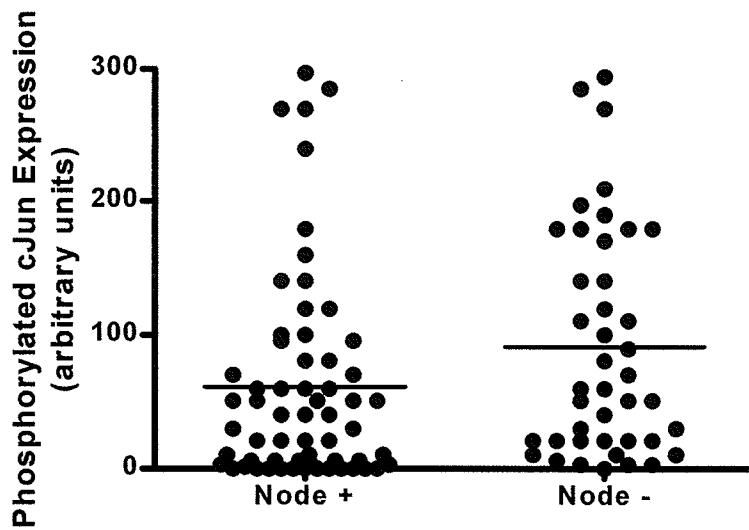
Strong nuclear staining for phosphorylated c-Jun was observed in cells treated with TPA for 30 minutes with little nuclear staining observed in untreated cells. Additionally, western blot analysis of whole cell extracts indicate an increase in phosphorylated c-Jun expression in the TPA treated cells as compared to the corresponding vehicle (Figure 60). Therefore, this antibody was used for additional immunohistochemical analysis of activated c-Jun in the human breast tumor TMAs.

Phosphorylated c-Jun was detected in the nucleus of epithelial tumor cells within the biopsy samples and expression was quantified using H-score analysis as described in Methods. Values ranged from 0 - 300; median = 50 with 13 tumors displaying no detectable staining. Representative immunohistochemical staining in the tumor tissues is shown in Figure 61. When the cohort of cases was considered as a whole (n=112), no correlation was observed between phosphorylated c-Jun H-score and ER ( $r=0.1156$ ,  $p=0.2247$ , Spearman) or PR ( $r=-0.06135$ ,  $p=0.525$ , Spearman) levels. Similar levels of phosphorylated c-Jun were found in ER<sup>+</sup> (median = 50, n=99) and ER<sup>-</sup> (median = 30, n=13) tumors ( $p=0.2270$ , Mann-Whitney), in PR<sup>+</sup> (median = 40, n=83) and PR<sup>-</sup> (median = 60, n=29) tumors ( $p=0.2909$ , Mann-Whitney), in ER<sup>+/PR<sup>+</sup> (median = 50, n = 74) and ER<sup>-/PR<sup>-</sup>(median = 72.5, n = 4) ( $p=0.7684$ , Mann-Whitney) tumors as well as in ER<sup>+/PR<sup>+</sup> (median = 50, n = 74) and ER<sup>+/PR<sup>-</sup> (median = 60, n = 25) ( $p=0.4935$ , Mann-Whitney) tumors. Potential relationships between phosphorylated c-Jun expression and various tumor characteristics were explored and none were found with respect to grade or tumor size. However, phosphorylated c-Jun levels were higher in node negative (median = 60, n = 42) than in node positive (median = 40, n = 61) tumors ( $p<0.05$ , Mann- Whitney)</sup></sup></sup></sup>

(Figure 62). Thus, like nuclear Smad3, phosphorylated c-Jun expression may be associated with a less aggressive tumor.



**Figure 61:** Phosphorylated c-Jun immunostaining in human breast tumor tissue microarrays. Immunohistochemistry with mouse monoclonal antibody (Santa Cruz Biotechnology) on primary tumors, showing no staining (top panel), low staining (middle panel) and high staining tumors (bottom panel) for phosphorylated c-Jun (magnification x100).



**Figure 62: c-Jun H-score in node + and node – tumor tissues.** Human Breast Tumor Tissue microarrays were stained with a monoclonal phosphorylated c-Jun antibody (Santa Cruz Biotechnology) and expression was quantitated by H-score analysis as described in “Methods.” The tumors were divided into node + (lymph nodes displaying breast cancer metastasis) and node – (lymph nodes not displaying breast cancer metastasis). The results are presented as a scatter graph. Lines indicate the median value in each group. Significant differences ( $p<0.05$ ; Mann-whitney, two-tailed) were observed between the two groups.

The above data suggest that similar patterns of expression between nuclear Smad3 and phosphorylated c-Jun may be observed in breast tumor tissues. To investigate this further, the expression of nuclear Smad3 and phosphorylated c-Jun was compared in ER<sup>+</sup> versus ER<sup>-</sup> tumors and in PR<sup>+</sup> versus PR<sup>-</sup> tumors. Correlation between nuclear Smad3 and phosphorylated c-Jun expression was tested by calculation of the Spearman coefficient  $r$  using Smad3 and phosphorylated c-Jun H-scores. When the cohort of cases was considered as a whole ( $n=112$ ), a positive correlation was observed between phosphorylated c-Jun and nuclear Smad3 H-scores ( $r=0.3060$ ,  $p<0.001$ , Spearman). The positive correlation between phosphorylated c-Jun and nuclear Smad3 was observed in ER<sup>+</sup> tumors ( $r=0.3023$ ,  $p<0.005$ ,  $n=99$ , Spearman) but not in ER<sup>-</sup> tumors ( $r=0.3736$ ,

$p=0.2086$ ,  $n=13$ , Spearman). A positive correlation between nuclear Smad3 and phosphorylated c-Jun was also observed in PR<sup>+</sup> ( $r=0.3743$ ,  $p=0.0005$ ,  $n=83$ , Spearman) but not PR<sup>-</sup> tumors ( $r=0.1999$ ,  $p=0.2985$ ,  $n=29$ , Spearman).

## B. Endogenous Model of ER Affecting TGF $\beta$ Signaling

### Rationale

Having found that a significant association and possibly cross-talk between the TGF $\beta$  and Ap-1 signaling pathways only occurs in the background of an ER<sup>+</sup> tumor, we next sought to identify an endogenously expressed gene in breast cells that is functionally modulated by ER and Smad3 in a manner similar to that observed on our reporter plasmids. All the functional experiments performed in section I relied on the transcriptional properties of synthetic reporter constructs (p3TP-lux and collagen 7) and transient transfections into Cos1 (monkey kidney cells) or MCF-7 (human breast cancer cells) cells. While such data are important in developing a model for an interaction between TGF $\beta$  and ER signaling, it does not address the question as to whether such an event occurs on an endogenously expressed gene in breast cancer cells. Thus, we have attempted to identify genes that are up-regulated by antiestrogens in MCF-7 cells that contain Ap-1 and Smad binding sites within their promoter region. In this thesis, we have examined the expression of two such candidate genes, the ER co-activator, AIB1 and TGF $\beta_2$ .

AIB1 or SRC-3, enhances the transcriptional activity of the ER in a ligand dependent manner and its expression is up-regulated in breast tumors (391). While little is known about the regulation of AIB1 mRNA and protein expression, it has been shown

that E<sub>2</sub> treatment inhibits AIB1 mRNA and protein expression in MCF-7 cells (440). This inhibition can be reversed by the antiestrogens ICI 182,780 and 4OH-tamoxifen (440). Furthermore, ICI 182,780 and 4OH-tamoxifen can increase the mRNA expression of AIB1 by 2.5 and 2 fold, respectively, and western blot analysis suggests that ICI 182,780 increases AIB1 protein expression (440). Utilizing neutralizing antibodies to TGF $\beta$ , Lauritsen et. al.(440) have shown that TGF $\beta$  is partly involved in the antiestrogen induced up-regulation of AIB1, possibly through the ability of antiestrogens to stimulate TGF $\beta$ . While the exact promoter sequence of AIB1 has not been reported, the nucleotide sequence of chromosome 20q12, 2 kbp upstream of the AIB1 exon 1 (Genbank accession no. AF012108) was determined through the NCBI Map Viewer of the homo-sapiens gene database. This theoretical promoter sequence was then used in the identification of standard transcription factor binding sites using the free online MatInspector software provided by Genomatix. Search for transcription factor binding sites with a similarity cut-off of 0.75 revealed that while no consensus Smad binding sites are found in the sequence 2 kbp upstream of AIB1, an Ap-1 consensus site was found 110 bp upstream of a Fast-1 binding site. Fast-1 is a Smad interacting protein, in that it forms a complex with Smad2 and Smad4 (441). This complex then binds to a specific promoter sequence known as the activin response element and it is the Fast-1 that mediates specific DNA-binding to this response element whereas the Smads act as transcriptional activators and enhancers of DNA binding (310). Therefore, the promoter region of AIB1 may be responsive to TGF $\beta$ /activin activation as it contains a Fast-1 binding site. While the AIB1 promoter may also contain Ap-1 transcription factor binding sites, no studies have examined the effects of Ap-1 activation on AIB1 expression. Taken together, it appears

as though AIB1 may represent an endogenous model of p3TP-lux activity in human breast cancer cells, in that it is inhibited by estrogen and up-regulated by antiestrogens in MCF-7 cells, its expression is increased by TGF $\beta$  and its promoter contains putative Ap-1 and TGF $\beta$  signaling factor elements.

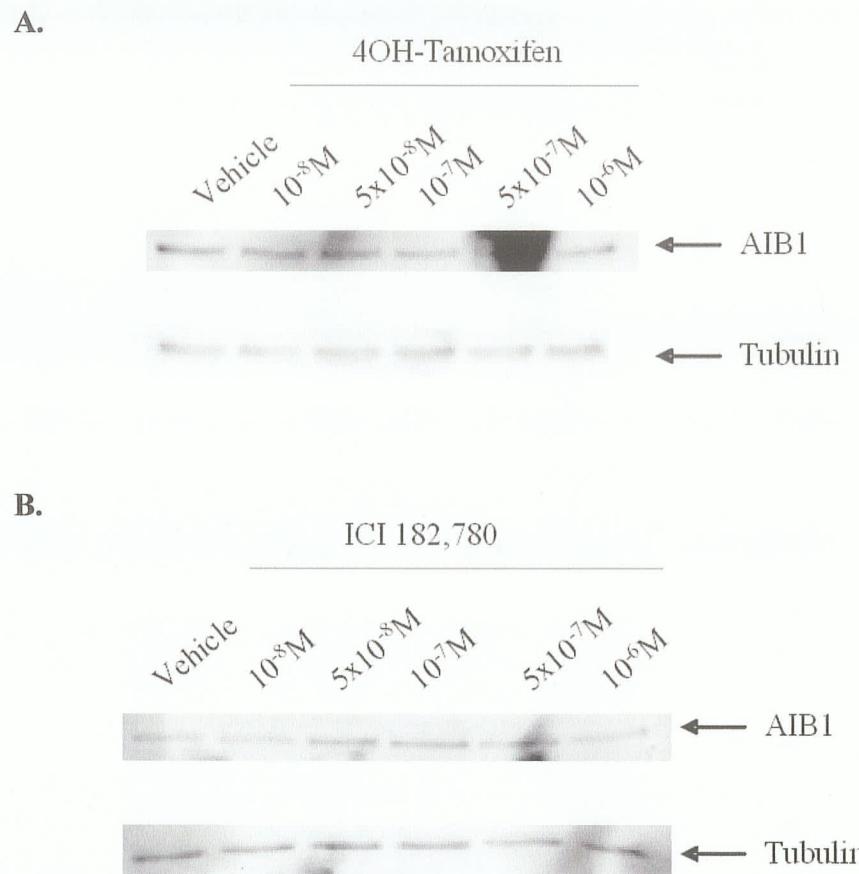
TGF $\beta_2$  mRNA expression has also been shown to be up-regulated by antiestrogens in MCF-7 cells (429). MCF-7 cells treated with 4OH-tamoxifen and ICI 182,780 for 5 days have 18 and 48 fold increases, respectively, in TGF $\beta_2$  mRNA expression as determined by real time PCR analysis. As described in the introduction, TGF $\beta_2$  is a potent negative regulator of breast cancer cell growth. TGF $\beta_2$  is located on chromosome 1q41. As the promoter for TGF $\beta_2$  has not been characterized, putative transcription factor binding sites 2 kbp upstream of the transcription start site were determined using the Genomatix Transcription Factor Search Site. Several Smad3 binding sites with 99% homology were identified downstream of Ap-1 consensus binding sites (>95% homology). Thus, TGF $\beta_2$  was a good candidate in the search for an endogenous gene regulated by TGF $\beta$ , Ap-1 and ER.

## Results

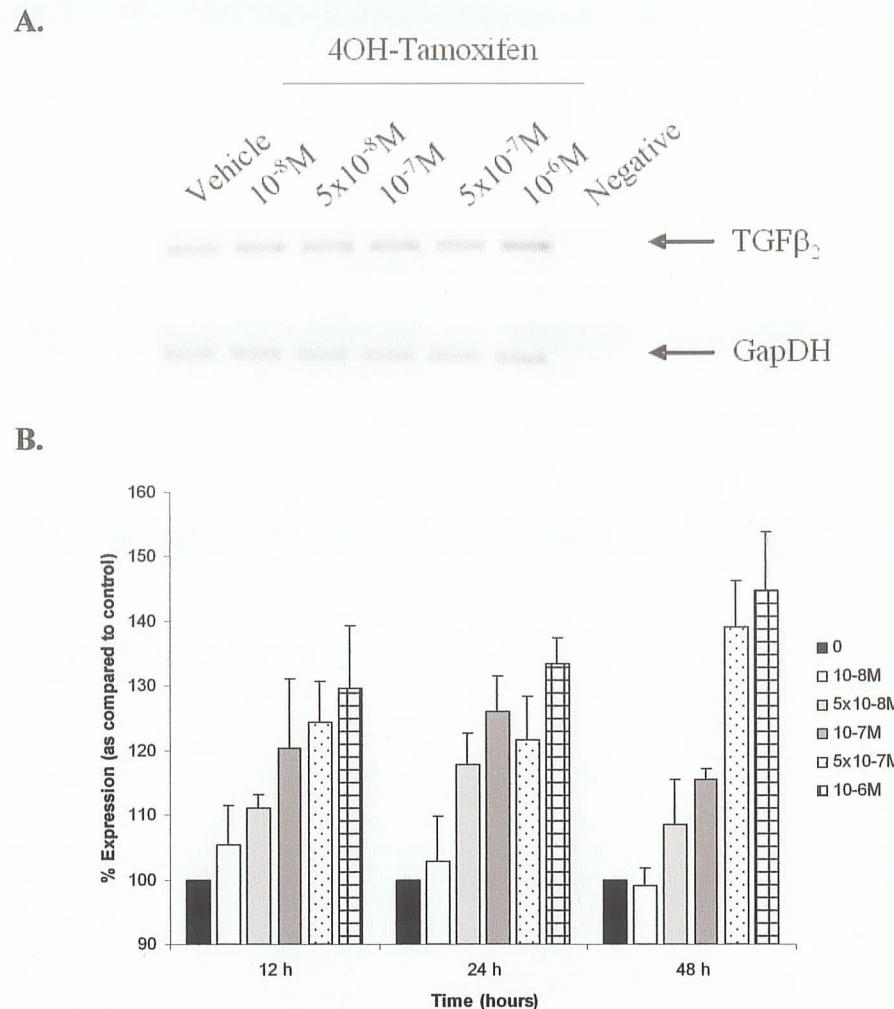
To determine if AIB1 mRNA and protein expression are up-regulated by antiestrogens in MCF-7 cells, cells were grown in CM5% supplemented with 10nM E<sub>2</sub> and subsequently treated with increasing amounts of 4OH-tamoxifen or ICI 182,780 (10<sup>-8</sup>M - 10<sup>-6</sup>M), to ensure that saturating levels of antiestrogens were used to compete with the estrogen, for 1-3 days. This co-treatment of estrogen and antiestrogens has previously been shown to be effective in inhibiting the growth of MCF-7 cells after several days. RT-PCR (data not shown) and western blot analysis of whole cell extracts

(Figure 63) suggest that AIB1 mRNA and protein expression is not affected by tamoxifen or ICI 182,780 treatment in MCF-7 cells (note: the apparent increase in AIB1 expression with  $5 \times 10^{-7}$  M 4OH-tamoxifen (Figure 63a) is an artifact on the membrane that occurred during the western blotting (transfer) procedure). While these results are in contrast to those observed by Lauritsen et. al. (440), it is not surprising as these authors only observed a maximal 2 fold increase in AIB1 expression in MCF-7 cells. Thus, it does not appear as though AIB1 expression is regulated by ER in our model system and cannot be used to further investigate the ER and TGF $\beta$  pathway cross-talk.

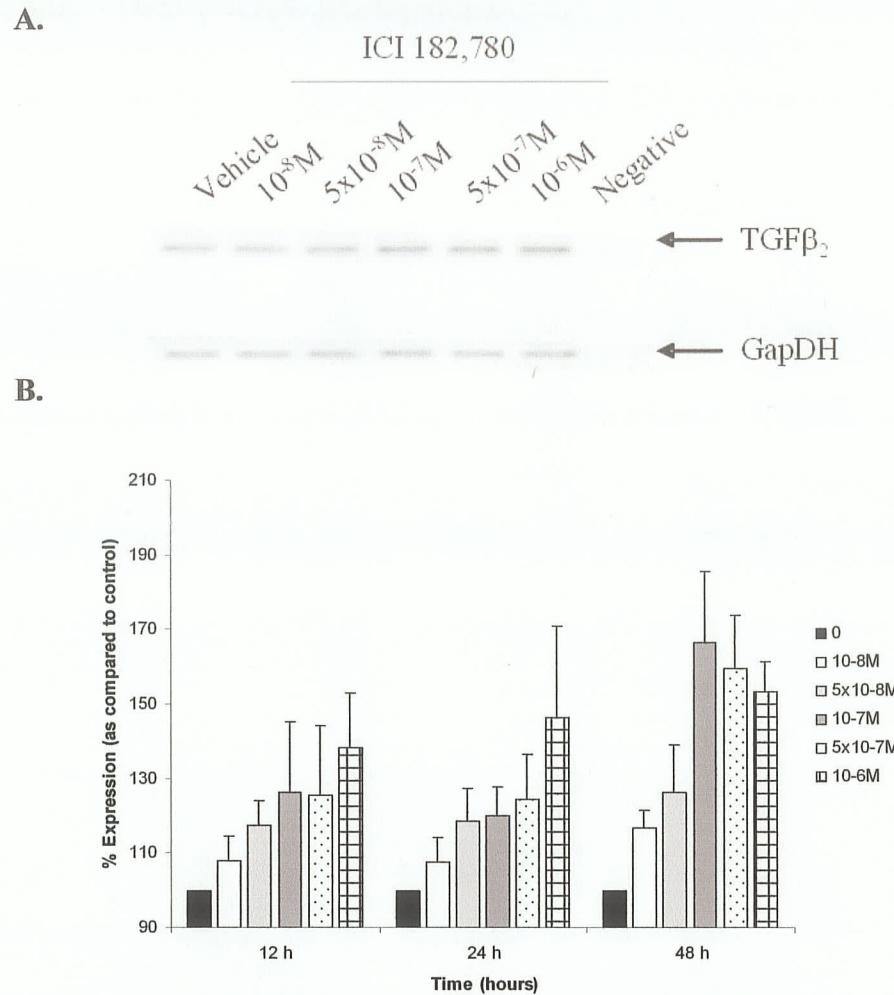
To determine whether TGF $\beta_2$  expression is increased by antiestrogen treatment, MCF-7 cells were treated with increasing amounts of 4OH-tamoxifen or ICI 182,780 in the presence of 10nM E<sub>2</sub> over a period of 12, 24 and 48 h. RNA was isolated and TGF $\beta_2$  mRNA expression was determined by RT-PCR as described in Methods. Typical PCR reaction products for TGF $\beta_2$  and GAPDH (internal control) in MCF-7 cells treated with 4OH-tamoxifen are shown in Figure 64a. TGF $\beta_2$  mRNA expression increased significantly in the presence of 4OH-tamoxifen in a dose-dependent manner over a period of 24 h ( $p < 0.005$ ) and 48 h ( $p < 0.0005$ ) (Figure 64b). No significant change in expression was observed at 12 h exposure to 4OH-tamoxifen. ICI 182,780 treatment also significantly ( $p < 0.01$ ) increased TGF $\beta_2$  mRNA expression at 48 h in a dose-dependent manner, while no significant effect was observed at 12 and 24 h (Figure 65).



**Figure 63:** Effect of antiestrogen treatment on AIB1 protein expression in MCF-7 cells. MCF-7 cells were set-up at  $5 \times 10^4$  cells/well in 6 well plates in CM5% containing 10nM E<sub>2</sub>. Four days later, cells were treated with increasing ( $10^{-8}$ - $10^{-6}M$ ) concentrations of either A) 4OH-tamoxifen or B) ICI 182,780. Cells were harvested 6, 12, 24 or 48 h later and whole cell extracts were prepared in SDS isolation buffer as described in Methods. BCA protein assays were performed and 23ug of protein was run on a SDS-7.5% acrylamide gel. Western blotting and immune detection were performed as described in Methods. Immune detection was using an anti-AIB1 antibody (BD Transduction Laboratories). Results represent a typical (n=3) western blot for AIB1 upon 24 h treatment with antiestrogens.



**Figure 64: TGF $\beta_2$  mRNA expression in MCF-7 cells treated with 4OH-tamoxifen.** MCF-7 cells were set-up in 6 well plates at  $5 \times 10^4$  cells/well in CM5% containing 10nM E<sub>2</sub>. Four days later, cells were exposed to increasing ( $10^{-8}$ M –  $10^{-6}$ M) concentrations of 4OH-tamoxifen. Cells were harvested 12, 24 and 48 h later. Total RNA was extracted, reverse transcribed and PCR amplified using TGF $\beta_2$  and GapDH primer pairs as described in Methods. PCR products were run out on a 1.2% agarose gel and visualized with the Chemidoc system. A) Typical agarose gel showing TGF $\beta_2$  and GapDH PCR products from a 24 h treatment with 4OH-tamoxifen. B) Densitometric analysis of TGF $\beta_2$  and GapDH PCR products from MCF-7 cells treated with 4OH-tamoxifen over 12, 24 and 48 h. Results are expressed as the average units of TGF $\beta_2$ /GapDH, n=3 independent experiments with each experiment containing n=3 independent PCR reactions. Significant differences in TGF $\beta_2$  mRNA expression were observed over 24 h (p<0.005, ANOVA) and 48 h (p<0.00005, ANOVA) exposure to 4OH-tamoxifen.



**Figure 65: TGF $\beta_2$  mRNA expression in MCF-7 cells treated with ICI 182,780.** MCF-7 cells were set-up in 6 well plates at  $5 \times 10^4$  cells/well in CM5% containing 10nM E<sub>2</sub>. Four days later, cells were exposed to increasing ( $10^{-8}$ M –  $10^{-6}$ M) concentrations of ICI 182,780. Cells were harvested 12, 24 and 48 h later. Total RNA was extracted, reverse transcribed and PCR amplified using TGF $\beta_2$  and GapDH primer pairs as described in Methods. PCR products were run out on a 1.2% agarose gel and visualized with the Chemidoc system. A) Typical agarose gel showing TGF $\beta_2$  and GapDH PCR products from a 48 h treatment with ICI 182,780 (ICI). B) Densitometric analysis of TGF $\beta_2$  and GapDH PCR products from MCF-7 cells treated with ICI 182,780 over 12, 24 and 48 h. Results are expressed as the average units of TGF $\beta_2$ /GapDH, n=3 independent experiments with each experiment containing n=3 independent PCR reactions. Significant differences in TGF $\beta_2$  mRNA expression were observed over 48 h (p<0.01, ANOVA) exposure to ICI 182,780.

### **Key Findings from Section III**

Within this section, we have provided evidence that the functional model presented in section I of the results may occur in a human breast cancer cell background. Specifically:

1. Immunohistochemical staining of breast tumor TMAs demonstrated that while neither nuclear Smad3 nor phosphorylated c-Jun expression correlates with ER<sup>+</sup> tumors, there is a positive correlation between nuclear Smad3 and phosphorylated c-Jun protein expression in ER<sup>+</sup> but not ER<sup>-</sup> tumors. This suggests that all three proteins can be expressed within the same breast tumor. Thus, a significant association and potential interaction between TGF $\beta$  and Ap-1 regulated transcription may only occur in the presence of ER, supporting the hypothesis that all three pathways may cross-talk and have a role in some breast tumors *in vivo*.
2. Endogenously expressed TGF $\beta_2$  mRNA expression is up-regulated by antiestrogens in MCF-7 cells in a manner similar to that observed on the TGF $\beta$  responsive reporter plasmid p3TP-lux utilized in section I of the results. As the promoter region of TGF $\beta_2$  contains several putative Smad3 as well as Ap-1 binding sites, this gene may represent an endogenous model on which ER, TGF $\beta$  and Ap-1 functionally interact. While TGF $\beta_2$  looks to be a promising candidate in our model system, the regulation of this gene by TGF $\beta$  and Ap-1 would be the focus of future studies.

## DISCUSSION

The ER is a member of the steroid receptor family and acts as a ligand-inducible transcription factor to modulate target gene transcription. Reports of an interaction between the negative growth regulatory factor TGF $\beta$  via Smad3 with the GR (322), AR (337, 338) and VDR (320) suggest that the steroid receptor family can influence TGF $\beta$  signaling or, conversely, that the TGF $\beta$  pathway may modulate steroid receptor activity. In one study, Smad3, a downstream signaling protein of TGF $\beta$ , enhanced the ligand-induced transactivation function of VDR via direct hormone-dependent interactions between Smad3 and VDR (320, 395) while the effect of VDR on Smad3 transcriptional activity has not been assessed to this date. TGF $\beta$ /Smad3 has been shown to repress AR transcriptional activity from several AR dependent promoters (337) while in another study, Smad3 increased AR-mediated transcription (338). In contrast, ligand activated AR represses Smad3 transcription in prostate cancer cells (396). Lastly, TGF $\beta$ /Smad3 does not affect GR transcriptional activity while activated GR represses Smad3 transcriptional activity (322).

These findings with respect to various members of the steroid receptor family suggest that there may also be cross-talk between the ER and TGF $\beta$  signaling pathways. We therefore examined the modulation of ER transcriptional activity in cells over-expressing Smad3. Our results demonstrated that while Smad3 had little if any effect on ER transcriptional activity on promoters representing the classical (represented by the *Xenopus* vitellogenin ERE) or non-classical (as represented by the TGF $\beta_3$  promoter reporter plasmid) mode of ER action, ER $\alpha$  and ER $\beta_1$  effectively inhibited Smad3 transcriptional activity in Cos1 and MCF-7 cells. These observations are in agreement

with several other laboratories (320, 322, 337, 338). However, it had not previously been addressed as to whether the ER $\beta$  variants, ER $\beta_2$  or ER $\beta_5$ , affect Smad3 transcriptional activity. Results from this thesis suggest that while the wild-type ER $\beta$ , ER $\beta_1$ , effectively inhibits Smad3 induced p3TP-lux luciferase activity in the presence of estrogen, the ER $\beta$  variants do not have any effect, in keeping with the observation that ER $\beta_2$  and ER $\beta_5$  do not bind ligand (139).

Our observation that Smad3 does not affect ER transcriptional activity on an ERE is in contrast to that described by Matsuda et al.(335), who suggest that Smad3 increases ER transcriptional activity on the vitellogenin ERE in MCF-7 and 293T (human embryonic kidney carcinoma) cells. Although the reason behind this discrepancy is unclear, it may be due to different cell backgrounds in which the experiments were performed and/or to differences in reporter genes. Experiments by us and others to assess the effect of TGF $\beta$  on ER activity were performed in Cos1 (green monkey kidney cells) (320), human prostate cancer (DU145 and PC-3) (337, 338) and human hepatocellular carcinoma (Hep3B) (322) cells; no studies were performed in MCF-7 or 293T cells as described by Matsuda et al. (335). Contrasting results have previously been reported with respect to the functional interaction between TGF $\beta$  and steroid receptors in various cell lines. For example, Yanagisawa et al. (320) demonstrated that in Cos1 cells transiently transfected with AR, activation of TGF $\beta$  did not affect AR activity on an androgen responsive promoter while others have reported an inhibitory effect of TGF $\beta$  on AR activity in prostate cancer cells (337). Similarly, GR has been shown to inhibit Smad3 transcriptional activity in Hep3B cells (322) while another study demonstrated that GR did not have any effect on TGF $\beta$  in 293T cells (335). Therefore, our results

indicate that different functional outcome with respect to the modulation of ER $\alpha$  transcriptional activity by TGF $\beta$  occurs in a cell dependent manner.

The TGF $\beta$  responsive promoter p3TP-lux used in this thesis consists of a small segment of the human collagenase III promoter cloned in triplicate 5' from that region of the PAI-1 promoter that contains the Smad3 binding site. PAI-1 is a member of the serine protease inhibitor family that contributes to the regulation of endogenous extracellular matrix degradation by tightly binding both tissue-type and urokinase plasminogen activators. Thus, TGF $\beta$ , by increasing the expression of PAI-1, effectively inhibits the degradation of the extracellular matrix. Estrogen has been shown to reduce circulating plasma levels of PAI-1 in postmenopausal women (442, 443), an effect thought to partly mediate the cardiovascular protective effects of estrogen. However, Smith et al. (442) have shown that in vascular endothelial cells over-expressing ER $\alpha$ , there is a significant increase in PAI-1 promoter activity in the presence of estrogen while ER $\beta$  has little or no effect. Deletion mutations mapped the ER $\alpha$  binding site to a consensus ERE located in the proximal PAI-1 promoter and site-directed mutagenesis of this ERE completely abolished the stimulatory effect of ER $\alpha$  (442). These authors also indicated that intact Ap-1 sites are not essential in the modulation of PAI-1 promoter activity by ER (442). However, the role of the TGF $\beta$  consensus sequence was not addressed in these studies. The segment of the PAI-1 promoter used in our studies, while it does include a half ERE site, does not encompass the ERE that was identified by Smith et al. (442) as being essential in modulating ER activity on PAI-1 but rather, encompasses that region surrounding the TGF $\beta$  responsive element. The absence of this ERE in the p3TP-lux promoter, in addition to different cell backgrounds, is the most likely

explanation for the discrepancy between our results, in which both ER $\alpha$  and ER $\beta$  inhibited promoter activity, and that of Smith et al. (442).

Nonetheless, the half ERE site in p3TP-lux (Figure 16) or the 3 half ERE sites in the collagen 7(A1) -524/+92 (Figure 21) reporter plasmid may play a role in the ability of ER to modulate Smad3 transcriptional activity. Several studies suggest that although ER $\alpha$  cannot bind a single ERE half site, dimeric ER $\alpha$  can bind an ERE half site when stabilized by protein:protein interactions with Ap-1 bound to its DNA binding element (88). In the presence of estrogen, ER $\alpha$  typically acts in synergy with Ap-1 transcription factors in this manner, enhancing Ap-1 transcriptional activity (279), although an inhibitory effect has also been reported (225). It has been suggested that ER $\alpha$  enhances Ap-1 activity through cooperative recruitment of co-activators, namely p160 co-activators, to the promoter region (286) while the inhibitory effect has been hypothesized to be the result of direct competition for limiting amounts of transcriptional co-activators to the promoter (282). By modulating Ap-1 transcriptional activity through the ERE sites in our TGF $\beta$  reporter plasmids, ER may indirectly affect Smad3 transcriptional activity as Ap-1 alters Smad3 activity on the reporter plasmids. It may also be possible that ER is able to bind to its half ERE sites through cooperative binding with TGF $\beta$ , although this has not been described to date. The putative role of these EREs in our reporter plasmids would have been best illustrated through site directed mutagenesis of the EREs.

The role of estrogen in mediating the ER suppression of p3TP-lux in Cos1 cells is apparent; E<sub>2</sub> inhibits Smad3 activity while co-treatment with the antiestrogens 4OH-tamoxifen or ICI 182,780 suppresses this effect. However, its role in inhibiting TGF $\beta$  activity in MCF-7 cells transiently over-expressing ER $\alpha$  is rather unclear as our results

did not show any effect of estrogen treatment on p3TP-lux activity as compared to vehicle treated cells. It has previously been shown by Matsuda et al. (335) that treatment of MCF-7 cells with TGF $\beta$  ligand increases p3TP-lux activity 4.5 fold; co-treatment with E<sub>2</sub> significantly inhibited this response (335). While the conditions under which the cells were cultured between the results described in this thesis are quite different from that previously published, transfected cells were exposed to similar E<sub>2</sub> concentrations over similar time periods. It is of concern, however, that Matsuda et al. (335) transfected their cells in the presence of 1% (v/v) fetal calf serum in DMEM that was not free of phenol red. Fetal calf serum and DMEM with phenol red contain growth hormone contaminants, including estrogen, that result in the cells being in a stimulated state. Contaminants of phenol red act as weak estrogens and at concentrations found in common tissue culture media, causes significant stimulation of cell proliferation and protein synthesis in estrogen responsive cells (403). Considerable efforts were made in our experiments to ensure that this was not the case; cells were grown in phenol red free DMEM and in twice charcoal stripped serum (a process that removes a large portion of growth hormones from the serum) to ensure minimal contribution by growth hormones and estrogenic contaminants of phenol red.

Interestingly, the inhibitory effect of ER $\alpha$  over-expression on TGF $\beta$  signaling was not observed in a MCF-7 cell line stably expressing GFP-tagged ER $\alpha$  under control of doxycycline. The absence of an effect in these cells is likely due to the lack of total altered ER $\alpha$  expression in these cells. Immunoblot analysis of doxycycline induction of GFP-ER $\alpha$  show that while there is an increase in the expression of GFP-ER $\alpha$ , endogenous levels of ER decreased. This has previously been observed by Zhao et al.

(399). Accordingly, the decline in endogenous ER $\alpha$  protein levels upon doxycycline treatment is accompanied by a decrease in ER $\alpha$  mRNA levels, demonstrating that ER autoregulates its own expression (399). Experiments in our MCF-7 cells suggest that a very high level of ER $\alpha$  expression is required in order to alter Smad3 signaling, as we were unable to observe any effect in these cells without over-expressing ER $\alpha$  through transient transfections. Interestingly, however, whole cell ligand-binding assays show a 2 fold increase in [ $^3$ H]E<sub>2</sub> binding upon treatment of doxycycline in the GFP-ER $\alpha$  inducible MCF-7 cells (424), suggesting that there is an overall increase in ER $\alpha$  expression. The upregulation of tagged ER $\alpha$  in the presence of doxycycline is sufficient to induce endogenously expressed PR in the MCF-7 cells and a further increase in PR expression may be observed with E<sub>2</sub> treatment (424). Nonetheless, this increase does not appear to be sufficient to modulate TGF $\beta$  signaling within these cells.

MCF-7 cells produce and secrete TGF $\beta$  isoforms *in vitro* and growth of these cells is inhibited by exogenous TGF $\beta$ . It has previously been reported that treatment of MCF-7 cells with the antiestrogen tamoxifen leads to a release of active TGF $\beta_1$  from a latent precursor molecule and to increased transcription of TGF $\beta_2$  and T $\beta$ RII (425, 426, 444). Consistent with these observations, we also demonstrated in this thesis that TGF $\beta_2$  mRNA expression is increased upon tamoxifen treatment in MCF-7 cells. Thus, TGF $\beta_2$  may represent an endogenous model through which ER modulates TGF $\beta$  signaling in breast cancer cells. The demonstration by other authors that antiestrogens increase TGF $\beta_1$  secretion may explain the increase we observed in p3TP-lux activity upon tamoxifen treatment, as an increase in TGF $\beta$  secretion by the cells would in turn activate

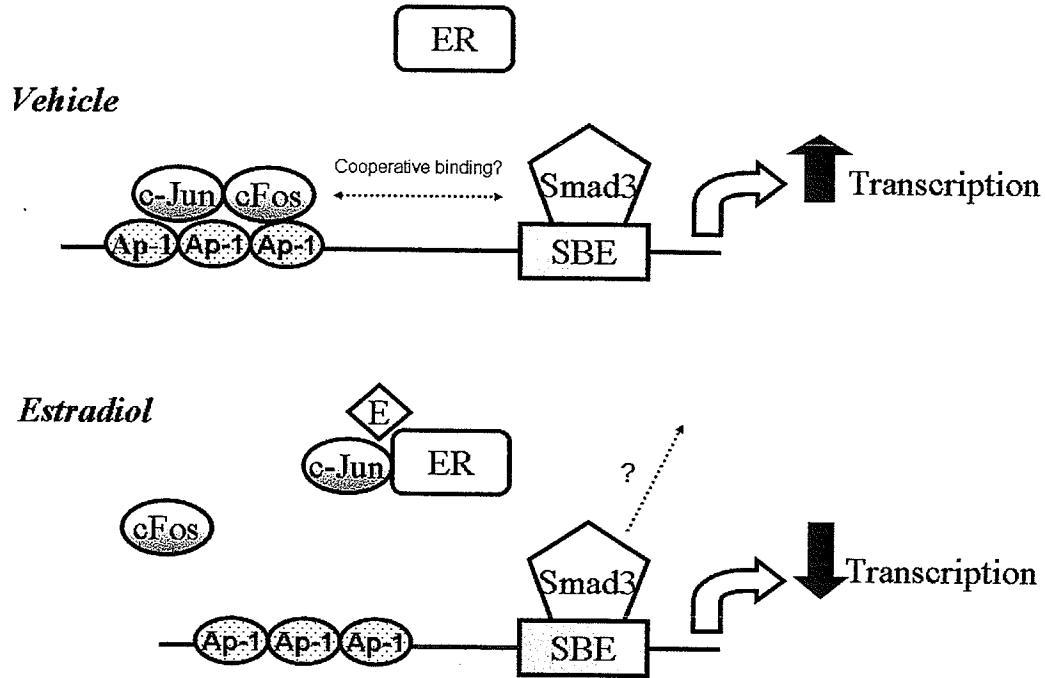
Smad signaling pathways, leading to an increase in Smad3/4 phosphorylation and TGF $\beta$  transcriptional activity. However, we did not determine the expression of TGF $\beta$  ligand upon antiestrogen treatment in this thesis. ICI 182,780 also enhances TGF $\beta$  secretion from MCF-7 cells (425) but its inhibitory action on ER activity is primarily due to the ability of ICI to increase ER protein degradation by targeting it to the proteasome (163, 164).

The p3TP-lux luciferase reporter plasmid consists of the Ap-1 containing region of the collagenase promoter concatemerized to a region of the PAI-1 promoter. Mutation of the Ap-1 binding sites in p3TP-lux inhibits induction by Smad3/Smad4 overexpression and reduces, but does not completely eliminate Smad DNA binding (412), suggesting that the Ap-1 sites are important in mediating TGF $\beta$  induced p3TP-lux transcription. Furthermore, Smad3/Smad4 co-overexpression activates an Ap-1 reporter containing seven concatemerized Ap-1 sites, firmly establishing a role for Smads in activating transcription from Ap-1 sites (412). In accordance with the Ap-1 sites being active and important in mediating p3TP-lux activity, we have shown that c-Jun or c-Fos over-expression increases Smad3 transcriptional activity in Cos1 cells. Direct interactions between Smad3/Smad4 and Ap-1 factors have been described (412, 433, 434) that mediate the recruitment of Smads to the promoter region.

In addition to TGF $\beta$ , Ap-1 factors also interact with and modulate ER transcription through functional and/or physical interactions. ER $\alpha$  cooperates with c-Jun and c-Fos to confer estrogen responsiveness to simple, heterologous promoters (231, 286) and to the ovalbumin (232), *c-fos* (130), collagenase (280, 283), PR (132) and IGF-1 (274) genes. Furthermore, ER $\alpha$  has been shown to interact with promoter bound c-Jun to

mediate transcriptional activation in the absence of its DBD (276) and direct protein:protein interactions between ER and c-Jun have been described both *in vitro* (224, 231) and *in situ* (287). The identification of c-Jun as an important part of the activation complex suggests a molecular mechanism by which ER may modulate Ap-1 activity. The idea that nuclear receptors compete with other transcription factors for binding to a limiting pool of accessory factors necessary for gene expression is not a new one (119, 442). TBP, p300 and CBP co-activators have all been shown to be limiting factors in their ability to activate ER and Smad3 responses (119, 276, 445, 446). Over-expression of the adenovirus E1a protein titrates p300 and CBP from a Smad transcriptional complex inhibiting Smad responses; mutations in E1a that lack co-activator binding had no effect on Smad activity (316, 446). Results from our experiments suggest that Ap-1 factors may also be limiting for TGF $\beta$  signaling in the presence of ligand-activated ER as over-expression of c-Jun reverses the inhibitory effect of ER $\alpha$  on p3TP-lux activity. Co-transfection with vectors expressing c-Fos did not significantly diminish the ER $\alpha$  inhibitory effect, a finding which is consistent with ER $\alpha$  not forming protein:protein interactions with c-Fos. This affect does not appear to be common to all co-activators, however, as over-expression of the ER/TGF $\beta$  co-activator SRC-1 did not rescue the inhibitory effect of ER on Smad3 transcriptional activity. Nonetheless, it is possible that other transcriptional cofactor(s) may participate in this antagonism, as it has been reported that CBP and p300 are also co-activators for ER $\alpha$  and Smad3 (81, 315).

As c-Jun appears to be a limiting factor in the ability of activated ER to inhibit Smad3 signaling, we proposed the model depicted in Figure 66. In the absence of



**Figure 66:** Model of the mechanism through which ER inhibits TGF $\beta$  signaling on p3TP-lux. E = estrogen, SBE = Smad binding element.

estrogen, c-Jun homodimers or c-Jun/c-Fos heterodimers bind to the Ap-1 sites located in the human collagenase gene of p3TP-lux and Smad3 binds to the SBE of the PAI-1 region. Whether Smad3 binds to the SBE prior to c-Jun/c-Fos or whether Ap-1 binding enables Smad3 to bind to the SBE is unknown as the transcriptional action of Smad complexes has yet to be understood in terms of sequential recruitment of factors. It is not unreasonable to assume that Smad3 cooperates with Ap-1 factors for effective DNA binding as the affinity of Smad proteins for the SBE is often too low to support binding of the Smad complex to a single SBE (447). Once activated by estrogen, the ER then titrates c-Jun away from the promoter region by specifically binding to Jun and not Fos

proteins, effectively inhibiting Ap-1 factors from binding to the Ap-1 site (as Fos cannot bind DNA itself) (243). The loss of Ap-1 binding may also result in Smad complexes dissociating from the SBE as the cooperative interactions between the proteins are lost. As it has been suggested that ER does not bind to c-Jun in the presence of antiestrogens (224), the ER would be unable to sequester c-Jun away from the promoter region while bound to such ligands. Competition of antiestrogens to estrogen for the ER would effectively reverse the inhibitory effect of E<sub>2</sub>-bound ER on TGF $\beta$  signaling.

To provide further evidence that a competition between Smad3 and ligand-activated ER is responsible for modulating Smad3 transcriptional activity, we examined the interaction between ER and c-Jun. While the interaction between ER $\alpha$  and c-Jun has been previously described, we were unable to observe a physical interaction between ER $\alpha$  and c-Jun in our model system. In one study, ER $\alpha$  proteins fused to glutathione S-transferase (GST-ER) were shown to interact with *in vitro* translated c-Jun through its amino-terminal domain (231). In contrast, another study using c-Jun fused to GST and *in vitro* translated ER $\alpha$  suggested that the carboxy-terminal region of ER $\alpha$  was required for its interaction with c-Jun while the bZIP region of c-Jun is involved in the interaction (224). No interaction between Fos proteins and ER $\alpha$  has been observed by either of these authors (224, 231). The interaction between ER $\alpha$  and c-Jun in intact cells has been described by Teyssier et al. (224), in which a physical contact between the two proteins was determined by an increase in expression of a GAL4-responsive luciferase reporter plasmid or by co-IP of ER $\alpha$  and c-Jun proteins in transiently transfected Cos1 cells. These authors also suggest that the interaction between ER $\alpha$  and c-Jun is enhanced in the presence of estradiol but is inhibited by tamoxifen or ICI 182,780 treatment (224). Most

importantly, however, the interaction between endogenous ER and endogenous c-Jun has recently been described in MCF-7 cells (287). Immunoprecipitation of MCF-7 cell lysates with an anti-ER $\alpha$  antibody was able to successfully pull-down c-Jun along with ER $\alpha$ ; this interaction was enhanced upon c-Jun phosphorylation (287). Thus, while we were unable to observe a physical contact between ER $\alpha$  and c-Jun, evidence strongly suggests that they do; whether this occurs in a ligand-dependent manner, however, is unclear.

To further test our hypothesis that ER $\alpha$  sequesters c-Jun away from the p3TP-lux promoter, we determined if the amount of c-Jun bound to the Ap-1 sites in the promoter decreased in the presence of estrogen. EMSA and ChIP analysis results both suggest that the amount of c-Jun bound to the Ap-1 site does not change in the presence of E<sub>2</sub> bound ER. These results are in agreement to those by Cheng et al. (276) who show that c-Jun and c-Fos binding to the Ap-1 site on the gonadotropin releasing hormone receptor (GnRHR) is not affected by estrogen treatment. Moreover, these authors also determined that ER $\alpha$  was not part of the nucleoprotein complex on the Ap-1 oligonucleotide, as addition of an anti-ER $\alpha$  antibody had no effect on complex formation (276), a finding similar to our own. In contrast, other studies have suggested that the ER is able to interact with c-Jun bound to DNA (224), and that such an interaction results in transcription initiation increasing Ap-1 activity (282). This makes one wonder whether the stimulatory and inhibitory effects of ER are mediated by two distinct mechanisms, as has been hypothesized for the opposing effects of ER $\alpha$  and ER $\beta$  at Ap-1 sites (96, 277). Nonetheless, mutations in ER that inhibit its binding to c-Jun significantly diminishes the

inhibitory response of ER on Ap-1 sites, suggesting that the effect of ER is, at least in part, dependent on its ability to bind c-Jun (287).

So, how does ER $\alpha$  suppress Smad3 transcriptional activity? It has been proposed that nuclear receptors may inhibit TGF $\beta$  transcriptional activity by decreasing Smad expression levels. Our data exclude the possibility that estrogen represses total Smad3 expression levels, a finding that is in agreement with other laboratories (448). At the time when these experiments were performed, we were unable to determine whether estrogen treatment affects the phosphorylation level of Smad3 as antibodies specific for phospho-Smad3 were unavailable. Recently, however, it has been shown that in the presence of estrogen, phosphorylation of Smad3 was reduced by approximately 60% compared with TGF $\beta$  stimulated MCF-7 cells while total Smad3 protein levels were unaffected (448). The decrease in Smad3 phosphorylation by estrogen was shown to be accompanied by a reduction of a functional Smad3/Smad4 complex (448).

It has been proposed by Matsuda et al. (335) that ER inhibits TGF $\beta$  transcriptional activity by forming direct physical interactions with Smad3. Co-IP experiments were performed in which 293T cells were transiently transfected with ER $\alpha$ , Flag-tagged Smad3 and T $\beta$ RI (T204D) (a constitutively active T $\beta$ RI receptor) expression vectors in the presence or absence of estrogen. Results indicated that ER $\alpha$ -Smad3 interactions occur only in the presence of estrogen; no interaction was detected in the absence of ligand. However, in this thesis, we were unable to co-IP ER $\alpha$  and Smad3 in Cos1 cells transiently transfected with Smad3 and ER $\alpha$  expression vectors. In the study by Matsuda et al. (335), IPs were performed with both an anti-Flag and anti-ER $\alpha$  antibody. However, no negative control antibody (i.e. an antibody of the same class as

the IP antibody) was used in the 293T co-IP experiments. From our experience, a negative control antibody is an essential part in interpreting the results of an IP experiment due to non-specific binding of proteins to antibodies and/or to the protein G sepharose beads (as was observed in several of our co-IP experimental results). In our several attempts to co-IP ER $\alpha$  and Smad3, a band corresponding to the molecular mass of ER $\alpha$  (i.e. 62 kDa) was often observed when cellular extracts were IP for Smad3. However, a band of similar molecular mass and intensity was present when non-specific antibodies of the same class as the Smad3 antibody were used, suggesting that a specific interaction between ER $\alpha$  and Smad3 was not present under those conditions. Further experiments in MCF-7 cells by Matsuda et al. (335) included a control IgG antibody, however, whether this antibody was of the same class as the immunoprecipitating antibody is unknown.

The MH2 domain of Smad3 has been implicated in being involved in the interaction with ER (335). Wu et al. (449) have described the interaction between Smad4 and ER $\alpha$  to entail the MH1 domain of Smad4 and the AF1 domain of ER $\alpha$  while Yamamoto et al. (336) have shown that the DNA binding domain of ER $\alpha$  is essential for binding to Smad1. However, the region of the ER that binds with Smad3 has not yet been identified. The region of the ER that interacts with Smad3 is important as antibodies that recognize the same region as that involved in protein interactions may not be able to successfully IP those two proteins. The ER $\alpha$  antibody used by Matsuda et al. (335) to describe the interaction between ER $\alpha$  and Smad3 is unknown; the authors only indicate that the antibody was obtained from Santa Cruz Biotechnology, a company that has several ER $\alpha$  antibodies available. The IP experiments described in this thesis utilized

2 different ER $\alpha$  antibodies; one that recognized the C-terminal of ER $\alpha$  (rabbit polyclonal; Santa Cruz Biotechnology) and one that recognized the full-length form of the receptor (mouse monoclonal; NovoCastra Laboratories). Both of these antibodies have been used previously to successfully co-IP proteins *in situ*. The conditions under which IPs were performed were very similar between Matsuda et al. and us. However, one significant factor that may impact our the ability to observe an interaction between Smad3 and ER $\alpha$  may involve post-translational modifications. As described previously, Smad3 is phosphorylated by T $\beta$ RI upon ligand-binding; this phosphorylation event is important in mediating the interaction between Smad3 and the co-Smad, Smad4. In the experiments by Matsuda et al. (335), the constitutively active T $\beta$ RI receptor, T204D, was transiently transfected into the cells along with Smad3 and ER $\alpha$  or the cells were stimulated with TGF $\beta$  ligand. Thus, presumably Smad3 would be in a phosphorylated state (although this was not determined in the study). In our experiments, cells were not typically stimulated with TGF $\beta$  and thus, the level of phosphorylated Smad3 may have been low in our cells despite the level of p3TP-lux reporter gene activity. If indeed it is only the phosphorylated form of Smad3 that interacts with ER $\alpha$ , then western blotting of an IP extract may not detect the low level of phosphorylated Smad3 that IP with ER $\alpha$ . At the time of these experiments, however, an antibody towards the phosphorylated form of Smad3 was not available and we were unable to determine the level of phosphorylated Smad3 in our cells.

Another possible mechanism through which ER may affect TGF $\beta$ /Ap-1 signaling is by influencing the binding of transcription factors to their cognate recognition sequence (132). In this study, we were unable to observe Smad3 binding to the SBE in

our ChIP analysis, most likely due to the inefficiency of our antibodies to IP Smad3. Thus, whether ER $\alpha$  is able to alter Smad3 binding, either directly or indirectly, to the promoter of target genes is unknown. The affinity of Smad proteins for the SBE is too low to support binding of a Smad complex to a SBE (447). In order for efficient binding to occur, the Smad complex must interact with other DNA-binding transcription factors (450). This allows Smads to bind to promoter regions that contain one SBE in the vicinity of the binding sequence for the other cofactor. Therefore, if ER lowers the expression level of other transcription factors that are important in Smad binding to the p3TP-lux promoter, this would effectively inhibit TGF $\beta$  transcription. Alternatively, the ER may activate or even repress another gene whose product modulates TGF $\beta$  function, either negatively or positively. One such gene candidate is the protooncogene *c-myc* which has recently been identified as a co-repressor of Smad3 signaling (451). Over-expression of *c-myc* effectively inhibits Ap1/Smad transcriptional synergism through its direct interaction with the Smad nucleoprotein complex on DNA without affecting DNA binding (451). As *c-myc* expression is induced by estrogen in ER $^+$  cells (452), it may disrupt the functional synergism between Ap-1 and Smad3, thus leading to the inhibition of Smad3 transcriptional activity. In addition, the ER may even titrate a Smad activator other than Ap-1 from the p3TP-lux promoter, resulting in decreased TGF $\beta$  activity.

It is important to note that the estrogen repression of Smad3 transcriptional activity was observed after 48 h of treatment. Thus, the repression may be indirect and involve activation of certain early response genes, the products of which can interfere with TGF $\beta$  induction. For example, activation of the MAPK pathway has been shown to phosphorylate the Smad2/3 co-repressor TGIF, leading to TGIF stabilization and

formation of a Smad-TGIF complex (453). TGIF has been shown to bind to Smad3 and recruit general transcription co-repressors, including HDAC (454), to the promoter region, effectively inhibiting Smad3 activation. Moreover, the linker region of Smad3 contains multiple serine and threonine consensus sites for ERK MAP kinases and extensive phosphorylation of these sites decrease Smad3 signaling activity (455). In contrast, ER phosphorylation by MAPK increases its transcriptional activity in both a ligand-dependent and ligand-independent manner (75). Thus, the MAPK signaling pathway may serve as a mediator for ER inhibition of TGF $\beta$  signaling.

Given the results obtained from this thesis, we strongly believe that ER modulates Smad3 transcriptional activity indirectly through yet another signal transduction pathway. Recent evidence strongly implicates the p38 MAPK pathway in tamoxifen and ICI 182,780 induced cell growth arrest in MCF-7 cells (429). Using the p3TP-lux reporter plasmid in MCF-7 cells, Buck et al. (429) demonstrated that antiestrogen activation of p3TP-lux is mediated by p38 MAPK. It was further shown that p38 MAPK is required for antiestrogen induction of TGF $\beta_2$  and T $\beta$ RII expression and subsequently, activation of Smad3 dependent TGF $\beta$  transcriptional activity (429). These observations certainly help to explain our results in MCF-7 cells but still do not help to explain our results in Cos1 cells where antiestrogens inhibited p3TP-lux activity. It would be interesting to determine if MAPKs mediate the ER modulation of Smad3 transcriptional activity in Cos1 cells. To date, four different MAPKs have been described: the ERKs, c-Jun N-terminal kinases (JNKs), p38 MAPKs and ERK5. By using specific activators and/or inhibitors for each MAPK, it would be possible to determine the putative role, if any, of these MAPKs in the ER modulation of Smad3 transcriptional activity.

The p3TP-lux reporter is an artificial construct designed empirically for maximum TGF $\beta$  responsiveness. Although it has been used to aid in the understanding of the TGF $\beta$  signaling pathway, the question still remains as to whether ER modulates TGF $\beta$ /Smad transcriptional activity on endogenous or native promoter sequences. In our study, we examined several endogenous promoters that are known to be activated by TGF $\beta$ ; in particular, we focused on the type VII collagen promoter. Type VII collagen expression is up-regulated by TGF $\beta$  via rapid and transient binding of a Smad3 containing complex to the promoter region (413). The collagen VII promoter consists of a bipartite binding site for Smad3/Smad4 surrounding a putative Ap-1 site. Fibroblasts over-expressing either Smad3 or Jun proteins show an increase in collagen VII expression mediated at the level of gene transcription (397). However, when Smad3 and Jun are co-expressed, Jun inhibits the Smad3 induced increase in promoter activity. This is thought to be mediated via Smad3 and Jun forming direct off DNA protein interactions with one another (397). Therefore, while the collagen VII promoter contains elements similar to that found on p3TP-lux, the configuration of the TGF $\beta$  responsive elements and Ap-1 sites is reversed and TGF $\beta$  and Ap-1 regulate the promoter in a different manner. Results from this thesis demonstrate that activation of ER up-regulates transcription from this promoter primarily through the Ap-1 site, relieving the inhibitory effect of c-Jun on collagen VII transcription. This provides further evidence to suggest that the ER, by modulating Ap-1 sites in TGF $\beta$  responsive genes, is able to alter Smad3 transcriptional activity in target genes. Examples of other endogenous genes that are repressed by E<sub>2</sub> via Ap-1 sites include the human hepatic lipase (456), murine lipoprotein lipase (457), ovine FSH $\beta$

(458), human choline acetyltransferase (459) and gonadotropin releasing hormone receptor (276) genes.

In order for the interaction between Ap-1, TGF $\beta$  and ER to occur, all three of these signaling pathways and the corresponding downstream signaling proteins must be co-expressed within breast tissue. Immunohistochemical analysis of nuclear Smad3 and phosphorylated c-Jun of breast tumor tissue microarrays demonstrate that a significant correlation between nuclear Smad3 and phosphorylated c-Jun occurs in ER $^+$  tumors (as determined by ligand binding assays), providing *in vivo* evidence that these proteins are co-expressed within the same tissue.

Few studies have examined the expression of Smad3 in breast tumor tissue. In one small study, nuclear Smad3 correlated with ER $^+$  and PR $^+$  status (438). In a larger study of 456 breast tumors, neither phosphorylated Smad2 nor Smad4 expression was associated with hormone receptor status (342). However, nuclear Smad3 expression has been associated with small, low grade tumors (438) and loss of phosphorylated Smad2 expression is associated with a decrease in overall patient survival (342). In addition, the majority (90%) of breast tumors were positive for phosphorylated Smad2 (342), suggesting that not only is the TGF $\beta$  signaling pathway active in breast carcinomas but also that tumor cells proliferate in the presence of activated TGF $\beta$ . However, expression levels of nuclear Smad3 decrease with increasing grade (438) and accordingly, a correlation between the loss of the T $\beta$ R-II receptor and high tumor grade in breast cancer has been shown (341). Our immunohistochemical results also demonstrate that nuclear Smad3 expression is associated with negative node status, and while not significant, there was a trend toward Smad3 expression being associated with smaller tumors. Taken

together, these results suggest that TGF $\beta$  may represent a good prognostic biomarker. As a positive ER status is also associated with good prognosis, it is reasonable to hypothesize that Smad3 expression is associated with ER $^+$  tumors.

While our results confirm an *in vivo* relationship between Smad3 and ER, we cannot address the relationship of ER transcriptional activity and its effects on Smad3 activity *in vivo*. However, using dual immunofluorescence, Ewan et al. (460) were able to not only co-localize ER $\alpha$  with nuclear R-Smad and active TGF $\beta_1$  in the normal mouse mammary gland, but also demonstrated that depletion of TGF $\beta_1$  results in a significant increase in proliferation of ER $\alpha$  positive cells, suggesting that either TGF $\beta$  restrains ER $\alpha$  transcriptional activity or that ER $\alpha$  diminishes the cellular response to TGF $\beta$ . Estrogens influence cellular proliferation by positively modulating the transcriptional activation of cyclins, the regulatory phosphorylation of cyclin-dependent kinases and by inducing *c-myc* (461). TGF $\beta$ , on the other hand, causes cell-cycle arrest late in G1 by inhibiting cyclin-dependent kinase activity and by repressing *c-myc* expression (462). While Ap-1 factors have been implicated in the regulation of cyclin D1 expression by estrogen (277), there is no evidence suggesting that they modulate *c-myc* expression. ER induces *c-myc* via an ERE (463) while TGF $\beta$  reduces *c-myc* expression through co-operative binding with cofactors to a SBE (464). It would be interesting to examine whether the *c-myc* or cyclin D1 promoter response to ER or TGF $\beta$  is altered by simultaneous TGF $\beta$  or ER activation, respectively.

Only a small number of studies have examined the expression of c-Jun in breast tissues. Gee et al.(465), using a phosphorylated c-Jun specific antibody, did not observe any relationship between activated c-Jun expression and either ER or PR status, results

consistent with those described by others (466-468). Similar results were also obtained for c-Fos (468). In addition, no relationship between c-Fos or phosphorylated c-Jun expression with tumor grade, proliferation, response to endocrine therapy or overall survival has been observed (465, 466, 468); although a trend towards shorter mean survival times for patients expressing high levels of c-Jun has been described (465). Nonetheless, total c-Jun protein levels appear to increase during breast tumorigenesis (466) and a large portion of this c-Jun is in an active state (465).

None of the studies described above addressed the relationship between Ap-1 and TGF $\beta$  signaling. Interestingly, however, it has been suggested that high levels of activated c-Jun are associated with distant metastasis to the bone (465), a common site of metastatic foci of breast cancer. Several lines of evidence also suggest that TGF $\beta$  acts as a pro-metastatic agent in the late stages of cancer progression; treatment of breast cancer cells in culture with TGF $\beta$  increases cellular invasive potential (469) and may even direct metastatic cells to the bone (470, 471). While the role of Smad3 in the migratory response to TGF $\beta$  in breast cancer cells is unclear, Smad4 appears to be required for bone metastasis by breast cancer cells in mice (472), clearly indicating an involvement of Smad activation in TGF $\beta$  induced migration. Thus, TGF $\beta$  action changes during breast cancer progression; during the early stages of breast tumorigenesis, TGF $\beta$  effectively inhibits breast tumor cell growth while in the late stages of breast carcinogenesis, TGF $\beta$  function becomes pro-metastatic. Moreover, ER $\alpha$  expression has been shown to increase dramatically during breast tumorigenesis but tends to decrease during breast cancer metastasis. Thus, if the effect of ER on TGF $\beta$  is relieved during metastasis, this would allow for TGF $\beta$  to take over in co-operation with Ap-1 factors. Taken together, these

studies suggest that while an interaction between Ap-1, TGF $\beta$  and ER may not play a key role in breast tumorigenesis, the interplay between these proteins may be important during breast tumor progression and metastasis.

Future therapeutic approaches in the treatment and prevention of breast cancer will be based on the precise molecular profile of an individual patient. The more we understand about the signaling mechanisms of the ER and its interactions with other signaling pathways, the better the selection of the most appropriate hormonal intervention. Perhaps by targeting several pathways at once, there will be less chance of recurrence and metastasis to distant organs, resulting in better overall survival rates for this disease.

## REFERENCES

1. Canadian Cancer Society Statistics. <http://www.cancer.ca>, Vol. 2006: National Cancer Institute of Canada, 2006.
2. Adem, C., Reynolds, C., Ingle, J. N., and Nascimento, A. G. Primary breast sarcoma: clinicopathologic series from the Mayo Clinic and review of the literature. *Br J Cancer*, *91*: 237-241, 2004.
3. Surveillance, Epidemiology, and End Results (SEER) Program ([www.seer.cancer.gov](http://www.seer.cancer.gov)) SEER\*Stat Database: Incidence - SEER 17 Regs Public-Use, Nove 2005 Sub (1973-2003 varying), National Cancer Institute, DCCPS, Surveillance Research Program, Cancer Statistics Branch, released April 2006, based on the November 2005 submission.
4. Gennari, A., Conte, P., Rosso, R., Orlandini, C., and Bruzzi, P. Survival of metastatic breast carcinoma patients over a 20-year period: a retrospective analysis based on individual patient data from six consecutive studies. *Cancer*, *104*: 1742-1750, 2005.
5. Greenberg, P. A., Hortobagyi, G. N., Smith, T. L., Ziegler, L. D., Frye, D. K., and Buzdar, A. U. Long-term follow-up of patients with complete remission following combination chemotherapy for metastatic breast cancer. *J Clin Oncol*, *14*: 2197-2205, 1996.
6. Clemons, M. and Goss, P. Estrogen and the risk of breast cancer. *N Engl J Med*, *344*: 276-285, 2001.
7. Marcus, J. N., Watson, P., Page, D. L., and Lynch, H. T. Pathology and heredity of breast cancer in younger women. *J Natl Cancer Inst Monogr* *23-34*, 1994.
8. Miki, Y., Swensen, J., Shattuck-Eidens, D., Futreal, P. A., Harshman, K., Tavtigian, S., Liu, Q., Cochran, C., Bennett, L. M., and Ding, W. A strong candidate for the breast and ovarian cancer susceptibility gene BRCA1. *Science*, *266*: 66-71, 1994.
9. Wooster, R., Bignell, G., Lancaster, J., Swift, S., Seal, S., Mangion, J., Collins, N., Gregory, S., Gumbus, C., and Micklem, G. Identification of the breast cancer susceptibility gene BRCA2. *Nature*, *378*: 789-792, 1995.
10. Tutt, A. and Ashworth, A. The relationship between the roles of BRCA genes in DNA repair and cancer predisposition. *Trends Mol Med*, *8*: 571-576, 2002.
11. Welcsh, P. L., Owens, K. N., and King, M. C. Insights into the functions of BRCA1 and BRCA2. *Trends Genet*, *16*: 69-74, 2000.
12. Kelsey, J. L., Gammon, M. D., and John, E. M. Reproductive factors and breast cancer. *Epidemiol Rev*, *15*: 36-47, 1993.
13. Huang, Z., Hankinson, S. E., Colditz, G. A., Stampfer, M. J., Hunter, D. J., Manson, J. E., Hennekens, C. H., Rosner, B., Speizer, F. E., and Willett, W. C. Dual effects of weight and weight gain on breast cancer risk. *Jama*, *278*: 1407-1411, 1997.
14. Magnusson, C., Baron, J., Persson, I., Wolk, A., Bergstrom, R., Trichopoulos, D., and Adami, H. O. Body size in different periods of life and breast cancer risk in post-menopausal women. *Int J Cancer*, *76*: 29-34, 1998.
15. Dumeaux, V., Alsaker, E., and Lund, E. Breast cancer and specific types of oral contraceptives: a large Norwegian cohort study. *Int J Cancer*, *105*: 844-850, 2003.

16. Kumle, M., Weiderpass, E., Braaten, T., Persson, I., Adami, H. O., and Lund, E. Use of oral contraceptives and breast cancer risk: The Norwegian-Swedish Women's Lifestyle and Health Cohort Study. *Cancer Epidemiol Biomarkers Prev*, *11*: 1375-1381, 2002.
17. Althuis, M. D., Brogan, D. R., Coates, R. J., Daling, J. R., Gammon, M. D., Malone, K. E., Schoenberg, J. B., and Brinton, L. A. Hormonal content and potency of oral contraceptives and breast cancer risk among young women. *Br J Cancer*, *88*: 50-57, 2003.
18. Diamanti-Kandarakis, E. Hormone replacement therapy and risk of malignancy. *Curr Opin Obstet Gynecol*, *16*: 73-78, 2004.
19. Colditz, G. A. Relationship between estrogen levels, use of hormone replacement therapy, and breast cancer. *J Natl Cancer Inst*, *90*: 814-823, 1998.
20. Talamini, R., Franceschi, S., La Vecchia, C., Negri, E., Borsa, L., Montella, M., Falcini, F., Conti, E., and Rossi, C. The role of reproductive and menstrual factors in cancer of the breast before and after menopause. *Eur J Cancer*, *32A*: 303-310, 1996.
21. Bernstein, L., Henderson, B. E., Hanisch, R., Sullivan-Halley, J., and Ross, R. K. Physical exercise and reduced risk of breast cancer in young women. *J Natl Cancer Inst*, *86*: 1403-1408, 1994.
22. John, E. M., Horn-Ross, P. L., and Koo, J. Lifetime physical activity and breast cancer risk in a multiethnic population: the San Francisco Bay area breast cancer study. *Cancer Epidemiol Biomarkers Prev*, *12*: 1143-1152, 2003.
23. Patel, A. V., Calle, E. E., Bernstein, L., Wu, A. H., and Thun, M. J. Recreational physical activity and risk of postmenopausal breast cancer in a large cohort of US women. *Cancer Causes Control*, *14*: 519-529, 2003.
24. Petri, A. L., Tjønneland, A., Gamborg, M., Johansen, D., Hoidrup, S., Sorensen, T. I., and Gronbaek, M. Alcohol intake, type of beverage, and risk of breast cancer in pre- and postmenopausal women. *Alcohol Clin Exp Res*, *28*: 1084-1090, 2004.
25. Howe, G. R., Hirohata, T., Hislop, T. G., Iscovich, J. M., Yuan, J. M., Katsouyanni, K., Lubin, J., Marubini, E., Modan, B., and Rohan, T. Dietary factors and risk of breast cancer: combined analysis of 12 case-control studies. *J Natl Cancer Inst*, *82*: 561-569, 1990.
26. Hunter, D. J., Spiegelman, D., Adami, H. O., Beeson, L., van den Brandt, P. A., Folsom, A. R., Fraser, G. E., Goldbohm, R. A., Graham, S., and Howe, G. R. Cohort studies of fat intake and the risk of breast cancer--a pooled analysis. *N Engl J Med*, *334*: 356-361, 1996.
27. Chu, S. Y., Lee, N. C., Wingo, P. A., and Webster, L. A. Alcohol consumption and the risk of breast cancer. *Am J Epidemiol*, *130*: 867-877, 1989.
28. Gruber, C. J., Tschugguel, W., Schneeberger, C., and Huber, J. C. Production and actions of estrogens. *N Engl J Med*, *346*: 340-352, 2002.
29. McGuire, W. L. Hormone receptors: their role in predicting prognosis and response to endocrine therapy. *Semin Oncol*, *5*: 428-433, 1978.
30. Knight, W. A., 3rd, Osborne, C. K., Yochmowitz, M. G., and McGuire, W. L. Steroid hormone receptors in the management of human breast cancer. *Ann Clin Res*, *12*: 202-207, 1980.

31. Tamoxifen for early breast cancer: an overview of the randomised trials. Early Breast Cancer Trialists' Collaborative Group. *Lancet*, **351**: 1451-1467, 1998.
32. Steinkampf, M. P., Mendelson, C. R., and Simpson, E. R. Regulation by follicle-stimulating hormone of the synthesis of aromatase cytochrome P-450 in human granulosa cells. *Mol Endocrinol*, **1**: 465-471, 1987.
33. Systemic treatment of early breast cancer by hormonal, cytotoxic, or immune therapy. 133 randomised trials involving 31,000 recurrences and 24,000 deaths among 75,000 women. Early Breast Cancer Trialists' Collaborative Group. *Lancet*, **339**: 1-15, 1992.
34. Tamoxifen for early breast cancer. Cochrane Database Syst Rev CD000486, 2001.
35. Fisher, B., Costantino, J. P., Wickerham, D. L., Redmond, C. K., Kavanah, M., Cronin, W. M., Vogel, V., Robidoux, A., Dimitrov, N., Atkins, J., Daly, M., Wieand, S., Tan-Chiu, E., Ford, L., and Wolmark, N. Tamoxifen for prevention of breast cancer: report of the National Surgical Adjuvant Breast and Bowel Project P-1 Study. *J Natl Cancer Inst*, **90**: 1371-1388, 1998.
36. MacGregor, J. I. and Jordan, V. C. Basic guide to the mechanisms of antiestrogen action. *Pharmacol Rev*, **50**: 151-196, 1998.
37. Osborne, C. K., Zhao, H., and Fuqua, S. A. Selective estrogen receptor modulators: structure, function, and clinical use. *J Clin Oncol*, **18**: 3172-3186, 2000.
38. Satyaswaroop, P. G., Zaino, R. J., and Mortel, R. Estrogen-like effects of tamoxifen on human endometrial carcinoma transplanted into nude mice. *Cancer Res*, **44**: 4006-4010, 1984.
39. Love, R. R., Mazess, R. B., Barden, H. S., Epstein, S., Newcomb, P. A., Jordan, V. C., Carbone, P. P., and DeMets, D. L. Effects of tamoxifen on bone mineral density in postmenopausal women with breast cancer. *N Engl J Med*, **326**: 852-856, 1992.
40. Love, R. R., Wiebe, D. A., Feyzi, J. M., Newcomb, P. A., and Chappell, R. J. Effects of tamoxifen on cardiovascular risk factors in postmenopausal women after 5 years of treatment. *J Natl Cancer Inst*, **86**: 1534-1539, 1994.
41. Dhandapani, K. M. and Brann, D. W. Protective effects of estrogen and selective estrogen receptor modulators in the brain. *Biol Reprod*, **67**: 1379-1385, 2002.
42. Ettinger, B., Black, D. M., Mitlak, B. H., Knickerbocker, R. K., Nickelsen, T., Genant, H. K., Christiansen, C., Delmas, P. D., Zanchetta, J. R., Stakkedstad, J., Gluer, C. C., Krueger, K., Cohen, F. J., Eckert, S., Ensrud, K. E., Avioli, L. V., Lips, P., and Cummings, S. R. Reduction of vertebral fracture risk in postmenopausal women with osteoporosis treated with raloxifene: results from a 3-year randomized clinical trial. Multiple Outcomes of Raloxifene Evaluation (MORE) Investigators. *Jama*, **282**: 637-645, 1999.
43. Delmas, P. D., Bjarnason, N. H., Mitlak, B. H., Ravoux, A. C., Shah, A. S., Huster, W. J., Draper, M., and Christiansen, C. Effects of raloxifene on bone mineral density, serum cholesterol concentrations, and uterine endometrium in postmenopausal women. *N Engl J Med*, **337**: 1641-1647, 1997.
44. Cauley, J. A., Norton, L., Lippman, M. E., Eckert, S., Krueger, K. A., Purdie, D. W., Farrerons, J., Karasik, A., Mellstrom, D., Ng, K. W., Stepan, J. J., Powles, T.

- J., Morrow, M., Costa, A., Silfen, S. L., Walls, E. L., Schmitt, H., Muchmore, D. B., Jordan, V. C., and Ste-Marie, L. G. Continued breast cancer risk reduction in postmenopausal women treated with raloxifene: 4-year results from the MORE trial. Multiple outcomes of raloxifene evaluation. *Breast Cancer Res Treat*, 65: 125-134, 2001.
45. Fuller, P. J. The steroid receptor superfamily: mechanisms of diversity. *Faseb J*, 5: 3092-3099, 1991.
46. Picard, D., Kumar, V., Chambon, P., and Yamamoto, K. R. Signal transduction by steroid hormones: nuclear localization is differentially regulated in estrogen and glucocorticoid receptors. *Cell Regul*, 1: 291-299, 1990.
47. Enmark, E., Pelto-Huikko, M., Grandien, K., Lagercrantz, S., Lagercrantz, J., Fried, G., Nordenskjold, M., and Gustafsson, J. A. Human estrogen receptor beta-gene structure, chromosomal localization, and expression pattern. *J Clin Endocrinol Metab*, 82: 4258-4265, 1997.
48. Taylor, A. H. and Al-Azzawi, F. Immunolocalisation of oestrogen receptor beta in human tissues. *J Mol Endocrinol*, 24: 145-155, 2000.
49. Mosselman, S., Polman, J., and Dijkema, R. ER beta: identification and characterization of a novel human estrogen receptor. *FEBS Lett*, 392: 49-53, 1996.
50. Kruijver, F. P., Balesar, R., Espila, A. M., Unmehopa, U. A., and Swaab, D. F. Estrogen-receptor-beta distribution in the human hypothalamus: similarities and differences with ER alpha distribution. *J Comp Neurol*, 466: 251-277, 2003.
51. Skliris, G. P., Munot, K., Bell, S. M., Carder, P. J., Lane, S., Horgan, K., Lansdown, M. R., Parkes, A. T., Hanby, A. M., Markham, A. F., and Speirs, V. Reduced expression of oestrogen receptor beta in invasive breast cancer and its re-expression using DNA methyl transferase inhibitors in a cell line model. *J Pathol*, 201: 213-220, 2003.
52. Roger, P., Sahla, M. E., Makela, S., Gustafsson, J. A., Baldet, P., and Rochefort, H. Decreased expression of estrogen receptor beta protein in proliferative preinvasive mammary tumors. *Cancer Res*, 61: 2537-2541, 2001.
53. Schomberg, D. W., Couse, J. F., Mukherjee, A., Lubahn, D. B., Sar, M., Mayo, K. E., and Korach, K. S. Targeted disruption of the estrogen receptor-alpha gene in female mice: characterization of ovarian responses and phenotype in the adult. *Endocrinology*, 140: 2733-2744, 1999.
54. Murphy, L. C., Leygue, E., Niu, Y., Snell, L., Ho, S. M., and Watson, P. H. Relationship of coregulator and oestrogen receptor isoform expression to de novo tamoxifen resistance in human breast cancer. *Br J Cancer*, 87: 1411-1416, 2002.
55. Couse, J. F. and Korach, K. S. Estrogen receptor null mice: what have we learned and where will they lead us? *Endocr Rev*, 20: 358-417, 1999.
56. Krege, J. H., Hodgin, J. B., Couse, J. F., Enmark, E., Warner, M., Mahler, J. F., Sar, M., Korach, K. S., Gustafsson, J. A., and Smithies, O. Generation and reproductive phenotypes of mice lacking estrogen receptor beta. *Proc Natl Acad Sci U S A*, 95: 15677-15682, 1998.
57. Dupont, S., Krust, A., Gansmuller, A., Dierich, A., Chambon, P., and Mark, M. Effect of single and compound knockouts of estrogen receptors alpha (ERalpha)

- and beta (ERbeta) on mouse reproductive phenotypes. *Development*, *127*: 4277-4291, 2000.
58. Couse, J. F., Hewitt, S. C., Bunch, D. O., Sar, M., Walker, V. R., Davis, B. J., and Korach, K. S. Postnatal sex reversal of the ovaries in mice lacking estrogen receptors alpha and beta. *Science*, *286*: 2328-2331, 1999.
  59. Menasce, L. P., White, G. R., Harrison, C. J., and Boyle, J. M. Localization of the estrogen receptor locus (ESR) to chromosome 6q25.1 by FISH and a simple post-FISH banding technique. *Genomics*, *17*: 263-265, 1993.
  60. Ponglikitmongkol, M., Green, S., and Chambon, P. Genomic organization of the human oestrogen receptor gene. *Embo J*, *7*: 3385-3388, 1988.
  61. Walter, P., Green, S., Greene, G., Krust, A., Bornert, J. M., Jeltsch, J. M., Staub, A., Jensen, E., Scrace, G., Waterfield, M., and et al. Cloning of the human estrogen receptor cDNA. *Proc Natl Acad Sci U S A*, *82*: 7889-7893, 1985.
  62. Green, S., Walter, P., Kumar, V., Krust, A., Bornert, J. M., Argos, P., and Chambon, P. Human oestrogen receptor cDNA: sequence, expression and homology to v-erb-A. *Nature*, *320*: 134-139, 1986.
  63. Kos, M., Reid, G., Denger, S., and Gannon, F. Minireview: genomic organization of the human ERalpha gene promoter region. *Mol Endocrinol*, *15*: 2057-2063, 2001.
  64. Grandien, K., Backdahl, M., Ljunggren, O., Gustafsson, J. A., and Berkenstam, A. Estrogen target tissue determines alternative promoter utilization of the human estrogen receptor gene in osteoblasts and tumor cell lines. *Endocrinology*, *136*: 2223-2229, 1995.
  65. Flouriot, G., Brand, H., Denger, S., Metivier, R., Kos, M., Reid, G., Sonntag-Buck, V., and Gannon, F. Identification of a new isoform of the human estrogen receptor-alpha (hER-alpha) that is encoded by distinct transcripts and that is able to repress hER-alpha activation function 1. *Embo J*, *19*: 4688-4700, 2000.
  66. Murphy, L. C., Dotzlaw, H., Leygue, E., Douglas, D., Coutts, A., and Watson, P. H. Estrogen receptor variants and mutations. *J Steroid Biochem Mol Biol*, *62*: 363-372, 1997.
  67. Kuiper, G. G., Enmark, E., Pelto-Huikko, M., Nilsson, S., and Gustafsson, J. A. Cloning of a novel receptor expressed in rat prostate and ovary. *Proc Natl Acad Sci U S A*, *93*: 5925-5930, 1996.
  68. Ogawa, S., Inoue, S., Watanabe, T., Hiroi, H., Orimo, A., Hosoi, T., Ouchi, Y., and Muramatsu, M. The complete primary structure of human estrogen receptor beta (hER beta) and its heterodimerization with ER alpha in vivo and in vitro. *Biochem Biophys Res Commun*, *243*: 122-126, 1998.
  69. Moore, J. T., McKee, D. D., Slentz-Kesler, K., Moore, L. B., Jones, S. A., Horne, E. L., Su, J. L., Kliewer, S. A., Lehmann, J. M., and Willson, T. M. Cloning and characterization of human estrogen receptor beta isoforms. *Biochem Biophys Res Commun*, *247*: 75-78, 1998.
  70. Ogawa, S., Inoue, S., Watanabe, T., Orimo, A., Hosoi, T., Ouchi, Y., and Muramatsu, M. Molecular cloning and characterization of human estrogen receptor betacx: a potential inhibitor of estrogen action in human. *Nucleic Acids Res*, *26*: 3505-3512, 1998.

71. Petersen, D. N., Tkalcevic, G. T., Koza-Taylor, P. H., Turi, T. G., and Brown, T. A. Identification of estrogen receptor beta2, a functional variant of estrogen receptor beta expressed in normal rat tissues. *Endocrinology*, *139*: 1082-1092, 1998.
72. Lu, B., Leygue, E., Dotzlaw, H., Murphy, L. J., Murphy, L. C., and Watson, P. H. Estrogen receptor-beta mRNA variants in human and murine tissues. *Mol Cell Endocrinol*, *138*: 199-203, 1998.
73. Poola, I., Abraham, J., Baldwin, K., Saunders, A., and Bhatnagar, R. Estrogen receptors beta4 and beta5 are full length functionally distinct ERbeta isoforms: cloning from human ovary and functional characterization. *Endocrine*, *27*: 227-238, 2005.
74. Vladusic, E. A., Hornby, A. E., Guerra-Vladusic, F. K., and Lupu, R. Expression of estrogen receptor beta messenger RNA variant in breast cancer. *Cancer Res*, *58*: 210-214, 1998.
75. Kato, S., Endoh, H., Masuhiro, Y., Kitamoto, T., Uchiyama, S., Sasaki, H., Masushige, S., Gotoh, Y., Nishida, E., Kawashima, H., and et al. Activation of the estrogen receptor through phosphorylation by mitogen-activated protein kinase. *Science*, *270*: 1491-1494, 1995.
76. Bunone, G., Briand, P. A., Miksicek, R. J., and Picard, D. Activation of the unliganded estrogen receptor by EGF involves the MAP kinase pathway and direct phosphorylation. *Embo J*, *15*: 2174-2183, 1996.
77. Tora, L., White, J., Brou, C., Tasset, D., Webster, N., Scheer, E., and Chambon, P. The human estrogen receptor has two independent nonacidic transcriptional activation functions. *Cell*, *59*: 477-487, 1989.
78. McInerney, E. M., Tsai, M. J., O'Malley, B. W., and Katzenellenbogen, B. S. Analysis of estrogen receptor transcriptional enhancement by a nuclear hormone receptor coactivator. *Proc Natl Acad Sci U S A*, *93*: 10069-10073, 1996.
79. Glaros, S., Atanaskova, N., Zhao, C., Skafar, D. F., and Reddy, K. B. Activation Function -1 domain of estrogen receptor regulates the agonistic and antagonistic actions of Tamoxifen. *Mol Endocrinol*, *2006*.
80. Webb, P., Nguyen, P., Shinsako, J., Anderson, C., Feng, W., Nguyen, M. P., Chen, D., Huang, S. M., Subramanian, S., McKinney, E., Katzenellenbogen, B. S., Stallcup, M. R., and Kushner, P. J. Estrogen receptor activation function 1 works by binding p160 coactivator proteins. *Mol Endocrinol*, *12*: 1605-1618, 1998.
81. Kobayashi, Y., Kitamoto, T., Masuhiro, Y., Watanabe, M., Kase, T., Metzger, D., Yanagisawa, J., and Kato, S. p300 mediates functional synergism between AF-1 and AF-2 of estrogen receptor alpha and beta by interacting directly with the N-terminal A/B domains. *J Biol Chem*, *275*: 15645-15651, 2000.
82. Hall, J. M. and McDonnell, D. P. The estrogen receptor beta-isoform (ERbeta) of the human estrogen receptor modulates ERalpha transcriptional activity and is a key regulator of the cellular response to estrogens and antiestrogens. *Endocrinology*, *140*: 5566-5578, 1999.
83. Delaunay, F., Pettersson, K., Tujague, M., and Gustafsson, J. A. Functional differences between the amino-terminal domains of estrogen receptors alpha and beta. *Mol Pharmacol*, *58*: 584-590, 2000.

84. Cowley, S. M. and Parker, M. G. A comparison of transcriptional activation by ER alpha and ER beta. *J Steroid Biochem Mol Biol*, **69**: 165-175, 1999.
85. Kumar, V., Green, S., Stack, G., Berry, M., Jin, J. R., and Chambon, P. Functional domains of the human estrogen receptor. *Cell*, **51**: 941-951, 1987.
86. Schwabe, J. W., Neuhaus, D., and Rhodes, D. Solution structure of the DNA-binding domain of the oestrogen receptor. *Nature*, **348**: 458-461, 1990.
87. Schwabe, J. W., Chapman, L., Finch, J. T., and Rhodes, D. The crystal structure of the estrogen receptor DNA-binding domain bound to DNA: how receptors discriminate between their response elements. *Cell*, **75**: 567-578, 1993.
88. Klinge, C. M. Estrogen receptor interaction with estrogen response elements. *Nucleic Acids Res*, **29**: 2905-2919, 2001.
89. Chambraud, B., Berry, M., Redeuilh, G., Chambon, P., and Baulieu, E. E. Several regions of human estrogen receptor are involved in the formation of receptor-heat shock protein 90 complexes. *J Biol Chem*, **265**: 20686-20691, 1990.
90. Brzozowski, A. M., Pike, A. C., Dauter, Z., Hubbard, R. E., Bonn, T., Engstrom, O., Ohman, L., Greene, G. L., Gustafsson, J. A., and Carlquist, M. Molecular basis of agonism and antagonism in the oestrogen receptor. *Nature*, **389**: 753-758, 1997.
91. Sabbah, M., Redeuilh, G., and Baulieu, E. E. Subunit composition of the estrogen receptor. Involvement of the hormone-binding domain in the dimeric state. *J Biol Chem*, **264**: 2397-2400, 1989.
92. Kuiper, G. G., Carlsson, B., Grandien, K., Enmark, E., Hagglad, J., Nilsson, S., and Gustafsson, J. A. Comparison of the ligand binding specificity and transcript tissue distribution of estrogen receptors alpha and beta. *Endocrinology*, **138**: 863-870, 1997.
93. Barkhem, T., Carlsson, B., Nilsson, Y., Enmark, E., Gustafsson, J., and Nilsson, S. Differential response of estrogen receptor alpha and estrogen receptor beta to partial estrogen agonists/antagonists. *Mol Pharmacol*, **54**: 105-112, 1998.
94. Peters, G. A. and Khan, S. A. Estrogen receptor domains E and F: role in dimerization and interaction with coactivator RIP-140. *Mol Endocrinol*, **13**: 286-296, 1999.
95. Skafar, D. F. and Koide, S. Understanding the human estrogen receptor-alpha using targeted mutagenesis. *Mol Cell Endocrinol*, **246**: 83-90, 2006.
96. Weatherman, R. V. and Scanlan, T. S. Unique protein determinants of the subtype-selective ligand responses of the estrogen receptors (ERalpha and ERbeta) at AP-1 sites. *J Biol Chem*, **276**: 3827-3832, 2001.
97. Montano, M. M., Muller, V., Trobaugh, A., and Katzenellenbogen, B. S. The carboxy-terminal F domain of the human estrogen receptor: role in the transcriptional activity of the receptor and the effectiveness of antiestrogens as estrogen antagonists. *Mol Endocrinol*, **9**: 814-825, 1995.
98. Schwartz, J. A., Zhong, L., Deighton-Collins, S., Zhao, C., and Skafar, D. F. Mutations targeted to a predicted helix in the extreme carboxyl-terminal region of the human estrogen receptor-alpha alter its response to estradiol and 4-hydroxytamoxifen. *J Biol Chem*, **277**: 13202-13209, 2002.

99. Welshons, W. V., Krummel, B. M., and Gorski, J. Nuclear localization of unoccupied receptors for glucocorticoids, estrogens, and progesterone in GH3 cells. *Endocrinology*, *117*: 2140-2147, 1985.
100. King, W. J. and Greene, G. L. Monoclonal antibodies localize oestrogen receptor in the nuclei of target cells. *Nature*, *307*: 745-747, 1984.
101. Htun, H., Holth, L. T., Walker, D., Davie, J. R., and Hager, G. L. Direct visualization of the human estrogen receptor alpha reveals a role for ligand in the nuclear distribution of the receptor. *Mol Biol Cell*, *10*: 471-486, 1999.
102. Dauvois, S., White, R., and Parker, M. G. The antiestrogen ICI 182780 disrupts estrogen receptor nucleocytoplasmic shuttling. *J Cell Sci*, *106* (*Pt 4*): 1377-1388, 1993.
103. Razandi, M., Pedram, A., Merchenthaler, I., Greene, G. L., and Levin, E. R. Plasma membrane estrogen receptors exist and functions as dimers. *Mol Endocrinol*, *18*: 2854-2865, 2004.
104. Watson, C. S., Campbell, C. H., and Gametchu, B. The dynamic and elusive membrane estrogen receptor-alpha. *Steroids*, *67*: 429-437, 2002.
105. Stenoien, D. L., Mancini, M. G., Patel, K., Allegretto, E. A., Smith, C. L., and Mancini, M. A. Subnuclear trafficking of estrogen receptor-alpha and steroid receptor coactivator-1. *Mol Endocrinol*, *14*: 518-534, 2000.
106. Matsuda, K., Ochiai, I., Nishi, M., and Kawata, M. Colocalization and ligand-dependent discrete distribution of the estrogen receptor (ER)alpha and ERbeta. *Mol Endocrinol*, *16*: 2215-2230, 2002.
107. Pratt, W. B. and Toft, D. O. Steroid receptor interactions with heat shock protein and immunophilin chaperones. *Endocr Rev*, *18*: 306-360, 1997.
108. Segnitz, B. and Gehring, U. Subunit structure of the nonactivated human estrogen receptor. *Proc Natl Acad Sci U S A*, *92*: 2179-2183, 1995.
109. Welch, W. J. and Feramisco, J. R. Nuclear and nucleolar localization of the 72,000-dalton heat shock protein in heat-shocked mammalian cells. *J Biol Chem*, *259*: 4501-4513, 1984.
110. Landel, C. C., Kushner, P. J., and Greene, G. L. The interaction of human estrogen receptor with DNA is modulated by receptor-associated proteins. *Mol Endocrinol*, *8*: 1407-1419, 1994.
111. Segnitz, B. and Gehring, U. The function of steroid hormone receptors is inhibited by the hsp90-specific compound geldanamycin. *J Biol Chem*, *272*: 18694-18701, 1997.
112. Lee, M. O., Kim, E. O., Kwon, H. J., Kim, Y. M., Kang, H. J., Kang, H., and Lee, J. E. Radicicol represses the transcriptional function of the estrogen receptor by suppressing the stabilization of the receptor by heat shock protein 90. *Mol Cell Endocrinol*, *188*: 47-54, 2002.
113. Gougelet, A., Bouclier, C., Marsaud, V., Maillard, S., Mueller, S. O., Korach, K. S., and Renoir, J. M. Estrogen receptor alpha and beta subtype expression and transactivation capacity are differentially affected by receptor-, hsp90- and immunophilin-ligands in human breast cancer cells. *J Steroid Biochem Mol Biol*, *94*: 71-81, 2005.

114. Lee, H. S., Aumais, J., and White, J. H. Hormone-dependent transactivation by estrogen receptor chimeras that do not interact with hsp90. Evidence for transcriptional repressors. *J Biol Chem*, *271*: 25727-25730, 1996.
115. Beekman, J. M., Allan, G. F., Tsai, S. Y., Tsai, M. J., and O'Malley, B. W. Transcriptional activation by the estrogen receptor requires a conformational change in the ligand binding domain. *Mol Endocrinol*, *7*: 1266-1274, 1993.
116. Pettersson, K., Grandien, K., Kuiper, G. G., and Gustafsson, J. A. Mouse estrogen receptor beta forms estrogen response element-binding heterodimers with estrogen receptor alpha. *Mol Endocrinol*, *11*: 1486-1496, 1997.
117. Cowley, S. M., Hoare, S., Mosselman, S., and Parker, M. G. Estrogen receptors alpha and beta form heterodimers on DNA. *J Biol Chem*, *272*: 19858-19862, 1997.
118. Pace, P., Taylor, J., Suntharalingam, S., Coombes, R. C., and Ali, S. Human estrogen receptor beta binds DNA in a manner similar to and dimerizes with estrogen receptor alpha. *J Biol Chem*, *272*: 25832-25838, 1997.
119. Sadovsky, Y., Webb, P., Lopez, G., Baxter, J. D., Fitzpatrick, P. M., Gizang-Ginsberg, E., Cavailles, V., Parker, M. G., and Kushner, P. J. Transcriptional activators differ in their responses to overexpression of TATA-box-binding protein. *Mol Cell Biol*, *15*: 1554-1563, 1995.
120. McKenna, N. J., Lanz, R. B., and O'Malley, B. W. Nuclear receptor coregulators: cellular and molecular biology. *Endocr Rev*, *20*: 321-344, 1999.
121. Shang, Y., Hu, X., DiRenzo, J., Lazar, M. A., and Brown, M. Cofactor dynamics and sufficiency in estrogen receptor-regulated transcription. *Cell*, *103*: 843-852, 2000.
122. Klein-Hitpass, L., Ryffel, G. U., Heitlinger, E., and Cato, A. C. A 13 bp palindrome is a functional estrogen responsive element and interacts specifically with estrogen receptor. *Nucleic Acids Res*, *16*: 647-663, 1988.
123. Klinge, C. M., Peale, F. V., Jr., Hilf, R., Bambara, R. A., and Zain, S. Cooperative estrogen receptor interaction with consensus or variant estrogen responsive elements in vitro. *Cancer Res*, *52*: 1073-1081, 1992.
124. Anolik, J. H., Klinge, C. M., Hilf, R., and Bambara, R. A. Cooperative binding of estrogen receptor to DNA depends on spacing of binding sites, flanking sequence, and ligand. *Biochemistry*, *34*: 2511-2520, 1995.
125. Sathya, G., Li, W., Klinge, C. M., Anolik, J. H., Hilf, R., and Bambara, R. A. Effects of multiple estrogen responsive elements, their spacing, and location on estrogen response of reporter genes. *Mol Endocrinol*, *11*: 1994-2003, 1997.
126. Klein-Hitpass, L., Schorpp, M., Wagner, U., and Ryffel, G. U. An estrogen-responsive element derived from the 5' flanking region of the Xenopus vitellogenin A2 gene functions in transfected human cells. *Cell*, *46*: 1053-1061, 1986.
127. Bourdeau, V., Deschenes, J., Metivier, R., Nagai, Y., Nguyen, D., Bretschneider, N., Gannon, F., White, J. H., and Mader, S. Genome-wide identification of high-affinity estrogen response elements in human and mouse. *Mol Endocrinol*, *18*: 1411-1427, 2004.
128. Klinge, C. M., Jernigan, S. C., Mattingly, K. A., Risinger, K. E., and Zhang, J. Estrogen response element-dependent regulation of transcriptional activation of

- estrogen receptors alpha and beta by coactivators and corepressors. *J Mol Endocrinol*, 33: 387-410, 2004.
129. Driscoll, M. D., Sathya, G., Muyan, M., Klinge, C. M., Hilf, R., and Bambara, R. A. Sequence requirements for estrogen receptor binding to estrogen response elements. *J Biol Chem*, 273: 29321-29330, 1998.
130. Weisz, A. and Rosales, R. Identification of an estrogen response element upstream of the human c-fos gene that binds the estrogen receptor and the AP-1 transcription factor. *Nucleic Acids Res*, 18: 5097-5106, 1990.
131. Schultz, J. R., Petz, L. N., and Nardulli, A. M. Estrogen receptor alpha and Sp1 regulate progesterone receptor gene expression. *Mol Cell Endocrinol*, 201: 165-175, 2003.
132. Petz, L. N., Ziegler, Y. S., Loven, M. A., and Nardulli, A. M. Estrogen receptor alpha and activating protein-1 mediate estrogen responsiveness of the progesterone receptor gene in MCF-7 breast cancer cells. *Endocrinology*, 143: 4583-4591, 2002.
133. Lee, M. O., Liu, Y., and Zhang, X. K. A retinoic acid response element that overlaps an estrogen response element mediates multihormonal sensitivity in transcriptional activation of the lactoferrin gene. *Mol Cell Biol*, 15: 4194-4207, 1995.
134. Loven, M. A., Wood, J. R., and Nardulli, A. M. Interaction of estrogen receptors alpha and beta with estrogen response elements. *Mol Cell Endocrinol*, 181: 151-163, 2001.
135. Gruber, C. J., Gruber, D. M., Gruber, I. M., Wieser, F., and Huber, J. C. Anatomy of the estrogen response element. *Trends Endocrinol Metab*, 15: 73-78, 2004.
136. Carroll, J. S., Liu, X. S., Brodsky, A. S., Li, W., Meyer, C. A., Szary, A. J., Eeckhout, J., Shao, W., Hestermann, E. V., Geistlinger, T. R., Fox, E. A., Silver, P. A., and Brown, M. Chromosome-wide mapping of estrogen receptor binding reveals long-range regulation requiring the forkhead protein FoxA1. *Cell*, 122: 33-43, 2005.
137. Yi, P., Driscoll, M. D., Huang, J., Bhagat, S., Hilf, R., Bambara, R. A., and Muyan, M. The effects of estrogen-responsive element- and ligand-induced structural changes on the recruitment of cofactors and transcriptional responses by ER alpha and ER beta. *Mol Endocrinol*, 16: 674-693, 2002.
138. Hall, J. M., McDonnell, D. P., and Korach, K. S. Allosteric regulation of estrogen receptor structure, function, and coactivator recruitment by different estrogen response elements. *Mol Endocrinol*, 16: 469-486, 2002.
139. Peng, B., Lu, B., Leygue, E., and Murphy, L. C. Putative functional characteristics of human estrogen receptor-beta isoforms. *J Mol Endocrinol*, 30: 13-29, 2003.
140. Ramsey, T. L., Risinger, K. E., Jernigan, S. C., Mattingly, K. A., and Klinge, C. M. Estrogen receptor beta isoforms exhibit differences in ligand-activated transcriptional activity in an estrogen response element sequence-dependent manner. *Endocrinology*, 145: 149-160, 2004.
141. Pettersson, K., Delaunay, F., and Gustafsson, J. A. Estrogen receptor beta acts as a dominant regulator of estrogen signaling. *Oncogene*, 19: 4970-4978, 2000.

142. Weihua, Z., Saji, S., Makinen, S., Cheng, G., Jensen, E. V., Warner, M., and Gustafsson, J. A. Estrogen receptor (ER) beta, a modulator of ERalpha in the uterus. *Proc Natl Acad Sci U S A*, **97**: 5936-5941, 2000.
143. Loven, M. A., Likhite, V. S., Choi, I., and Nardulli, A. M. Estrogen response elements alter coactivator recruitment through allosteric modulation of estrogen receptor beta conformation. *J Biol Chem*, **276**: 45282-45288, 2001.
144. Pike, A. C., Brzozowski, A. M., Hubbard, R. E., Bonn, T., Thorsell, A. G., Engstrom, O., Ljunggren, J., Gustafsson, J. A., and Carlquist, M. Structure of the ligand-binding domain of oestrogen receptor beta in the presence of a partial agonist and a full antagonist. *Embo J*, **18**: 4608-4618, 1999.
145. Shiau, A. K., Barstad, D., Loria, P. M., Cheng, L., Kushner, P. J., Agard, D. A., and Greene, G. L. The structural basis of estrogen receptor/coactivator recognition and the antagonism of this interaction by tamoxifen. *Cell*, **95**: 927-937, 1998.
146. Pike, A. C., Brzozowski, A. M., and Hubbard, R. E. A structural biologist's view of the oestrogen receptor. *J Steroid Biochem Mol Biol*, **74**: 261-268, 2000.
147. Henttu, P. M., Kalkhoven, E., and Parker, M. G. AF-2 activity and recruitment of steroid receptor coactivator 1 to the estrogen receptor depend on a lysine residue conserved in nuclear receptors. *Mol Cell Biol*, **17**: 1832-1839, 1997.
148. Pike, A. C., Brzozowski, A. M., Walton, J., Hubbard, R. E., Thorsell, A. G., Li, Y. L., Gustafsson, J. A., and Carlquist, M. Structural insights into the mode of action of a pure antiestrogen. *Structure*, **9**: 145-153, 2001.
149. Jones, P. S., Parrott, E., and White, I. N. Activation of transcription by estrogen receptor alpha and beta is cell type- and promoter-dependent. *J Biol Chem*, **274**: 32008-32014, 1999.
150. Metzger, D., Berry, M., Ali, S., and Chambon, P. Effect of antagonists on DNA binding properties of the human estrogen receptor in vitro and in vivo. *Mol Endocrinol*, **9**: 579-591, 1995.
151. Klinge, C. M., Studinski-Jones, A. L., Kulakosky, P. C., Bambara, R. A., and Hilf, R. Comparison of tamoxifen ligands on estrogen receptor interaction with estrogen response elements. *Mol Cell Endocrinol*, **143**: 79-90, 1998.
152. Berry, M., Metzger, D., and Chambon, P. Role of the two activating domains of the oestrogen receptor in the cell-type and promoter-context dependent agonistic activity of the anti-oestrogen 4-hydroxytamoxifen. *Embo J*, **9**: 2811-2818, 1990.
153. Wolf, D. M. and Jordan, V. C. William L. McGuire Memorial Symposium. Drug resistance to tamoxifen during breast cancer therapy. *Breast Cancer Res Treat*, **27**: 27-40, 1993.
154. Fisher, B., Costantino, J. P., Redmond, C. K., Fisher, E. R., Wickerham, D. L., and Cronin, W. M. Endometrial cancer in tamoxifen-treated breast cancer patients: findings from the National Surgical Adjuvant Breast and Bowel Project (NSABP) B-14. *J Natl Cancer Inst*, **86**: 527-537, 1994.
155. Encarnacion, C. A., Ciocca, D. R., McGuire, W. L., Clark, G. M., Fuqua, S. A., and Osborne, C. K. Measurement of steroid hormone receptors in breast cancer patients on tamoxifen. *Breast Cancer Res Treat*, **26**: 237-246, 1993.
156. Howell, A. and Robertson, J. Response to a specific antioestrogen (ICI 182780) in tamoxifen-resistant breast cancer. *Lancet*, **345**: 989-990, 1995.

157. DeFriend, D. J., Howell, A., Nicholson, R. I., Anderson, E., Dowsett, M., Mansel, R. E., Blamey, R. W., Bundred, N. J., Robertson, J. F., Saunders, C., and et al. Investigation of a new pure antiestrogen (ICI 182780) in women with primary breast cancer. *Cancer Res*, 54: 408-414, 1994.
158. Howell, A., Pippen, J., Elledge, R. M., Mauriac, L., Vergote, I., Jones, S. E., Come, S. E., Osborne, C. K., and Robertson, J. F. Fulvestrant versus anastrozole for the treatment of advanced breast carcinoma: a prospectively planned combined survival analysis of two multicenter trials. *Cancer*, 104: 236-239, 2005.
159. Osborne, C. K., Pippen, J., Jones, S. E., Parker, L. M., Ellis, M., Come, S., Gertler, S. Z., May, J. T., Burton, G., Dimery, I., Webster, A., Morris, C., Elledge, R., and Buzdar, A. Double-blind, randomized trial comparing the efficacy and tolerability of fulvestrant versus anastrozole in postmenopausal women with advanced breast cancer progressing on prior endocrine therapy: results of a North American trial. *J Clin Oncol*, 20: 3386-3395, 2002.
160. Wakeling, A. E., Dukes, M., and Bowler, J. A potent specific pure antiestrogen with clinical potential. *Cancer Res*, 51: 3867-3873, 1991.
161. Osborne, C. K., Coronado-Heinsohn, E. B., Hilsenbeck, S. G., McCue, B. L., Wakeling, A. E., McClelland, R. A., Manning, D. L., and Nicholson, R. I. Comparison of the effects of a pure steroidal antiestrogen with those of tamoxifen in a model of human breast cancer. *J Natl Cancer Inst*, 87: 746-750, 1995.
162. Dudley, M. W., Sheeler, C. Q., Wang, H., and Khan, S. Activation of the human estrogen receptor by the antiestrogens ICI 182,780 and tamoxifen in yeast genetic systems: implications for their mechanism of action. *Proc Natl Acad Sci U S A*, 97: 3696-3701, 2000.
163. Dauvois, S., Danielian, P. S., White, R., and Parker, M. G. Antiestrogen ICI 164,384 reduces cellular estrogen receptor content by increasing its turnover. *Proc Natl Acad Sci U S A*, 89: 4037-4041, 1992.
164. Gibson, M. K., Nemmers, L. A., Beckman, W. C., Jr., Davis, V. L., Curtis, S. W., and Korach, K. S. The mechanism of ICI 164,384 antiestrogenicity involves rapid loss of estrogen receptor in uterine tissue. *Endocrinology*, 129: 2000-2010, 1991.
165. Ing, N. H., Beekman, J. M., Tsai, S. Y., Tsai, M. J., and O'Malley, B. W. Members of the steroid hormone receptor superfamily interact with TFIIB (S300-II). *J Biol Chem*, 267: 17617-17623, 1992.
166. Sabbah, M., Kang, K. I., Tora, L., and Redeuilh, G. Oestrogen receptor facilitates the formation of preinitiation complex assembly: involvement of the general transcription factor TFIIB. *Biochem J*, 336 (Pt 3): 639-646, 1998.
167. Jacq, X., Brou, C., Lutz, Y., Davidson, I., Chambon, P., and Tora, L. Human TAFII30 is present in a distinct TFIID complex and is required for transcriptional activation by the estrogen receptor. *Cell*, 79: 107-117, 1994.
168. Verrier, C. S., Roodi, N., Yee, C. J., Bailey, L. R., Jensen, R. A., Bustin, M., and Parl, F. F. High-mobility group (HMG) protein HMG-1 and TATA-binding protein-associated factor TAF(II)30 affect estrogen receptor-mediated transcriptional activation. *Mol Endocrinol*, 11: 1009-1019, 1997.
169. Robyr, D., Wolffe, A. P., and Wahli, W. Nuclear hormone receptor coregulators in action: diversity for shared tasks. *Mol Endocrinol*, 14: 329-347, 2000.

170. Tremblay, G. B., Tremblay, A., Labrie, F., and Giguere, V. Dominant activity of activation function 1 (AF-1) and differential stoichiometric requirements for AF-1 and -2 in the estrogen receptor alpha-beta heterodimeric complex. *Mol Cell Biol*, **19**: 1919-1927, 1999.
171. Zwijsen, R. M., Buckle, R. S., Hijmans, E. M., Loomans, C. J., and Bernards, R. Ligand-independent recruitment of steroid receptor coactivators to estrogen receptor by cyclin D1. *Genes Dev*, **12**: 3488-3498, 1998.
172. Feng, W., Ribeiro, R. C., Wagner, R. L., Nguyen, H., Apriletti, J. W., Fletterick, R. J., Baxter, J. D., Kushner, P. J., and West, B. L. Hormone-dependent coactivator binding to a hydrophobic cleft on nuclear receptors. *Science*, **280**: 1747-1749, 1998.
173. Heery, D. M., Hoare, S., Hussain, S., Parker, M. G., and Sheppard, H. Core LXXLL motif sequences in CREB-binding protein, SRC1, and RIP140 define affinity and selectivity for steroid and retinoid receptors. *J Biol Chem*, **276**: 6695-6702, 2001.
174. Darimont, B. D., Wagner, R. L., Apriletti, J. W., Stallcup, M. R., Kushner, P. J., Baxter, J. D., Fletterick, R. J., and Yamamoto, K. R. Structure and specificity of nuclear receptor-coactivator interactions. *Genes Dev*, **12**: 3343-3356, 1998.
175. Lavinsky, R. M., Jepsen, K., Heinzel, T., Torchia, J., Mullen, T. M., Schiff, R., Del-Rio, A. L., Ricote, M., Ngo, S., Gemsch, J., Hilsenbeck, S. G., Osborne, C. K., Glass, C. K., Rosenfeld, M. G., and Rose, D. W. Diverse signaling pathways modulate nuclear receptor recruitment of N-CoR and SMRT complexes. *Proc Natl Acad Sci U S A*, **95**: 2920-2925, 1998.
176. Bramlett, K. S., Wu, Y., and Burris, T. P. Ligands specify coactivator nuclear receptor (NR) box affinity for estrogen receptor subtypes. *Mol Endocrinol*, **15**: 909-922, 2001.
177. McInerney, E. M., Rose, D. W., Flynn, S. E., Westin, S., Mullen, T. M., Krones, A., Inostroza, J., Torchia, J., Nolte, R. T., Assa-Munt, N., Milburn, M. V., Glass, C. K., and Rosenfeld, M. G. Determinants of coactivator LXXLL motif specificity in nuclear receptor transcriptional activation. *Genes Dev*, **12**: 3357-3368, 1998.
178. Onate, S. A., Tsai, S. Y., Tsai, M. J., and O'Malley, B. W. Sequence and characterization of a coactivator for the steroid hormone receptor superfamily. *Science*, **270**: 1354-1357, 1995.
179. Lee, S. K., Kim, H. J., Na, S. Y., Kim, T. S., Choi, H. S., Im, S. Y., and Lee, J. W. Steroid receptor coactivator-1 coactivates activating protein-1-mediated transactivations through interaction with the c-Jun and c-Fos subunits. *J Biol Chem*, **273**: 16651-16654, 1998.
180. Tikkanen, M. K., Carter, D. J., Harris, A. M., Le, H. M., Azorsa, D. O., Meltzer, P. S., and Murdoch, F. E. Endogenously expressed estrogen receptor and coactivator AIB1 interact in MCF-7 human breast cancer cells. *Proc Natl Acad Sci U S A*, **97**: 12536-12540, 2000.
181. Azorsa, D. O., Cunliffe, H. E., and Meltzer, P. S. Association of steroid receptor coactivator AIB1 with estrogen receptor-alpha in breast cancer cells. *Breast Cancer Res Treat*, **70**: 89-101, 2001.

182. Suen, C. S., Berrodin, T. J., Mastroeni, R., Cheskis, B. J., Lytle, C. R., and Frail, D. E. A transcriptional coactivator, steroid receptor coactivator-3, selectively augments steroid receptor transcriptional activity. *J Biol Chem*, 273: 27645-27653, 1998.
183. Xu, J. and O'Malley, B. W. Molecular mechanisms and cellular biology of the steroid receptor coactivator (SRC) family in steroid receptor function. *Rev Endocr Metab Disord*, 3: 185-192, 2002.
184. Takeshita, A., Yen, P. M., Misiti, S., Cardona, G. R., Liu, Y., and Chin, W. W. Molecular cloning and properties of a full-length putative thyroid hormone receptor coactivator. *Endocrinology*, 137: 3594-3597, 1996.
185. Spencer, T. E., Jenster, G., Burcin, M. M., Allis, C. D., Zhou, J., Mizzen, C. A., McKenna, N. J., Onate, S. A., Tsai, S. Y., Tsai, M. J., and O'Malley, B. W. Steroid receptor coactivator-1 is a histone acetyltransferase. *Nature*, 389: 194-198, 1997.
186. Chen, H., Lin, R. J., Schiltz, R. L., Chakravarti, D., Nash, A., Nagy, L., Privalsky, M. L., Nakatani, Y., and Evans, R. M. Nuclear receptor coactivator ACTR is a novel histone acetyltransferase and forms a multimeric activation complex with P/CAF and CBP/p300. *Cell*, 90: 569-580, 1997.
187. Gavazzo, P., Vergani, L., Mascetti, G. C., and Nicolini, C. Effects of histone acetylation on chromatin structure. *J Cell Biochem*, 64: 466-475, 1997.
188. Liu, Z., Wong, J., Tsai, S. Y., Tsai, M. J., and O'Malley, B. W. Sequential recruitment of steroid receptor coactivator-1 (SRC-1) and p300 enhances progesterone receptor-dependent initiation and reinitiation of transcription from chromatin. *Proc Natl Acad Sci U S A*, 98: 12426-12431, 2001.
189. Hanstein, B., Eckner, R., DiRenzo, J., Halachmi, S., Liu, H., Searcy, B., Kurokawa, R., and Brown, M. p300 is a component of an estrogen receptor coactivator complex. *Proc Natl Acad Sci U S A*, 93: 11540-11545, 1996.
190. Bannister, A. J. and Kouzarides, T. The CBP co-activator is a histone acetyltransferase. *Nature*, 384: 641-643, 1996.
191. Ogryzko, V. V., Schiltz, R. L., Russanova, V., Howard, B. H., and Nakatani, Y. The transcriptional coactivators p300 and CBP are histone acetyltransferases. *Cell*, 87: 953-959, 1996.
192. Kim, M. Y., Hsiao, S. J., and Kraus, W. L. A role for coactivators and histone acetylation in estrogen receptor alpha-mediated transcription initiation. *Embo J*, 20: 6084-6094, 2001.
193. Sheppard, H. M., Harries, J. C., Hussain, S., Bevan, C., and Heery, D. M. Analysis of the steroid receptor coactivator 1 (SRC1)-CREB binding protein interaction interface and its importance for the function of SRC1. *Mol Cell Biol*, 21: 39-50, 2001.
194. Smith, C. L., Onate, S. A., Tsai, M. J., and O'Malley, B. W. CREB binding protein acts synergistically with steroid receptor coactivator-1 to enhance steroid receptor-dependent transcription. *Proc Natl Acad Sci U S A*, 93: 8884-8888, 1996.
195. Burakov, D., Crofts, L. A., Chang, C. P., and Freedman, L. P. Reciprocal recruitment of DRIP/mediator and p160 coactivator complexes in vivo by estrogen receptor. *J Biol Chem*, 277: 14359-14362, 2002.

196. Kalkhoven, E., Valentine, J. E., Heery, D. M., and Parker, M. G. Isoforms of steroid receptor co-activator 1 differ in their ability to potentiate transcription by the oestrogen receptor. *Embo J*, *17*: 232-243, 1998.
197. Reiter, R., Wellstein, A., and Riegel, A. T. An isoform of the coactivator AIB1 that increases hormone and growth factor sensitivity is overexpressed in breast cancer. *J Biol Chem*, *276*: 39736-39741, 2001.
198. Lanz, R. B., McKenna, N. J., Onate, S. A., Albrecht, U., Wong, J., Tsai, S. Y., Tsai, M. J., and O'Malley, B. W. A steroid receptor coactivator, SRA, functions as an RNA and is present in an SRC-1 complex. *Cell*, *97*: 17-27, 1999.
199. Lanz, R. B., Razani, B., Goldberg, A. D., and O'Malley, B. W. Distinct RNA motifs are important for coactivation of steroid hormone receptors by steroid receptor RNA activator (SRA). *Proc Natl Acad Sci U S A*, *99*: 16081-16086, 2002.
200. Emberley, E., Huang, G. J., Hamedani, M. K., Czosnek, A., Ali, D., Grolla, A., Lu, B., Watson, P. H., Murphy, L. C., and Leygue, E. Identification of new human coding steroid receptor RNA activator isoforms. *Biochem Biophys Res Commun*, *301*: 509-515, 2003.
201. Chooniedass-Kothari, S., Hamedani, M. K., Troup, S., Hube, F., and Leygue, E. The steroid receptor RNA activator protein is expressed in breast tumor tissues. *Int J Cancer*, *118*: 1054-1059, 2006.
202. Webb, P., Valentine, C., Nguyen, P., Price, R. H., Jr., Marimuthu, A., West, B. L., Baxter, J. D., and Kushner, P. J. ERbeta Binds N-CoR in the Presence of Estrogens via an LXXLL-like Motif in the N-CoR C-terminus. *Nucl Recept*, *1*: 4, 2003.
203. Huang, H. J., Norris, J. D., and McDonnell, D. P. Identification of a negative regulatory surface within estrogen receptor alpha provides evidence in support of a role for corepressors in regulating cellular responses to agonists and antagonists. *Mol Endocrinol*, *16*: 1778-1792, 2002.
204. Wong, C. W. and Privalsky, M. L. Transcriptional silencing is defined by isoform- and heterodimer-specific interactions between nuclear hormone receptors and corepressors. *Mol Cell Biol*, *18*: 5724-5733, 1998.
205. Zhang, H., Thomsen, J. S., Johansson, L., Gustafsson, J. A., and Treuter, E. DAX-1 functions as an LXXLL-containing corepressor for activated estrogen receptors. *J Biol Chem*, *275*: 39855-39859, 2000.
206. Laherty, C. D., Billin, A. N., Lavinsky, R. M., Yochum, G. S., Bush, A. C., Sun, J. M., Mullen, T. M., Davie, J. R., Rose, D. W., Glass, C. K., Rosenfeld, M. G., Ayer, D. E., and Eisenman, R. N. SAP30, a component of the mSin3 corepressor complex involved in N-CoR-mediated repression by specific transcription factors. *Mol Cell*, *2*: 33-42, 1998.
207. Knoepfler, P. S. and Eisenman, R. N. Sin meets NuRD and other tails of repression. *Cell*, *99*: 447-450, 1999.
208. Shi, Y., Downes, M., Xie, W., Kao, H. Y., Ordentlich, P., Tsai, C. C., Hon, M., and Evans, R. M. Sharp, an inducible cofactor that integrates nuclear receptor repression and activation. *Genes Dev*, *15*: 1140-1151, 2001.
209. Montano, M. M., Ekena, K., Delage-Mourroux, R., Chang, W., Martini, P., and Katzenellenbogen, B. S. An estrogen receptor-selective coregulator that

- potentiates the effectiveness of antiestrogens and represses the activity of estrogens. *Proc Natl Acad Sci U S A*, **96**: 6947-6952, 1999.
210. Norris, J. D., Fan, D., Sherk, A., and McDonnell, D. P. A negative coregulator for the human ER. *Mol Endocrinol*, **16**: 459-468, 2002.
211. Ignar-Trowbridge, D. M., Pimentel, M., Parker, M. G., McLachlan, J. A., and Korach, K. S. Peptide growth factor cross-talk with the estrogen receptor requires the A/B domain and occurs independently of protein kinase C or estradiol. *Endocrinology*, **137**: 1735-1744, 1996.
212. El-Tanani, M. K. and Green, C. D. Two separate mechanisms for ligand-independent activation of the estrogen receptor. *Mol Endocrinol*, **11**: 928-937, 1997.
213. Tremblay, A., Tremblay, G. B., Labrie, F., and Giguere, V. Ligand-independent recruitment of SRC-1 to estrogen receptor beta through phosphorylation of activation function AF-1. *Mol Cell*, **3**: 513-519, 1999.
214. Curtis, S. W., Washburn, T., Sewall, C., DiAugustine, R., Lindzey, J., Couse, J. F., and Korach, K. S. Physiological coupling of growth factor and steroid receptor signaling pathways: estrogen receptor knockout mice lack estrogen-like response to epidermal growth factor. *Proc Natl Acad Sci U S A*, **93**: 12626-12630, 1996.
215. Klotz, D. M., Hewitt, S. C., Ciana, P., Raviscioni, M., Lindzey, J. K., Foley, J., Maggi, A., DiAugustine, R. P., and Korach, K. S. Requirement of estrogen receptor-alpha in insulin-like growth factor-1 (IGF-1)-induced uterine responses and in vivo evidence for IGF-1/estrogen receptor cross-talk. *J Biol Chem*, **277**: 8531-8537, 2002.
216. Joel, P. B., Smith, J., Sturgill, T. W., Fisher, T. L., Blenis, J., and Lannigan, D. A. pp90rsk1 regulates estrogen receptor-mediated transcription through phosphorylation of Ser-167. *Mol Cell Biol*, **18**: 1978-1984, 1998.
217. Rowan, B. G., Weigel, N. L., and O'Malley, B. W. Phosphorylation of steroid receptor coactivator-1. Identification of the phosphorylation sites and phosphorylation through the mitogen-activated protein kinase pathway. *J Biol Chem*, **275**: 4475-4483, 2000.
218. Font de Mora, J. and Brown, M. AIB1 is a conduit for kinase-mediated growth factor signaling to the estrogen receptor. *Mol Cell Biol*, **20**: 5041-5047, 2000.
219. Aronica, S. M. and Katzenellenbogen, B. S. Stimulation of estrogen receptor-mediated transcription and alteration in the phosphorylation state of the rat uterine estrogen receptor by estrogen, cyclic adenosine monophosphate, and insulin-like growth factor-I. *Mol Endocrinol*, **7**: 743-752, 1993.
220. Lahooti, H., Thorsen, T., and Aakvaag, A. Modulation of mouse estrogen receptor transcription activity by protein kinase C delta. *J Mol Endocrinol*, **20**: 245-259, 1998.
221. Lee, H., Jiang, F., Wang, Q., Nicosia, S. V., Yang, J., Su, B., and Bai, W. MEKK1 activation of human estrogen receptor alpha and stimulation of the agonistic activity of 4-hydroxytamoxifen in endometrial and ovarian cancer cells. *Mol Endocrinol*, **14**: 1882-1896, 2000.
222. Murphy, L. C., Weitsman, G. E., Skliris, G. P., Teh, E. M., Li, L., Peng, B., Davie, J. R., Ung, K., Niu, Y. L., Troup, S., Tomes, L., and Watson, P. H.

- Potential role of estrogen receptor alpha (ERalpha) phosphorylated at Serine118 in human breast cancer *in vivo*. *J Steroid Biochem Mol Biol*, 102: 139-146, 2006.
223. Kushner, P. J., Agard, D. A., Greene, G. L., Scanlan, T. S., Shiau, A. K., Uht, R. M., and Webb, P. Estrogen receptor pathways to AP-1. *J Steroid Biochem Mol Biol*, 74: 311-317, 2000.
224. Teyssier, C., Belguise, K., Galtier, F., and Chalbos, D. Characterization of the physical interaction between estrogen receptor alpha and JUN proteins. *J Biol Chem*, 276: 36361-36369, 2001.
225. Jakacka, M., Ito, M., Weiss, J., Chien, P. Y., Gehm, B. D., and Jameson, J. L. Estrogen receptor binding to DNA is not required for its activity through the nonclassical AP1 pathway. *J Biol Chem*, 276: 13615-13621, 2001.
226. Salvatori, L., Pallante, P., Ravenna, L., Chinzari, P., Frati, L., Russo, M. A., and Petrangeli, E. Oestrogens and selective oestrogen receptor (ER) modulators regulate EGF receptor gene expression through human ER alpha and beta subtypes via an Sp1 site. *Oncogene*, 22: 4875-4881, 2003.
227. Kim, K., Thu, N., Saville, B., and Safe, S. Domains of estrogen receptor alpha (ERalpha) required for ERalpha/Sp1-mediated activation of GC-rich promoters by estrogens and antiestrogens in breast cancer cells. *Mol Endocrinol*, 17: 804-817, 2003.
228. Duan, R., Porter, W., and Safe, S. Estrogen-induced c-fos protooncogene expression in MCF-7 human breast cancer cells: role of estrogen receptor Sp1 complex formation. *Endocrinology*, 139: 1981-1990, 1998.
229. Stein, B. and Yang, M. X. Repression of the interleukin-6 promoter by estrogen receptor is mediated by NF-kappa B and C/EBP beta. *Mol Cell Biol*, 15: 4971-4979, 1995.
230. Ray, P., Ghosh, S. K., Zhang, D. H., and Ray, A. Repression of interleukin-6 gene expression by 17 beta-estradiol: inhibition of the DNA-binding activity of the transcription factors NF-IL6 and NF-kappa B by the estrogen receptor. *FEBS Lett*, 409: 79-85, 1997.
231. Webb, P., Lopez, G. N., Uht, R. M., and Kushner, P. J. Tamoxifen activation of the estrogen receptor/AP-1 pathway: potential origin for the cell-specific estrogen-like effects of antiestrogens. *Mol Endocrinol*, 9: 443-456, 1995.
232. Gaub, M. P., Bellard, M., Scheuer, I., Chambon, P., and Sassone-Corsi, P. Activation of the ovalbumin gene by the estrogen receptor involves the fos-jun complex. *Cell*, 63: 1267-1276, 1990.
233. Shaulian, E. and Karin, M. AP-1 as a regulator of cell life and death. *Nat Cell Biol*, 4: E131-136, 2002.
234. Curran, T. and Teich, N. M. Candidate product of the FBJ murine osteosarcoma virus oncogene: characterization of a 55,000-dalton phosphoprotein. *J Virol*, 42: 114-122, 1982.
235. Maki, Y., Bos, T. J., Davis, C., Starbuck, M., and Vogt, P. K. Avian sarcoma virus 17 carries the jun oncogene. *Proc Natl Acad Sci U S A*, 84: 2848-2852, 1987.
236. Haluska, F. G., Huebner, K., Isobe, M., Nishimura, T., Croce, C. M., and Vogt, P. K. Localization of the human JUN protooncogene to chromosome region 1p31-32. *Proc Natl Acad Sci U S A*, 85: 2215-2218, 1988.

237. Curran, T., MacConnell, W. P., van Straaten, F., and Verma, I. M. Structure of the FBJ murine osteosarcoma virus genome: molecular cloning of its associated helper virus and the cellular homolog of the v-fos gene from mouse and human cells. *Mol Cell Biol*, 3: 914-921, 1983.
238. Ryseck, R. P. and Bravo, R. c-JUN, JUN B, and JUN D differ in their binding affinities to AP-1 and CRE consensus sequences: effect of FOS proteins. *Oncogene*, 6: 533-542, 1991.
239. Barker, P. E., Rabin, M., Watson, M., Breg, W. R., Ruddle, F. H., and Verma, I. M. Human c-fos oncogene mapped within chromosomal region 14q21---q31. *Proc Natl Acad Sci U S A*, 81: 5826-5830, 1984.
240. Landschulz, W. H., Johnson, P. F., and McKnight, S. L. The leucine zipper: a hypothetical structure common to a new class of DNA binding proteins. *Science*, 240: 1759-1764, 1988.
241. Rasmussen, R., Benvegnu, D., O'Shea, E. K., Kim, P. S., and Alber, T. X-ray scattering indicates that the leucine zipper is a coiled coil. *Proc Natl Acad Sci U S A*, 88: 561-564, 1991.
242. Glover, J. N. and Harrison, S. C. Crystal structure of the heterodimeric bZIP transcription factor c-Fos-c-Jun bound to DNA. *Nature*, 373: 257-261, 1995.
243. Halazonetis, T. D., Georgopoulos, K., Greenberg, M. E., and Leder, P. c-Jun dimerizes with itself and with c-Fos, forming complexes of different DNA binding affinities. *Cell*, 55: 917-924, 1988.
244. Turner, R. and Tjian, R. Leucine repeats and an adjacent DNA binding domain mediate the formation of functional cFos-cJun heterodimers. *Science*, 243: 1689-1694, 1989.
245. Ransone, L. J., Wamsley, P., Morley, K. L., and Verma, I. M. Domain swapping reveals the modular nature of Fos, Jun, and CREB proteins. *Mol Cell Biol*, 10: 4565-4573, 1990.
246. Turner, B. C., Zhang, J., Gumbs, A. A., Maher, M. G., Kaplan, L., Carter, D., Glazer, P. M., Hurst, H. C., Haffty, B. G., and Williams, T. Expression of AP-2 transcription factors in human breast cancer correlates with the regulation of multiple growth factor signalling pathways. *Cancer Res*, 58: 5466-5472, 1998.
247. Angel, P., Imagawa, M., Chiu, R., Stein, B., Imbra, R. J., Rahmsdorf, H. J., Jonat, C., Herrlich, P., and Karin, M. Phorbol ester-inducible genes contain a common cis element recognized by a TPA-modulated trans-acting factor. *Cell*, 49: 729-739, 1987.
248. Lee, W., Mitchell, P., and Tjian, R. Purified transcription factor AP-1 interacts with TPA-inducible enhancer elements. *Cell*, 49: 741-752, 1987.
249. Derijard, B., Hibi, M., Wu, I. H., Barrett, T., Su, B., Deng, T., Karin, M., and Davis, R. J. JNK1: a protein kinase stimulated by UV light and Ha-Ras that binds and phosphorylates the c-Jun activation domain. *Cell*, 76: 1025-1037, 1994.
250. Pulverer, B. J., Kyriakis, J. M., Avruch, J., Nikolakaki, E., and Woodgett, J. R. Phosphorylation of c-jun mediated by MAP kinases. *Nature*, 353: 670-674, 1991.
251. Smeal, T., Binetruy, B., Mercola, D. A., Birrer, M., and Karin, M. Oncogenic and transcriptional cooperation with Ha-Ras requires phosphorylation of c-Jun on serines 63 and 73. *Nature*, 354: 494-496, 1991.

252. Deng, T. and Karin, M. c-Fos transcriptional activity stimulated by H-Ras-activated protein kinase distinct from JNK and ERK. *Nature*, **371**: 171-175, 1994.
253. Bannister, A. J., Oehler, T., Wilhelm, D., Angel, P., and Kouzarides, T. Stimulation of c-Jun activity by CBP: c-Jun residues Ser63/73 are required for CBP induced stimulation in vivo and CBP binding in vitro. *Oncogene*, **11**: 2509-2514, 1995.
254. Chirivita, J. C., Kwok, R. P., Lamb, N., Hagiwara, M., Montminy, M. R., and Goodman, R. H. Phosphorylated CREB binds specifically to the nuclear protein CBP. *Nature*, **365**: 855-859, 1993.
255. Kwok, R. P., Lundblad, J. R., Chirivita, J. C., Richards, J. P., Bachinger, H. P., Brennan, R. G., Roberts, S. G., Green, M. R., and Goodman, R. H. Nuclear protein CBP is a coactivator for the transcription factor CREB. *Nature*, **370**: 223-226, 1994.
256. Arias, J., Alberts, A. S., Brindle, P., Claret, F. X., Smeal, T., Karin, M., Feramisco, J., and Montminy, M. Activation of cAMP and mitogen responsive genes relies on a common nuclear factor. *Nature*, **370**: 226-229, 1994.
257. Kamei, Y., Xu, L., Heinzel, T., Torchia, J., Kurokawa, R., Gloss, B., Lin, S. C., Heyman, R. A., Rose, D. W., Glass, C. K., and Rosenfeld, M. G. A CBP integrator complex mediates transcriptional activation and AP-1 inhibition by nuclear receptors. *Cell*, **85**: 403-414, 1996.
258. Benkoussa, M., Brand, C., Delmotte, M. H., Formstecher, P., and Lefebvre, P. Retinoic acid receptors inhibit AP1 activation by regulating extracellular signal-regulated kinase and CBP recruitment to an AP1-responsive promoter. *Mol Cell Biol*, **22**: 4522-4534, 2002.
259. De Bosscher, K., Vanden Berghe, W., and Haegeman, G. Glucocorticoid repression of AP-1 is not mediated by competition for nuclear coactivators. *Mol Endocrinol*, **15**: 219-227, 2001.
260. Boyle, W. J., Smeal, T., Defize, L. H., Angel, P., Woodgett, J. R., Karin, M., and Hunter, T. Activation of protein kinase C decreases phosphorylation of c-Jun at sites that negatively regulate its DNA-binding activity. *Cell*, **64**: 573-584, 1991.
261. Nikolakaki, E., Coffer, P. J., Hemelsoet, R., Woodgett, J. R., and Defize, L. H. Glycogen synthase kinase 3 phosphorylates Jun family members in vitro and negatively regulates their transactivating potential in intact cells. *Oncogene*, **8**: 833-840, 1993.
262. Minden, A., Lin, A., Smeal, T., Derijard, B., Cobb, M., Davis, R., and Karin, M. c-Jun N-terminal phosphorylation correlates with activation of the JNK subgroup but not the ERK subgroup of mitogen-activated protein kinases. *Mol Cell Biol*, **14**: 6683-6688, 1994.
263. Morton, S., Davis, R. J., McLaren, A., and Cohen, P. A reinvestigation of the multisite phosphorylation of the transcription factor c-Jun. *Embo J*, **22**: 3876-3886, 2003.
264. Chou, S. Y., Baichwal, V., and Ferrell, J. E., Jr. Inhibition of c-Jun DNA binding by mitogen-activated protein kinase. *Mol Biol Cell*, **3**: 1117-1130, 1992.
265. Wilding, G., Lippman, M. E., and Gelmann, E. P. Effects of steroid hormones and peptide growth factors on protooncogene c-fos expression in human breast cancer cells. *Cancer Res*, **48**: 802-805, 1988.

266. Weisz, A. and Bresciani, F. Estrogen induces expression of c-fos and c-myc protooncogenes in rat uterus. *Mol Endocrinol*, 2: 816-824, 1988.
267. Ambrosino, C., Cicatiello, L., Cobellis, G., Addeo, R., Sica, V., Bresciani, F., and Weisz, A. Functional antagonism between the estrogen receptor and Fos in the regulation of c-fos protooncogene transcription. *Mol Endocrinol*, 7: 1472-1483, 1993.
268. Weisz, A., Cicatiello, L., Persico, E., Scalona, M., and Bresciani, F. Estrogen stimulates transcription of c-jun protooncogene. *Mol Endocrinol*, 4: 1041-1050, 1990.
269. Hyder, S. M., Nawaz, Z., Chiappetta, C., Yokoyama, K., and Stancel, G. M. The protooncogene c-jun contains an unusual estrogen-inducible enhancer within the coding sequence. *J Biol Chem*, 270: 8506-8513, 1995.
270. Nephew, K. P., Polek, T. C., Akcali, K. C., and Khan, S. A. The antiestrogen tamoxifen induces c-fos and jun-B, but not c-jun or jun-D, protooncogenes in the rat uterus. *Endocrinology*, 133: 419-422, 1993.
271. Kirkland, J. L., Murthy, L., and Stancel, G. M. Tamoxifen stimulates expression of the c-fos proto-oncogene in rodent uterus. *Mol Pharmacol*, 43: 709-714, 1993.
272. Kumar, V. and Chambon, P. The estrogen receptor binds tightly to its responsive element as a ligand-induced homodimer. *Cell*, 55: 145-156, 1988.
273. DeNardo, D. G., Kim, H. T., Hilsenbeck, S., Cuba, V., Tsimelzon, A., and Brown, P. H. Global gene expression analysis of estrogen receptor transcription factor cross talk in breast cancer: identification of estrogen-induced/activator protein-1-dependent genes. *Mol Endocrinol*, 19: 362-378, 2005.
274. Umayahara, Y., Kawamori, R., Watada, H., Imano, E., Iwama, N., Morishima, T., Yamasaki, Y., Kajimoto, Y., and Kamada, T. Estrogen regulation of the insulin-like growth factor I gene transcription involves an AP-1 enhancer. *J Biol Chem*, 269: 16433-16442, 1994.
275. Bollig, A. and Miksicek, R. J. An estrogen receptor-alpha splicing variant mediates both positive and negative effects on gene transcription. *Mol Endocrinol*, 14: 634-649, 2000.
276. Cheng, C. K., Chow, B. K., and Leung, P. C. An activator protein 1-like motif mediates 17beta-estradiol repression of gonadotropin-releasing hormone receptor promoter via an estrogen receptor alpha-dependent mechanism in ovarian and breast cancer cells. *Mol Endocrinol*, 17: 2613-2629, 2003.
277. Liu, M. M., Albanese, C., Anderson, C. M., Hilty, K., Webb, P., Uht, R. M., Price, R. H., Jr., Pestell, R. G., and Kushner, P. J. Opposing action of estrogen receptors alpha and beta on cyclin D1 gene expression. *J Biol Chem*, 277: 24353-24360, 2002.
278. Philips, A., Teyssier, C., Galtier, F., Rivier-Covas, C., Rey, J. M., Rochefort, H., and Chalbos, D. FRA-1 expression level modulates regulation of activator protein-1 activity by estradiol in breast cancer cells. *Mol Endocrinol*, 12: 973-985, 1998.
279. Maruyama, S., Fujimoto, N., Asano, K., and Ito, A. Suppression by estrogen receptor beta of AP-1 mediated transactivation through estrogen receptor alpha. *J Steroid Biochem Mol Biol*, 78: 177-184, 2001.

280. Paech, K., Webb, P., Kuiper, G. G., Nilsson, S., Gustafsson, J., Kushner, P. J., and Scanlan, T. S. Differential ligand activation of estrogen receptors ERalpha and ERbeta at AP1 sites. *Science*, **277**: 1508-1510, 1997.
281. Philips, A., Chalbos, D., and Rochefort, H. Estradiol increases and anti-estrogens antagonize the growth factor-induced activator protein-1 activity in MCF7 breast cancer cells without affecting c-fos and c-jun synthesis. *J Biol Chem*, **268**: 14103-14108, 1993.
282. Cheung, E., Acevedo, M. L., Cole, P. A., and Kraus, W. L. Altered pharmacology and distinct coactivator usage for estrogen receptor-dependent transcription through activating protein-1. *Proc Natl Acad Sci U S A*, **102**: 559-564, 2005.
283. Uht, R. M., Webb, P., Nguyen, P., Price Jr, R. H., Jr., Valentine, C., Favre, H., and Kushner, P. J. A conserved lysine in the estrogen receptor DNA binding domain regulates ligand activation profiles at AP-1 sites, possibly by controlling interactions with a modulating repressor. *Nucl Recept*, **2**: 2, 2004.
284. Kedar, R. P., Bourne, T. H., Powles, T. J., Collins, W. P., Ashley, S. E., Cosgrove, D. O., and Campbell, S. Effects of tamoxifen on uterus and ovaries of postmenopausal women in a randomised breast cancer prevention trial. *Lancet*, **343**: 1318-1321, 1994.
285. Bjornstrom, L. and Sjoberg, M. Estrogen receptor-dependent activation of AP-1 via non-genomic signalling. *Nucl Recept*, **2**: 3, 2004.
286. Webb, P., Nguyen, P., Valentine, C., Lopez, G. N., Kwok, G. R., McInerney, E., Katzenellenbogen, B. S., Enmark, E., Gustafsson, J. A., Nilsson, S., and Kushner, P. J. The estrogen receptor enhances AP-1 activity by two distinct mechanisms with different requirements for receptor transactivation functions. *Mol Endocrinol*, **13**: 1672-1685, 1999.
287. Qi, X., Borowicz, S., Pramanik, R., Schultz, R. M., Han, J., and Chen, G. Estrogen receptor inhibits c-Jun-dependent stress-induced cell death by binding and modifying c-Jun activity in human breast cancer cells. *J Biol Chem*, **279**: 6769-6777, 2004.
288. Yang, N. N., Bryant, H. U., Hardikar, S., Sato, M., Galvin, R. J., Glasebrook, A. L., and Termine, J. D. Estrogen and raloxifene stimulate transforming growth factor-beta 3 gene expression in rat bone: a potential mechanism for estrogen- or raloxifene-mediated bone maintenance. *Endocrinology*, **137**: 2075-2084, 1996.
289. Yang, N. N., Venugopalan, M., Hardikar, S., and Glasebrook, A. Identification of an estrogen response element activated by metabolites of 17beta-estradiol and raloxifene. *Science*, **273**: 1222-1225, 1996.
290. Lu, D. and Giguere, V. Requirement of Ras-dependent pathways for activation of the transforming growth factor beta3 promoter by estradiol. *Endocrinology*, **142**: 751-759, 2001.
291. Guo, X., Razandi, M., Pedram, A., Kassab, G., and Levin, E. R. Estrogen induces vascular wall dilation: mediation through kinase signaling to nitric oxide and estrogen receptors alpha and beta. *J Biol Chem*, **280**: 19704-19710, 2005.
292. Chen, Z., Yuhanna, I. S., Galcheva-Gargova, Z., Karas, R. H., Mendelsohn, M. E., and Shaul, P. W. Estrogen receptor alpha mediates the nongenomic activation of endothelial nitric oxide synthase by estrogen. *J Clin Invest*, **103**: 401-406, 1999.

293. Castoria, G., Barone, M. V., Di Domenico, M., Bilancio, A., Ametrano, D., Migliaccio, A., and Auricchio, F. Non-transcriptional action of oestradiol and progestin triggers DNA synthesis. *Embo J*, 18: 2500-2510, 1999.
294. McEwen, B. S. and Alves, S. E. Estrogen actions in the central nervous system. *Endocr Rev*, 20: 279-307, 1999.
295. Zhao, L., Chen, S., Ming Wang, J., and Brinton, R. D. 17beta-estradiol induces Ca<sup>2+</sup> influx, dendritic and nuclear Ca<sup>2+</sup> rise and subsequent cyclic AMP response element-binding protein activation in hippocampal neurons: a potential initiation mechanism for estrogen neurotrophism. *Neuroscience*, 132: 299-311, 2005.
296. Kahlert, S., Nuedling, S., van Eickels, M., Vetter, H., Meyer, R., and Grohe, C. Estrogen receptor alpha rapidly activates the IGF-1 receptor pathway. *J Biol Chem*, 275: 18447-18453, 2000.
297. Razandi, M., Pedram, A., Park, S. T., and Levin, E. R. Proximal events in signaling by plasma membrane estrogen receptors. *J Biol Chem*, 278: 2701-2712, 2003.
298. Endoh, H., Sasaki, H., Maruyama, K., Takeyama, K., Waga, I., Shimizu, T., Kato, S., and Kawashima, H. Rapid activation of MAP kinase by estrogen in the bone cell line. *Biochem Biophys Res Commun*, 235: 99-102, 1997.
299. Watters, J. J., Campbell, J. S., Cunningham, M. J., Krebs, E. G., and Dorsa, D. M. Rapid membrane effects of steroids in neuroblastoma cells: effects of estrogen on mitogen activated protein kinase signalling cascade and c-fos immediate early gene transcription. *Endocrinology*, 138: 4030-4033, 1997.
300. Migliaccio, A., Di Domenico, M., Castoria, G., de Falco, A., Bontempo, P., Nola, E., and Auricchio, F. Tyrosine kinase/p21ras/MAP-kinase pathway activation by estradiol-receptor complex in MCF-7 cells. *Embo J*, 15: 1292-1300, 1996.
301. Simoncini, T., Hafezi-Moghadam, A., Brazil, D. P., Ley, K., Chin, W. W., and Liao, J. K. Interaction of oestrogen receptor with the regulatory subunit of phosphatidylinositol-3-OH kinase. *Nature*, 407: 538-541, 2000.
302. Song, R. X. and Santen, R. J. Membrane Initiated Estrogen Signaling in Breast Cancer. *Biol Reprod*, 2006.
303. Warner, M. and Gustafsson, J. A. Nongenomic effects of estrogen: why all the uncertainty? *Steroids*, 71: 91-95, 2006.
304. Lee, A. V., Cui, X., and Oesterreich, S. Cross-talk among estrogen receptor, epidermal growth factor, and insulin-like growth factor signaling in breast cancer. *Clin Cancer Res*, 7: 4429s-4435s; discussion 4411s-4412s, 2001.
305. Massague, J. TGF-beta signal transduction. *Annu Rev Biochem*, 67: 753-791, 1998.
306. Wieser, R., Wrana, J. L., and Massague, J. GS domain mutations that constitutively activate T beta R-I, the downstream signaling component in the TGF-beta receptor complex. *Embo J*, 14: 2199-2208, 1995.
307. Wrana, J. L., Attisano, L., Wieser, R., Ventura, F., and Massague, J. Mechanism of activation of the TGF-beta receptor. *Nature*, 370: 341-347, 1994.
308. Huse, M., Chen, Y. G., Massague, J., and Kuriyan, J. Crystal structure of the cytoplasmic domain of the type I TGF beta receptor in complex with FKBP12. *Cell*, 96: 425-436, 1999.

309. Onichtchouk, D., Chen, Y. G., Dosch, R., Gawantka, V., Delius, H., Massague, J., and Niehrs, C. Silencing of TGF-beta signalling by the pseudoreceptor BAMBI. *Nature*, **401**: 480-485, 1999.
310. Liu, F., Pouponnot, C., and Massague, J. Dual role of the Smad4/DPC4 tumor suppressor in TGFbeta-inducible transcriptional complexes. *Genes Dev*, **11**: 3157-3167, 1997.
311. Tsukazaki, T., Chiang, T. A., Davison, A. F., Attisano, L., and Wrana, J. L. SARA, a FYVE domain protein that recruits Smad2 to the TGFbeta receptor. *Cell*, **95**: 779-791, 1998.
312. Wotton, D., Lo, R. S., Lee, S., and Massague, J. A Smad transcriptional corepressor. *Cell*, **97**: 29-39, 1999.
313. Dennler, S., Itoh, S., Vivien, D., ten Dijke, P., Huet, S., and Gauthier, J. M. Direct binding of Smad3 and Smad4 to critical TGF beta-inducible elements in the promoter of human plasminogen activator inhibitor-type 1 gene. *Embo J*, **17**: 3091-3100, 1998.
314. Hua, X., Miller, Z. A., Wu, G., Shi, Y., and Lodish, H. F. Specificity in transforming growth factor beta-induced transcription of the plasminogen activator inhibitor-1 gene: interactions of promoter DNA, transcription factor muE3, and Smad proteins. *Proc Natl Acad Sci U S A*, **96**: 13130-13135, 1999.
315. Pouponnot, C., Jayaraman, L., and Massague, J. Physical and functional interaction of SMADs and p300/CBP. *J Biol Chem*, **273**: 22865-22868, 1998.
316. Feng, X. H., Zhang, Y., Wu, R. Y., and Derynck, R. The tumor suppressor Smad4/DPC4 and transcriptional adaptor CBP/p300 are coactivators for smad3 in TGF-beta-induced transcriptional activation. *Genes Dev*, **12**: 2153-2163, 1998.
317. Massague, J. and Wotton, D. Transcriptional control by the TGF-beta/Smad signaling system. *Embo J*, **19**: 1745-1754, 2000.
318. Sun, Y., Liu, X., Ng-Eaton, E., Lodish, H. F., and Weinberg, R. A. SnoN and Ski protooncoproteins are rapidly degraded in response to transforming growth factor beta signaling. *Proc Natl Acad Sci U S A*, **96**: 12442-12447, 1999.
319. Xu, W., Angelis, K., Danielpour, D., Haddad, M. M., Bischof, O., Campisi, J., Stavnezer, E., and Medrano, E. E. Ski acts as a co-repressor with Smad2 and Smad3 to regulate the response to type beta transforming growth factor. *Proc Natl Acad Sci U S A*, **97**: 5924-5929, 2000.
320. Yanagisawa, J., Yanagi, Y., Masuhiro, Y., Suzawa, M., Watanabe, M., Kashiwagi, K., Toriyabe, T., Kawabata, M., Miyazono, K., and Kato, S. Convergence of transforming growth factor-beta and vitamin D signaling pathways on SMAD transcriptional coactivators. *Science*, **283**: 1317-1321, 1999.
321. Yanagi, Y., Suzawa, M., Kawabata, M., Miyazono, K., Yanagisawa, J., and Kato, S. Positive and negative modulation of vitamin D receptor function by transforming growth factor-beta signaling through smad proteins. *J Biol Chem*, **274**: 12971-12974, 1999.
322. Song, C. Z., Tian, X., and Gelehrter, T. D. Glucocorticoid receptor inhibits transforming growth factor-beta signaling by directly targeting the transcriptional activation function of Smad3. *Proc Natl Acad Sci U S A*, **96**: 11776-11781, 1999.
323. Zugmaier, G. and Lippman, M. E. Effects of TGF beta on normal and malignant mammary epithelium. *Ann N Y Acad Sci*, **593**: 272-275, 1990.

324. Benson, J. R., Baum, M., and Colletta, A. A. Role of TGF beta in the anti-estrogen response/resistance of human breast cancer. *J Mammary Gland Biol Neoplasia*, *1*: 381-389, 1996.
325. Koli, K. M., Ramsey, T. T., Ko, Y., Dugger, T. C., Brattain, M. G., and Arteaga, C. L. Blockade of transforming growth factor-beta signaling does not abrogate antiestrogen-induced growth inhibition of human breast carcinoma cells. *J Biol Chem*, *272*: 8296-8302, 1997.
326. Brattain, M. G., Ko, Y., Banerji, S. S., Wu, G., and Willson, J. K. Defects of TGF-beta receptor signaling in mammary cell tumorigenesis. *J Mammary Gland Biol Neoplasia*, *1*: 365-372, 1996.
327. Reiss, M. and Barcellos-Hoff, M. H. Transforming growth factor-beta in breast cancer: a working hypothesis. *Breast Cancer Res Treat*, *45*: 81-95, 1997.
328. Arrick, B. A., Korc, M., and Derynck, R. Differential regulation of expression of three transforming growth factor beta species in human breast cancer cell lines by estradiol. *Cancer Res*, *50*: 299-303, 1990.
329. Jeng, M. H., ten Dijke, P., Iwata, K. K., and Jordan, V. C. Regulation of the levels of three transforming growth factor beta mRNAs by estrogen and their effects on the proliferation of human breast cancer cells. *Mol Cell Endocrinol*, *97*: 115-123, 1993.
330. Pouliot, F. and Labrie, C. Expression profile of agonistic Smads in human breast cancer cells: absence of regulation by estrogens. *Int J Cancer*, *81*: 98-103, 1999.
331. Pierce, D. F., Jr., Gorska, A. E., Chytil, A., Meise, K. S., Page, D. L., Coffey, R. J., Jr., and Moses, H. L. Mammary tumor suppression by transforming growth factor beta 1 transgene expression. *Proc Natl Acad Sci U S A*, *92*: 4254-4258, 1995.
332. Kalkhoven, E., Roelen, B. A., de Winter, J. P., Mummery, C. L., van den Eijnden-van Raaij, A. J., van der Saag, P. T., and van der Burg, B. Resistance to transforming growth factor beta and activin due to reduced receptor expression in human breast tumor cell lines. *Cell Growth Differ*, *6*: 1151-1161, 1995.
333. Chen, H., Tritton, T. R., Kenny, N., Absher, M., and Chiu, J. F. Tamoxifen induces TGF-beta 1 activity and apoptosis of human MCF-7 breast cancer cells in vitro. *J Cell Biochem*, *61*: 9-17, 1996.
334. Thompson, A. M., Kerr, D. J., and Steel, C. M. Transforming growth factor beta 1 is implicated in the failure of tamoxifen therapy in human breast cancer. *Br J Cancer*, *63*: 609-614, 1991.
335. Matsuda, T., Yamamoto, T., Muraguchi, A., and Saatcioglu, F. Cross-talk between transforming growth factor-beta and estrogen receptor signaling through Smad3. *J Biol Chem*, *276*: 42908-42914, 2001.
336. Yamamoto, T., Saatcioglu, F., and Matsuda, T. Cross-talk between bone morphogenic proteins and estrogen receptor signaling. *Endocrinology*, *143*: 2635-2642, 2002.
337. Hayes, S. A., Zarnegar, M., Sharma, M., Yang, F., Peehl, D. M., ten Dijke, P., and Sun, Z. SMAD3 represses androgen receptor-mediated transcription. *Cancer Res*, *61*: 2112-2118, 2001.
338. Kang, H. Y., Lin, H. K., Hu, Y. C., Yeh, S., Huang, K. E., and Chang, C. From transforming growth factor-beta signaling to androgen action: identification of

- Smad3 as an androgen receptor coregulator in prostate cancer cells. *Proc Natl Acad Sci U S A*, 98: 3018-3023, 2001.
339. Anbazhagan, R., Bornman, D. M., Johnston, J. C., Westra, W. H., and Gabrielson, E. The S387Y mutations of the transforming growth factor-beta receptor type I gene is uncommon in metastases of breast cancer and other common types of adenocarcinoma. *Cancer Res*, 59: 3363-3364, 1999.
340. Takenoshita, S., Mogi, A., Tani, M., Osawa, H., Sunaga, H., Kakegawa, H., Yanagita, Y., Koida, T., Kimura, M., Fujita, K. I., Kato, H., Kato, R., and Nagamachi, Y. Absence of mutations in the analysis of coding sequences of the entire transforming growth factor-beta type II receptor gene in sporadic human breast cancers. *Oncol Rep*, 5: 367-371, 1998.
341. Gobbi, H., Arteaga, C. L., Jensen, R. A., Simpson, J. F., Dupont, W. D., Olson, S. J., Schuyler, P. A., Plummer, W. D., Jr., and Page, D. L. Loss of expression of transforming growth factor beta type II receptor correlates with high tumour grade in human breast in-situ and invasive carcinomas. *Histopathology*, 36: 168-177, 2000.
342. Xie, W., Mertens, J. C., Reiss, D. J., Rimm, D. L., Camp, R. L., Haffty, B. G., and Reiss, M. Alterations of Smad signaling in human breast carcinoma are associated with poor outcome: a tissue microarray study. *Cancer Res*, 62: 497-505, 2002.
343. Guo, Y., Jacobs, S. C., and Kyriianou, N. Down-regulation of protein and mRNA expression for transforming growth factor-beta (TGF-beta1) type I and type II receptors in human prostate cancer. *Int J Cancer*, 71: 573-579, 1997.
344. Markowitz, S., Wang, J., Myeroff, L., Parsons, R., Sun, L., Lutterbaugh, J., Fan, R. S., Zborowska, E., Kinzler, K. W., Vogelstein, B., and et al. Inactivation of the type II TGF-beta receptor in colon cancer cells with microsatellite instability. *Science*, 268: 1336-1338, 1995.
345. Matsushita, M., Matsuzaki, K., Date, M., Watanabe, T., Shibano, K., Nakagawa, T., Yanagitani, S., Amoh, Y., Takemoto, H., Ogata, N., Yamamoto, C., Kubota, Y., Seki, T., Inokuchi, H., Nishizawa, M., Takada, H., Sawamura, T., Okamura, A., and Inoue, K. Down-regulation of TGF-beta receptors in human colorectal cancer: implications for cancer development. *Br J Cancer*, 80: 194-205, 1999.
346. Park, K., Kim, S. J., Bang, Y. J., Park, J. G., Kim, N. K., Roberts, A. B., and Sporn, M. B. Genetic changes in the transforming growth factor beta (TGF-beta) type II receptor gene in human gastric cancer cells: correlation with sensitivity to growth inhibition by TGF-beta. *Proc Natl Acad Sci U S A*, 91: 8772-8776, 1994.
347. Zhang, T., Nanney, L. B., Peeler, M. O., Williams, C. S., Lamps, L., Heppner, K. J., DuBois, R. N., and Beauchamp, R. D. Decreased transforming growth factor beta type II receptor expression in intestinal adenomas from Min/+ mice is associated with increased cyclin D1 and cyclin-dependent kinase 4 expression. *Cancer Res*, 57: 1638-1643, 1997.
348. Kelly, D. L. and Rizzino, A. Growth regulatory factors and carcinogenesis: the roles played by transforming growth factor beta, its receptors and signaling pathways. *Anticancer Res*, 19: 4791-4807, 1999.
349. Park, B., Jang, J. S., and Park, K. Deletion of one adenine base within the polyadenine tract of transforming growth factor-beta receptor type II in human MDA-MB-231 breast cancer cell line. *Int J Oncol*, 17: 473-478, 2000.

350. Kalkhoven, E., Beraldi, E., Panno, M. L., De Winter, J. P., Thijssen, J. H., and Van Der Burg, B. Growth inhibition by anti-estrogens and progestins in TGF-beta-resistant and -sensitive breast-tumor cells. *Int J Cancer*, 65: 682-687, 1996.
351. Chakravarthy, D., Green, A. R., Green, V. L., Kerin, M. J., and Speirs, V. Expression and secretion of TGF-beta isoforms and expression of TGF-beta-receptors I, II and III in normal and neoplastic human breast. *Int J Oncol*, 15: 187-194, 1999.
352. Kim, I. Y., Ahn, H. J., Zelner, D. J., Shaw, J. W., Lang, S., Kato, M., Oefelein, M. G., Miyazono, K., Nemeth, J. A., Kozlowski, J. M., and Lee, C. Loss of expression of transforming growth factor beta type I and type II receptors correlates with tumor grade in human prostate cancer tissues. *Clin Cancer Res*, 2: 1255-1261, 1996.
353. Chen, T., Carter, D., Garrigue-Antar, L., and Reiss, M. Transforming growth factor beta type I receptor kinase mutant associated with metastatic breast cancer. *Cancer Res*, 58: 4805-4810, 1998.
354. de Caestecker, M. P., Piek, E., and Roberts, A. B. Role of transforming growth factor-beta signaling in cancer. *J Natl Cancer Inst*, 92: 1388-1402, 2000.
355. Riggins, G. J., Kinzler, K. W., Vogelstein, B., and Thiagalingam, S. Frequency of Smad gene mutations in human cancers. *Cancer Res*, 57: 2578-2580, 1997.
356. Eppert, K., Scherer, S. W., Ozcelik, H., Pirone, R., Hoodless, P., Kim, H., Tsui, L. C., Bapat, B., Gallinger, S., Andrulis, I. L., Thomsen, G. H., Wrana, J. L., and Attisano, L. MADR2 maps to 18q21 and encodes a TGFbeta-regulated MAD-related protein that is functionally mutated in colorectal carcinoma. *Cell*, 86: 543-552, 1996.
357. Takaku, K., Oshima, M., Miyoshi, H., Matsui, M., Seldin, M. F., and Taketo, M. M. Intestinal tumorigenesis in compound mutant mice of both Dpc4 (Smad4) and Apc genes. *Cell*, 92: 645-656, 1998.
358. Schutte, M., Hruban, R. H., Hedrick, L., Cho, K. R., Nadasdy, G. M., Weinstein, C. L., Bova, G. S., Isaacs, W. B., Cairns, P., Nawroz, H., Sidransky, D., Casero, R. A., Jr., Meltzer, P. S., Hahn, S. A., and Kern, S. E. DPC4 gene in various tumor types. *Cancer Res*, 56: 2527-2530, 1996.
359. Arai, T., Akiyama, Y., Okabe, S., Ando, M., Endo, M., and Yuasa, Y. Genomic structure of the human Smad3 gene and its infrequent alterations in colorectal cancers. *Cancer Lett*, 122: 157-163, 1998.
360. Woodward, T. L., Xie, J. W., and Haslam, S. Z. The role of mammary stroma in modulating the proliferative response to ovarian hormones in the normal mammary gland. *J Mammary Gland Biol Neoplasia*, 3: 117-131, 1998.
361. Clarke, R. B., Howell, A., Potten, C. S., and Anderson, E. Dissociation between steroid receptor expression and cell proliferation in the human breast. *Cancer Res*, 57: 4987-4991, 1997.
362. Ricketts, D., Turnbull, L., Ryall, G., Bakhshi, R., Rawson, N. S., Gazet, J. C., Nolan, C., and Coombes, R. C. Estrogen and progesterone receptors in the normal female breast. *Cancer Res*, 51: 1817-1822, 1991.
363. Soomro, S., Shousha, S., and Sinnett, H. D. Oestrogen and progesterone receptors in screen-detected breast carcinoma: an immunohistological study using paraffin sections. *Histopathology*, 21: 543-547, 1992.

364. Fuqua, S. A. The role of estrogen receptors in breast cancer metastasis. *J Mammary Gland Biol Neoplasia*, 6: 407-417, 2001.
365. Clarke, R., Skaar, T., Baumann, K., Leonessa, F., James, M., Lippman, J., Thompson, E. W., Freter, C., and Brunner, N. Hormonal carcinogenesis in breast cancer: cellular and molecular studies of malignant progression. *Breast Cancer Res Treat*, 31: 237-248, 1994.
366. Kurebayashi, J., Otsuki, T., Kunisue, H., Tanaka, K., Yamamoto, S., and Sonoo, H. Expression levels of estrogen receptor-alpha, estrogen receptor-beta, coactivators, and corepressors in breast cancer. *Clin Cancer Res*, 6: 512-518, 2000.
367. Walt, A. J., Singhakowinta, A., Brooks, S. C., and Cortez, A. The surgical implications of estrophile protein estimations in carcinoma of the breast. *Surgery*, 80: 506-512, 1976.
368. Millis, R. R. Correlation of hormone receptors with pathological features in human breast cancer. *Cancer*, 46: 2869-2871, 1980.
369. Fisher, E. R., Osborne, C. K., McGuire, W. L., Redmond, C., Knight, W. A., 3rd, Fisher, B., Bannayan, G., Walder, A., Gregory, E. J., Jacobsen, A., Queen, D. M., Bennett, D. E., and Ford, H. C. Correlation of primary breast cancer histopathology and estrogen receptor content. *Breast Cancer Res Treat*, 1: 37-41, 1981.
370. Osborne, C. K. Steroid hormone receptors in breast cancer management. *Breast Cancer Res Treat*, 51: 227-238, 1998.
371. Horwitz, K. B., Koseki, Y., and McGuire, W. L. Estrogen control of progesterone receptor in human breast cancer: role of estradiol and antiestrogen. *Endocrinology*, 103: 1742-1751, 1978.
372. Ravdin, P. M., Green, S., Dorr, T. M., McGuire, W. L., Fabian, C., Pugh, R. P., Carter, R. D., Rivkin, S. E., Borst, J. R., Belt, R. J., and et al. Prognostic significance of progesterone receptor levels in estrogen receptor-positive patients with metastatic breast cancer treated with tamoxifen: results of a prospective Southwest Oncology Group study. *J Clin Oncol*, 10: 1284-1291, 1992.
373. Murphy, L., Cherlet, T., Lewis, A., Banu, Y., and Watson, P. New insights into estrogen receptor function in human breast cancer. *Ann Med*, 35: 614-631, 2003.
374. Saji, S., Hirose, M., and Toi, M. Clinical significance of estrogen receptor beta in breast cancer. *Cancer Chemother Pharmacol*, 56 Suppl 1: 21-26, 2005.
375. Leygue, E., Dotzlaw, H., Watson, P. H., and Murphy, L. C. Altered estrogen receptor alpha and beta messenger RNA expression during human breast tumorigenesis. *Cancer Res*, 58: 3197-3201, 1998.
376. Speirs, V., Carder, P. J., Lane, S., Dodwell, D., Lansdown, M. R., and Hanby, A. M. Oestrogen receptor beta: what it means for patients with breast cancer. *Lancet Oncol*, 5: 174-181, 2004.
377. Murphy, L. C. and Watson, P. H. Is oestrogen receptor- {beta} a predictor of endocrine therapy responsiveness in human breast cancer? *Endocr Relat Cancer*, 13: 327-334, 2006.
378. Jarvinen, T. A., Pelto-Huikko, M., Holli, K., and Isola, J. Estrogen receptor beta is coexpressed with ERalpha and PR and associated with nodal status, grade, and proliferation rate in breast cancer. *Am J Pathol*, 156: 29-35, 2000.

379. Nakopoulou, L., Lazaris, A. C., Panayotopoulou, E. G., Giannopoulou, I., Givalos, N., Markaki, S., and Keramopoulos, A. The favourable prognostic value of oestrogen receptor beta immunohistochemical expression in breast cancer. *J Clin Pathol*, 57: 523-528, 2004.
380. Fuqua, S. A., Schiff, R., Parra, I., Moore, J. T., Mohsin, S. K., Osborne, C. K., Clark, G. M., and Allred, D. C. Estrogen receptor beta protein in human breast cancer: correlation with clinical tumor parameters. *Cancer Res*, 63: 2434-2439, 2003.
381. Omoto, Y., Kobayashi, S., Inoue, S., Ogawa, S., Toyama, T., Yamashita, H., Muramatsu, M., Gustafsson, J. A., and Iwase, H. Evaluation of oestrogen receptor beta wild-type and variant protein expression, and relationship with clinicopathological factors in breast cancers. *Eur J Cancer*, 38: 380-386, 2002.
382. Murphy, L. C., Peng, B., Lewis, A., Davie, J. R., Leygue, E., Kemp, A., Ung, K., Vendetti, M., and Shiu, R. Inducible upregulation of oestrogen receptor-beta1 affects oestrogen and tamoxifen responsiveness in MCF7 human breast cancer cells. *J Mol Endocrinol*, 34: 553-566, 2005.
383. Omoto, Y., Eguchi, H., Yamamoto-Yamaguchi, Y., and Hayashi, S. Estrogen receptor (ER) beta1 and ERbeta<sub>2</sub> inhibit ERalpha function differently in breast cancer cell line MCF7. *Oncogene*, 22: 5011-5020, 2003.
384. Strom, A., Hartman, J., Foster, J. S., Kietz, S., Wimalasena, J., and Gustafsson, J. A. Estrogen receptor beta inhibits 17beta-estradiol-stimulated proliferation of the breast cancer cell line T47D. *Proc Natl Acad Sci U S A*, 101: 1566-1571, 2004.
385. Paruthiyil, S., Parmar, H., Kerekatte, V., Cunha, G. R., Firestone, G. L., and Leitman, D. C. Estrogen receptor beta inhibits human breast cancer cell proliferation and tumor formation by causing a G2 cell cycle arrest. *Cancer Res*, 64: 423-428, 2004.
386. Dotzlaw, H., Leygue, E., Watson, P. H., and Murphy, L. C. Expression of estrogen receptor-beta in human breast tumors. *J Clin Endocrinol Metab*, 82: 2371-2374, 1997.
387. Fuqua, S. A., Schiff, R., Parra, I., Friedrichs, W. E., Su, J. L., McKee, D. D., Slentz-Kesler, K., Moore, L. B., Willson, T. M., and Moore, J. T. Expression of wild-type estrogen receptor beta and variant isoforms in human breast cancer. *Cancer Res*, 59: 5425-5428, 1999.
388. Leygue, E., Dotzlaw, H., Watson, P. H., and Murphy, L. C. Expression of estrogen receptor beta1, beta2, and beta5 messenger RNAs in human breast tissue. *Cancer Res*, 59: 1175-1179, 1999.
389. Esslimani-Sahla, M., Kramar, A., Simony-Lafontaine, J., Warner, M., Gustafsson, J. A., and Rochefort, H. Increased estrogen receptor betacx expression during mammary carcinogenesis. *Clin Cancer Res*, 11: 3170-3174, 2005.
390. Saji, S., Omoto, Y., Shimizu, C., Warner, M., Hayashi, Y., Horiguchi, S., Watanabe, T., Hayashi, S., Gustafsson, J. A., and Toi, M. Expression of estrogen receptor (ER) (beta)cx protein in ER(alpha)-positive breast cancer: specific correlation with progesterone receptor. *Cancer Res*, 62: 4849-4853, 2002.
391. Anzick, S. L., Kononen, J., Walker, R. L., Azorsa, D. O., Tanner, M. M., Guan, X. Y., Sauter, G., Kallioniemi, O. P., Trent, J. M., and Meltzer, P. S. AIB1, a

- steroid receptor coactivator amplified in breast and ovarian cancer. *Science*, 277: 965-968, 1997.
392. Murphy, L. C., Simon, S. L., Parkes, A., Leygue, E., Dotzlaw, H., Snell, L., Troup, S., Adeyinka, A., and Watson, P. H. Altered expression of estrogen receptor coregulators during human breast tumorigenesis. *Cancer Res*, 60: 6266-6271, 2000.
393. List, H. J., Reiter, R., Singh, B., Wellstein, A., and Riegel, A. T. Expression of the nuclear coactivator AIB1 in normal and malignant breast tissue. *Breast Cancer Res Treat*, 68: 21-28, 2001.
394. Simon, S. L., Parkes, A., Leygue, E., Dotzlaw, H., Snell, L., Troup, S., Adeyinka, A., Watson, P. H., and Murphy, L. C. Expression of a repressor of estrogen receptor activity in human breast tumors: relationship to some known prognostic markers. *Cancer Res*, 60: 2796-2799, 2000.
395. Subramaniam, N., Leong, G. M., Cock, T. A., Flanagan, J. L., Fong, C., Eisman, J. A., and Kouzmenko, A. P. Cross-talk between 1,25-dihydroxyvitamin D<sub>3</sub> and transforming growth factor-beta signaling requires binding of VDR and Smad3 proteins to their cognate DNA recognition elements. *J Biol Chem*, 276: 15741-15746, 2001.
396. Chipuk, J. E., Cornelius, S. C., Pultz, N. J., Jorgensen, J. S., Bonham, M. J., Kim, S. J., and Danielpour, D. The androgen receptor represses transforming growth factor-beta signaling through interaction with Smad3. *J Biol Chem*, 277: 1240-1248, 2002.
397. Verrecchia, F., Vindevoghel, L., Lechleider, R. J., Uitto, J., Roberts, A. B., and Mauviel, A. Smad3/AP-1 interactions control transcriptional responses to TGF-beta in a promoter-specific manner. *Oncogene*, 20: 3332-3340, 2001.
398. Watts, C. K., Handel, M. L., King, R. J., and Sutherland, R. L. Oestrogen receptor gene structure and function in breast cancer. *J Steroid Biochem Mol Biol*, 41: 529-536, 1992.
399. Zhao, H., Hart, L. L., Keller, U., Holth, L. T., and Davie, J. R. Characterization of stably transfected fusion protein GFP-estrogen receptor-alpha in MCF-7 human breast cancer cells. *J Cell Biochem*, 86: 365-375, 2002.
400. Murphy, L., Peng, B., Lewis, A., Davie, J. R., Leygue, E., Kemp, A., Ung, K., Vendetti, M., and Shiu, R. P. Inducible upregulation of oestrogen receptor-beta1 affects oestrogen and tamoxifen responsiveness in MCF7 human breast cancer cells. *J Mol Endocrinol*, in press.
401. Rosenthal, N. Identification of regulatory elements of cloned genes with functional assays. *Methods Enzymol*, 152: 704-720, 1987.
402. Joel, P. B., Traish, A. M., and Lannigan, D. A. Estradiol-induced phosphorylation of serine 118 in the estrogen receptor is independent of p42/p44 mitogen-activated protein kinase. *J Biol Chem*, 273: 13317-13323, 1998.
403. Berthois, Y., Katzenellenbogen, J. A., and Katzenellenbogen, B. S. Phenol red in tissue culture media is a weak estrogen: implications concerning the study of estrogen-responsive cells in culture. *Proc Natl Acad Sci U S A*, 83: 2496-2500, 1986.
404. Jordan, M. and Wurm, F. Transfection of adherent and suspended cells by calcium phosphate. *Methods*, 33: 136-143, 2004.

405. Laemmli, U. K. Cleavage of structural proteins during the assembly of the head of bacteriophage T4. *Nature*, **227**: 680-685, 1970.
406. de Moissac, D., Mustapha, S., Greenberg, A. H., and Kirshenbaum, L. A. Bcl-2 activates the transcription factor NFκB through the degradation of the cytoplasmic inhibitor IκBα. *J Biol Chem*, **273**: 23946-23951, 1998.
407. Demczuk, S., Donovan, M., Franklin, G., and Ohlsson, R. Order of probe and nuclear protein extract addition can determine specificity of protein-DNA complexes in tested mobility shift assays. *Nucleic Acids Res*, **19**: 677-678, 1991.
408. Alarid, E. T., Bakopoulos, N., and Solodin, N. Proteasome-mediated proteolysis of estrogen receptor: a novel component in autologous down-regulation. *Mol Endocrinol*, **13**: 1522-1534, 1999.
409. Wrana, J. L., Attisano, L., Carcamo, J., Zentella, A., Doody, J., Laiho, M., Wang, X. F., and Massague, J. TGF beta signals through a heteromeric protein kinase receptor complex. *Cell*, **71**: 1003-1014, 1992.
410. Carcamo, J., Zentella, A., and Massague, J. Disruption of transforming growth factor beta signaling by a mutation that prevents transphosphorylation within the receptor complex. *Mol Cell Biol*, **15**: 1573-1581, 1995.
411. Fink, S. P., Swinler, S. E., Lutterbaugh, J. D., Massague, J., Thiagalingam, S., Kinzler, K. W., Vogelstein, B., Willson, J. K., and Markowitz, S. Transforming growth factor-beta-induced growth inhibition in a Smad4 mutant colon adenoma cell line. *Cancer Res*, **61**: 256-260, 2001.
412. Yingling, J. M., Datto, M. B., Wong, C., Frederick, J. P., Liberati, N. T., and Wang, X. F. Tumor suppressor Smad4 is a transforming growth factor beta-inducible DNA binding protein. *Mol Cell Biol*, **17**: 7019-7028, 1997.
413. Vindevoghel, L., Kon, A., Lechleider, R. J., Uitto, J., Roberts, A. B., and Mauviel, A. Smad-dependent transcriptional activation of human type VII collagen gene (COL7A1) promoter by transforming growth factor-beta. *J Biol Chem*, **273**: 13053-13057, 1998.
414. Vindevoghel, L., Lechleider, R. J., Kon, A., de Caestecker, M. P., Uitto, J., Roberts, A. B., and Mauviel, A. SMAD3/4-dependent transcriptional activation of the human type VII collagen gene (COL7A1) promoter by transforming growth factor beta. *Proc Natl Acad Sci U S A*, **95**: 14769-14774, 1998.
415. Borras, M., Hardy, L., Lempereur, F., el Khissiin, A. H., Legros, N., Gol-Winkler, R., and Leclercq, G. Estradiol-induced down-regulation of estrogen receptor. Effect of various modulators of protein synthesis and expression. *J Steroid Biochem Mol Biol*, **48**: 325-336, 1994.
416. Eckert, R. L., Mullick, A., Rorke, E. A., and Katzenellenbogen, B. S. Estrogen receptor synthesis and turnover in MCF-7 breast cancer cells measured by a density shift technique. *Endocrinology*, **114**: 629-637, 1984.
417. Ferno, M., Borg, A., Johansson, U., Norgren, A., Olsson, H., Ryden, S., and Sellberg, G. Estrogen and progesterone receptor analyses in more than 4,000 human breast cancer samples. A study with special reference to age at diagnosis and stability of analyses. Southern Swedish Breast Cancer Study Group. *Acta Oncol*, **29**: 129-135, 1990.
418. Nagai, M. A., Marques, L. A., Yamamoto, L., Fujiyama, C. T., and Brentani, M. M. Estrogen and progesterone receptor mRNA levels in primary breast cancer:

- association with patient survival and other clinical and tumor features. *Int J Cancer*, 59: 351-356, 1994.
419. Clark, G. M., Osborne, C. K., and McGuire, W. L. Correlations between estrogen receptor, progesterone receptor, and patient characteristics in human breast cancer. *J Clin Oncol*, 2: 1102-1109, 1984.
420. Shupnik, M. A., Gordon, M. S., and Chin, W. W. Tissue-specific regulation of rat estrogen receptor mRNAs. *Mol Endocrinol*, 3: 660-665, 1989.
421. Potier, M., Elliot, S. J., Tack, I., Lenz, O., Striker, G. E., Striker, L. J., and Karl, M. Expression and regulation of estrogen receptors in mesangial cells: influence on matrix metalloproteinase-9. *J Am Soc Nephrol*, 12: 241-251, 2001.
422. Marin-Castano, M. E., Elliot, S. J., Potier, M., Karl, M., Striker, L. J., Striker, G. E., Csaky, K. G., and Cousins, S. W. Regulation of estrogen receptors and MMP-2 expression by estrogens in human retinal pigment epithelium. *Invest Ophthalmol Vis Sci*, 44: 50-59, 2003.
423. Peekhaus, N. T., Chang, T., Hayes, E. C., Wilkinson, H. A., Mitra, S. W., Schaeffer, J. M., and Rohrer, S. P. Distinct effects of the antiestrogen Faslodex on the stability of estrogen receptors-alpha and -beta in the breast cancer cell line MCF-7. *J Mol Endocrinol*, 32: 987-995, 2004.
424. Murphy, L. C., Peng, B., Lewis, A., Davie, J. R., Leygue, E., Kemp, A., Ung, K., Venditti, M., and Shiu, R. Inducible upregulation of oestrogen receptor-{beta}1 affects oestrogen and tamoxifen responsiveness in MCF7 human breast cancer cells. *J Mol Endocrinol*, 34: 553-566, 2005.
425. Muller, V., Jensen, E. V., and Knabbe, C. Partial antagonism between steroid and nonsteroidal antiestrogens in human breast cancer cell lines. *Cancer Res*, 58: 263-267, 1998.
426. Knabbe, C., Lippman, M. E., Wakefield, L. M., Flanders, K. C., Kasid, A., Derynck, R., and Dickson, R. B. Evidence that transforming growth factor-beta is a hormonally regulated negative growth factor in human breast cancer cells. *Cell*, 48: 417-428, 1987.
427. Ree, A. H., Bjornland, K., Brunner, N., Johansen, H. T., Pedersen, K. B., Aasen, A. O., and Fodstad, O. Regulation of tissue-degrading factors and in vitro invasiveness in progression of breast cancer cells. *Clin Exp Metastasis*, 16: 205-215, 1998.
428. Venditti, M., Iwasiow, B., Orr, F. W., and Shiu, R. P. C-myc gene expression alone is sufficient to confer resistance to antiestrogen in human breast cancer cells. *Int J Cancer*, 99: 35-42, 2002.
429. Buck, M. B., Pfizenmaier, K., and Knabbe, C. Antiestrogens induce growth inhibition by sequential activation of p38 mitogen-activated protein kinase and transforming growth factor-beta pathways in human breast cancer cells. *Mol Endocrinol*, 18: 1643-1657, 2004.
430. Carlsson, J., Drevin, H., and Axen, R. Protein thiolation and reversible protein-protein conjugation. N-Succinimidyl 3-(2-pyridyldithio)propionate, a new heterobifunctional reagent. *Biochem J*, 173: 723-737, 1978.
431. Samson, M., Cousin, J. L., and Fehlmann, M. Cross-linking of insulin receptors to MHC antigens in human B lymphocytes: evidence for selective molecular interactions. *J Immunol*, 137: 2293-2298, 1986.

432. Liu, H. T. and Yung, B. Y. In vivo interaction of nucleophosmin/B23 and protein C23 during cell cycle progression in HeLa cells. *Cancer Lett*, **144**: 45-54, 1999.
433. Liberati, N. T., Datto, M. B., Frederick, J. P., Shen, X., Wong, C., Rougier-Chapman, E. M., and Wang, X. F. Smads bind directly to the Jun family of AP-1 transcription factors. *Proc Natl Acad Sci U S A*, **96**: 4844-4849, 1999.
434. Zhang, Y., Feng, X. H., and Derynck, R. Smad3 and Smad4 cooperate with c-Jun/c-Fos to mediate TGF-beta-induced transcription. *Nature*, **394**: 909-913, 1998.
435. Martin, M. L., Lieberman, P. M., and Curran, T. Fos-Jun dimerization promotes interaction of the basic region with TFIIE-34 and TFIIF. *Mol Cell Biol*, **16**: 2110-2118, 1996.
436. Ransone, L. J., Kerr, L. D., Schmitt, M. J., Wamsley, P., and Verma, I. M. The bZIP domains of Fos and Jun mediate a physical association with the TATA box-binding protein. *Gene Expr*, **3**: 37-48, 1993.
437. Spencer, V. A., Sun, J. M., Li, L., and Davie, J. R. Chromatin immunoprecipitation: a tool for studying histone acetylation and transcription factor binding. *Methods*, **31**: 67-75, 2003.
438. Jeruss, J. S., Sturgis, C. D., Rademaker, A. W., and Woodruff, T. K. Down-regulation of activin, activin receptors, and Smads in high-grade breast cancer. *Cancer Res*, **63**: 3783-3790, 2003.
439. McGuire, W. L., Horwitz, K. B., Pearson, O. H., and Segaloff, A. Current status of estrogen and progesterone receptors in breast cancer. *Cancer*, **39**: 2934-2947, 1977.
440. Lauritsen, K. J., List, H. J., Reiter, R., Wellstein, A., and Riegel, A. T. A role for TGF-beta in estrogen and retinoid mediated regulation of the nuclear receptor coactivator AIB1 in MCF-7 breast cancer cells. *Oncogene*, **21**: 7147-7155, 2002.
441. Chen, X., Weisberg, E., Fridmacher, V., Watanabe, M., Naco, G., and Whitman, M. Smad4 and FAST-1 in the assembly of activin-responsive factor. *Nature*, **389**: 85-89, 1997.
442. Smith, L. H., Coats, S. R., Qin, H., Petrie, M. S., Covington, J. W., Su, M., Eren, M., and Vaughan, D. E. Differential and opposing regulation of PAI-1 promoter activity by estrogen receptor alpha and estrogen receptor beta in endothelial cells. *Circ Res*, **95**: 269-275, 2004.
443. Brown, N. J., Abbas, A., Byrne, D., Schoenhard, J. A., and Vaughan, D. E. Comparative effects of estrogen and angiotensin-converting enzyme inhibition on plasminogen activator inhibitor-1 in healthy postmenopausal women. *Circulation*, **105**: 304-309, 2002.
444. Buck, M., von der Fecht, J., and Knabbe, C. Antiestrogenic regulation of transforming growth factor beta receptors I and II in human breast cancer cells. *Ann N Y Acad Sci*, **963**: 140-143, 2002.
445. Speir, E., Yu, Z. X., Takeda, K., Ferrans, V. J., and Cannon, R. O., 3rd Competition for p300 regulates transcription by estrogen receptors and nuclear factor-kappaB in human coronary smooth muscle cells. *Circ Res*, **87**: 1006-1011, 2000.
446. Topper, J. N., DiChiara, M. R., Brown, J. D., Williams, A. J., Falb, D., Collins, T., and Gimbrone, M. A., Jr. CREB binding protein is a required coactivator for

- Smad-dependent, transforming growth factor beta transcriptional responses in endothelial cells. *Proc Natl Acad Sci U S A*, **95**: 9506-9511, 1998.
447. Shi, Y., Wang, Y. F., Jayaraman, L., Yang, H., Massague, J., and Pavletich, N. P. Crystal structure of a Smad MH1 domain bound to DNA: insights on DNA binding in TGF-beta signaling. *Cell*, **94**: 585-594, 1998.
448. Malek, D., Gust, R., and Kleuser, B. 17-Beta-estradiol inhibits transforming-growth-factor-beta-induced MCF-7 cell migration by Smad3-repression. *Eur J Pharmacol*, **534**: 39-47, 2006.
449. Wu, L., Wu, Y., Gathings, B., Wan, M., Li, X., Grizzle, W., Liu, Z., Lu, C., Mao, Z., and Cao, X. Smad4 as a transcription corepressor for estrogen receptor alpha. *J Biol Chem*, **278**: 15192-15200, 2003.
450. Massague, J., Seoane, J., and Wotton, D. Smad transcription factors. *Genes Dev*, **19**: 2783-2810, 2005.
451. Feng, X. H., Liang, Y. Y., Liang, M., Zhai, W., and Lin, X. Direct interaction of c-Myc with Smad2 and Smad3 to inhibit TGF-beta-mediated induction of the CDK inhibitor p15(INK4B). *Mol Cell*, **9**: 133-143, 2002.
452. Dubik, D. and Shiu, R. P. Transcriptional regulation of c-myc oncogene expression by estrogen in hormone-responsive human breast cancer cells. *J Biol Chem*, **263**: 12705-12708, 1988.
453. Lo, R. S., Wotton, D., and Massague, J. Epidermal growth factor signaling via Ras controls the Smad transcriptional co-repressor TGIF. *Embo J*, **20**: 128-136, 2001.
454. Wotton, D., Lo, R. S., Swaby, L. A., and Massague, J. Multiple modes of repression by the Smad transcriptional corepressor TGIF. *J Biol Chem*, **274**: 37105-37110, 1999.
455. Kretzschmar, M., Doody, J., Timokhina, I., and Massague, J. A mechanism of repression of TGFbeta/ Smad signaling by oncogenic Ras. *Genes Dev*, **13**: 804-816, 1999.
456. Jones, D. R., Schmidt, R. J., Pickard, R. T., Foxworthy, P. S., and Eacho, P. I. Estrogen receptor-mediated repression of human hepatic lipase gene transcription. *J Lipid Res*, **43**: 383-391, 2002.
457. Homma, H., Kurachi, H., Nishio, Y., Takeda, T., Yamamoto, T., Adachi, K., Morishige, K., Ohmichi, M., Matsuzawa, Y., and Murata, Y. Estrogen suppresses transcription of lipoprotein lipase gene. Existence of a unique estrogen response element on the lipoprotein lipase promoter. *J Biol Chem*, **275**: 11404-11411, 2000.
458. Miller, C. D. and Miller, W. L. Transcriptional repression of the ovine follicle-stimulating hormone-beta gene by 17 beta-estradiol. *Endocrinology*, **137**: 3437-3446, 1996.
459. Schmitt, M., Bausero, P., Simoni, P., Queuche, D., Geoffroy, V., Marschal, C., Kempf, J., and Quirin-Stricker, C. Positive and negative effects of nuclear receptors on transcription activation by AP-1 of the human choline acetyltransferase proximal promoter. *J Neurosci Res*, **40**: 152-164, 1995.
460. Ewan, K. B., Oketch-Rabah, H. A., Ravani, S. A., Shyamala, G., Moses, H. L., and Barcellos-Hoff, M. H. Proliferation of estrogen receptor-alpha-positive

- mammary epithelial cells is restrained by transforming growth factor-beta1 in adult mice. *Am J Pathol*, *167*: 409-417, 2005.
461. Doisneau-Sixou, S. F., Sergio, C. M., Carroll, J. S., Hui, R., Musgrove, E. A., and Sutherland, R. L. Estrogen and antiestrogen regulation of cell cycle progression in breast cancer cells. *Endocr Relat Cancer*, *10*: 179-186, 2003.
462. Massague, J. and Gomis, R. R. The logic of TGFbeta signaling. *FEBS Lett*, *580*: 2811-2820, 2006.
463. Dubik, D. and Shiu, R. P. Mechanism of estrogen activation of c-myc oncogene expression. *Oncogene*, *7*: 1587-1594, 1992.
464. Chen, C. R., Kang, Y., Siegel, P. M., and Massague, J. E2F4/5 and p107 as Smad cofactors linking the TGFbeta receptor to c-myc repression. *Cell*, *110*: 19-32, 2002.
465. Gee, J. M., Barroso, A. F., Ellis, I. O., Robertson, J. F., and Nicholson, R. I. Biological and clinical associations of c-jun activation in human breast cancer. *Int J Cancer*, *89*: 177-186, 2000.
466. Tiniakos, D. G., Scott, L. E., Corbett, I. P., Piggott, N. H., and Horne, C. H. Studies of c-jun oncogene expression in human breast using a new monoclonal antibody, NCL-DK4. *J Pathol*, *172*: 19-26, 1994.
467. Vleugel, M. M., Greijer, A. E., Bos, R., van der Wall, E., and van Diest, P. J. c-Jun activation is associated with proliferation and angiogenesis in invasive breast cancer. *Hum Pathol*, *37*: 668-674, 2006.
468. Bamberger, A. M., Methner, C., Lisboa, B. W., Stadtler, C., Schulte, H. M., Loning, T., and Milde-Langosch, K. Expression pattern of the AP-1 family in breast cancer: association of fosB expression with a well-differentiated, receptor-positive tumor phenotype. *Int J Cancer*, *84*: 533-538, 1999.
469. Welch, D. R., Fabra, A., and Nakajima, M. Transforming growth factor beta stimulates mammary adenocarcinoma cell invasion and metastatic potential. *Proc Natl Acad Sci U S A*, *87*: 7678-7682, 1990.
470. Kakonen, S. M. and Mundy, G. R. Mechanisms of osteolytic bone metastases in breast carcinoma. *Cancer*, *97*: 834-839, 2003.
471. Yin, J. J., Selander, K., Chirgwin, J. M., Dallas, M., Grubbs, B. G., Wieser, R., Massague, J., Mundy, G. R., and Guise, T. A. TGF-beta signaling blockade inhibits PTHrP secretion by breast cancer cells and bone metastases development. *J Clin Invest*, *103*: 197-206, 1999.
472. Deckers, M., van Dinther, M., Buijs, J., Que, I., Lowik, C., van der Pluijm, G., and ten Dijke, P. The tumor suppressor Smad4 is required for transforming growth factor beta-induced epithelial to mesenchymal transition and bone metastasis of breast cancer cells. *Cancer Res*, *66*: 2202-2209, 2006.