Fighting colorectal cancer: Wnt/B-catenin pathway

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INTRODUCTION

Epidemiology

Colorectal cancer (CRC)...

- Most common malignant tumor in women and men considered together
- Second most frequent cause of cancer death
- Survival decreases with tumor stage

Importance of early detection Need for **treatment**

Etiology

Alterations are due Genetic factors

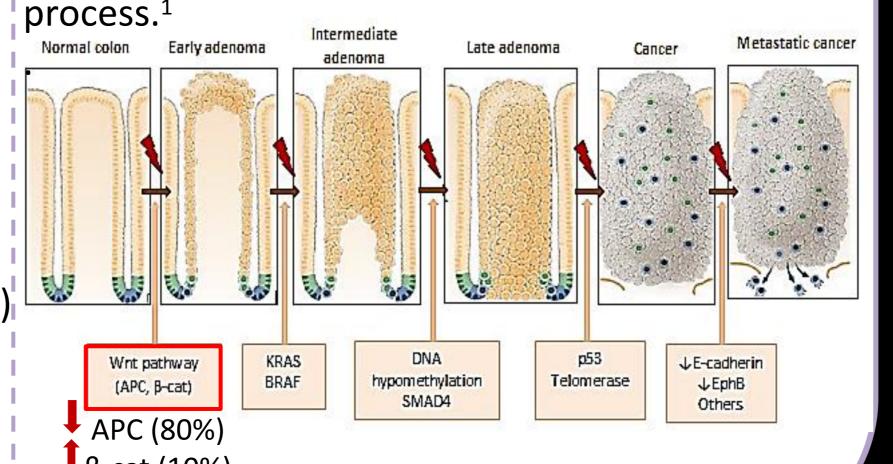
Epigenetic Environmental factors factors

classified CRC into...

- Sporadic (70-75%) Heritable (5-10%)
- Familial (20%)

Adenoma – carcinoma sequence

CRC is a multistep process. The order of genetic changes can variates, but activating mutations of Wnt/β-cat pathway always happen **at the beginning** of the neoplasic



B-cat (10%) Fig.1. Changes through adenoma – carcinoma sequence. (Modified from Todaro, M., et al. (2010). Gastroenterology, 138(6), 2151-2162).

AIM

The aim of this project is to analyze the implication of Wnt/ β -catenin signaling in colorectal cancer development and show the most promising therapies targeting this pathway.

MATERIALS AND METHODS

This scientific review has been achieved using books and articles obtained from ScienceDirect, Scopus and Pubmed databases. Articles were selected according to their <u>publication date</u>, even if some of them are older but very relevant, and the journal impact factor, although articles about therapy has lower impact factor because consist in researches paid by private institutions. Main keywords: colorectal cancer, Wnt pathway, 6-cat, EphB, ephrinB, cryptogenesis, cancer stem cells, colorectal cancer therapy, Wnt inhibition.

COLON CRYPTS

Maintenance of colonic mucosa is given by two processes regulated by Wnt/β-cat pathway: **cell** production⁵ within a crypt by proliferating stem cells and **new crypt production**⁶ by fission.

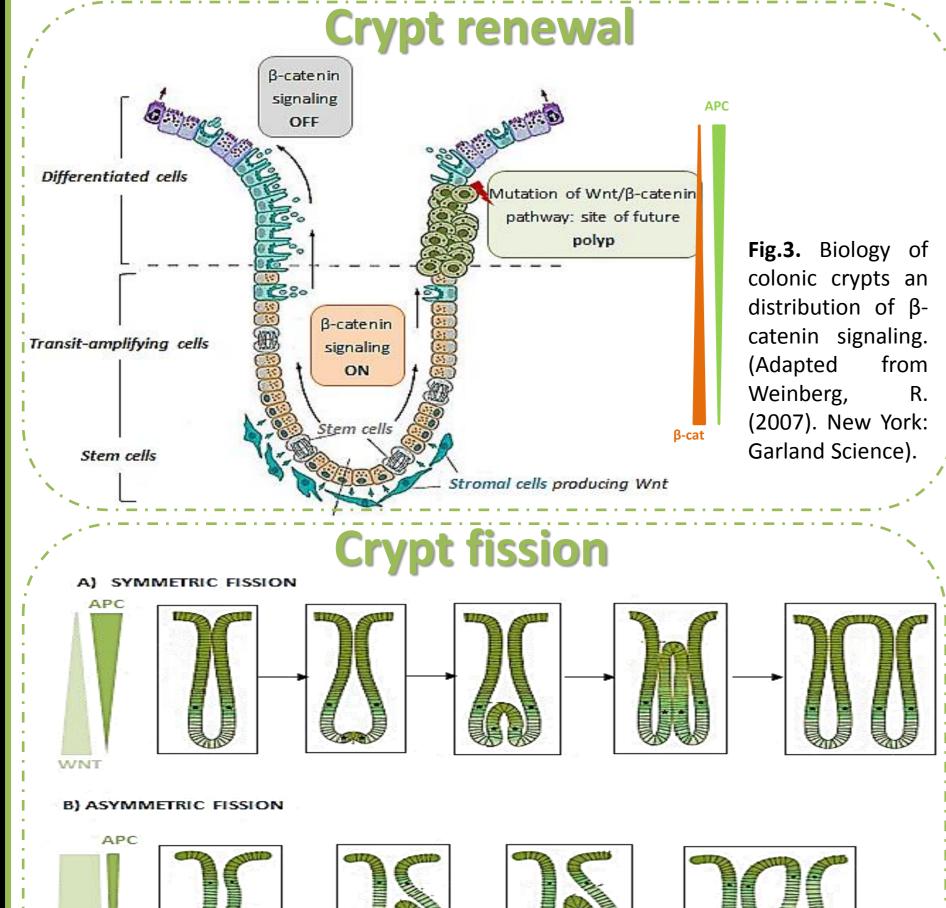


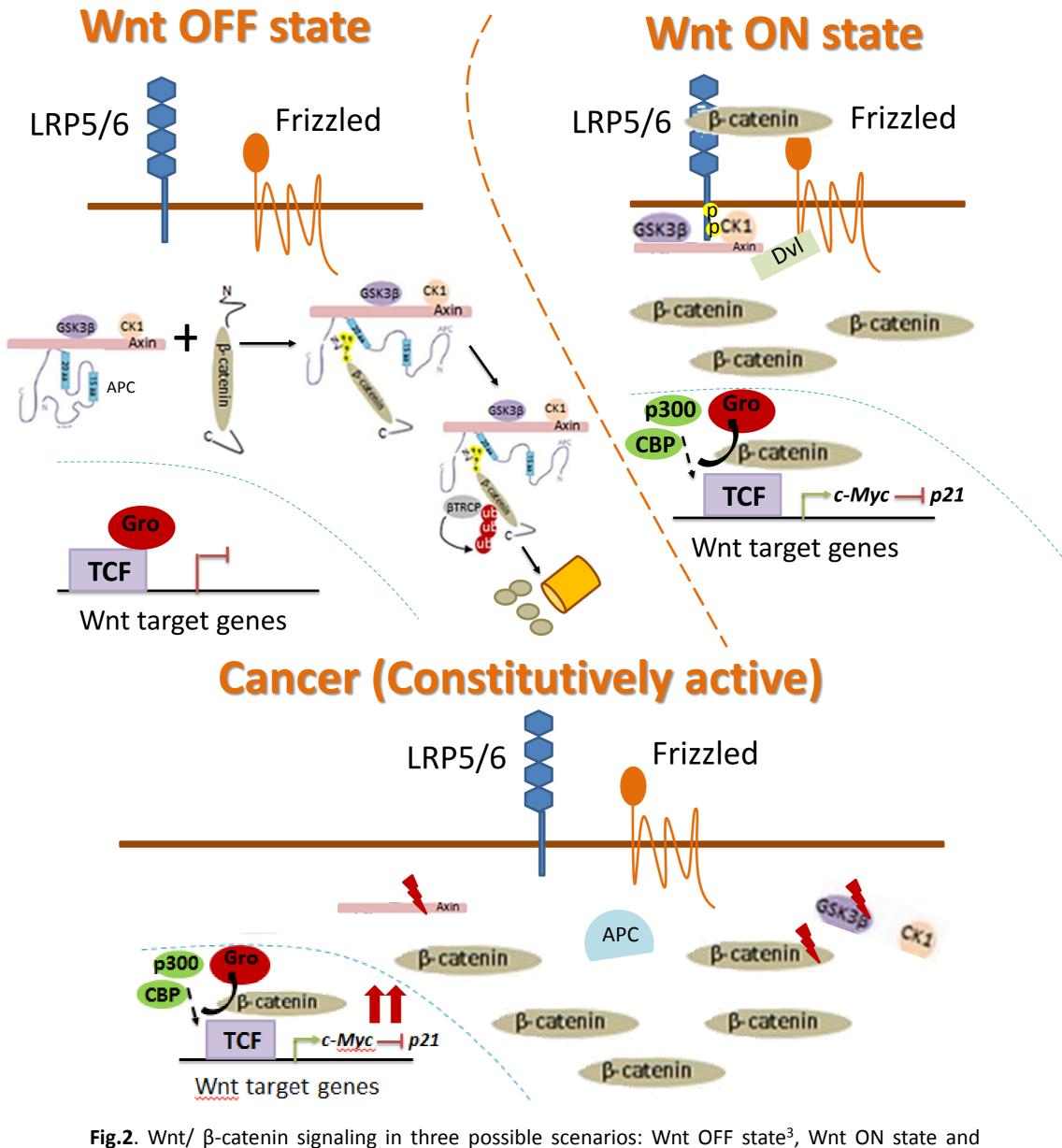
Fig.4. Normal (A) and aberrant (B) crypt fission. A. (Adapted from Boman, B. & Fields, J.

THERAPEUTIC STRATEGIES

(2013). Front. Oncol., 3, 244).

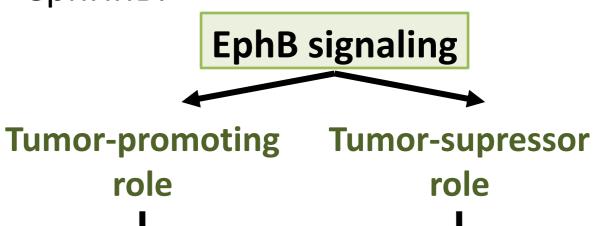
WNT/β-CATENIN PATHWAY

Wnt/ β -catenin pathway is involved in important processes like **SC** maintenance, cell proliferation, survival and differentiation.²



EPHB-EPHRIN B SIGNALING

β-cat/TCF also regulates comparmentalization migration of cells along the ephring crypt by promoting expression of EphB receptors and inhibiting ephrinB.⁷

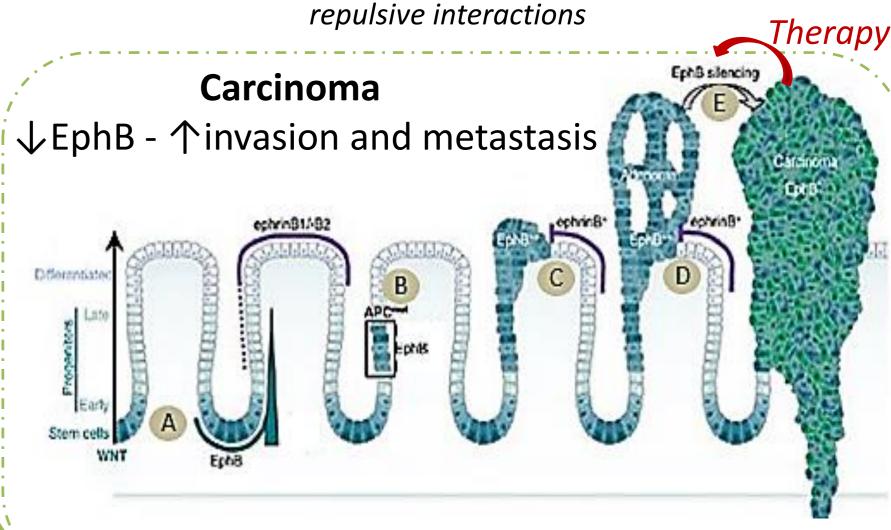


↑cell proliferation

个cyclinD1

↓cell migration · EphB – ephrin B

colon crypts. (Adapted from recruiting E-cadherin Peifer, M. (2002). Nature, 420 (6913), 274-276).

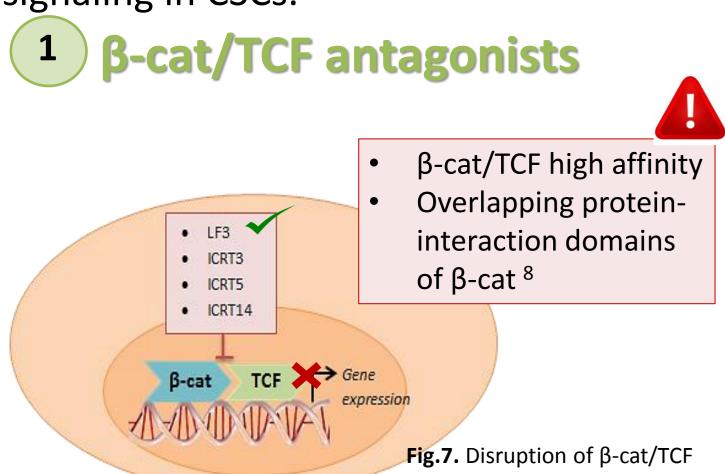


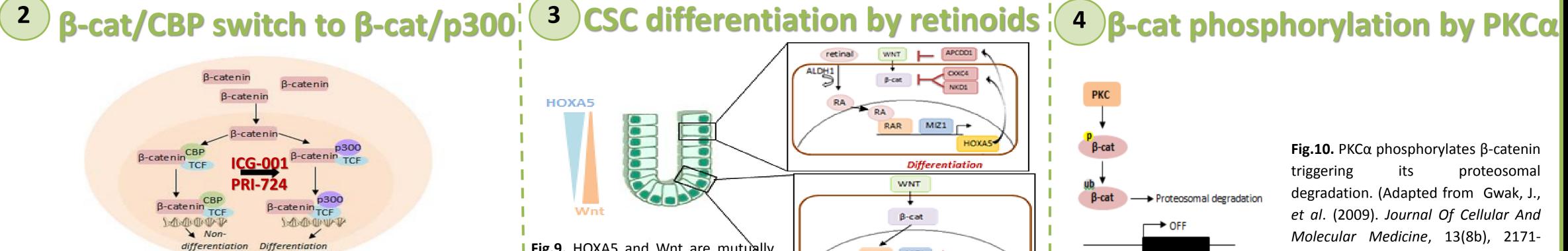
- ephrin B signaling involved in CRC invasion and metastasis. (Adapted from Merlos-Suárez, A. & Batlle, E. (2008). Current Opinion In Cell Biology, 20(2), 194-200).

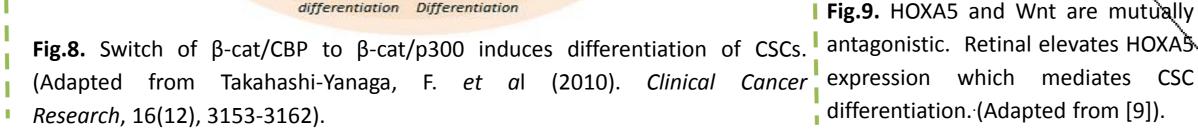
> Indiscriminated inhibition has devastating effects.

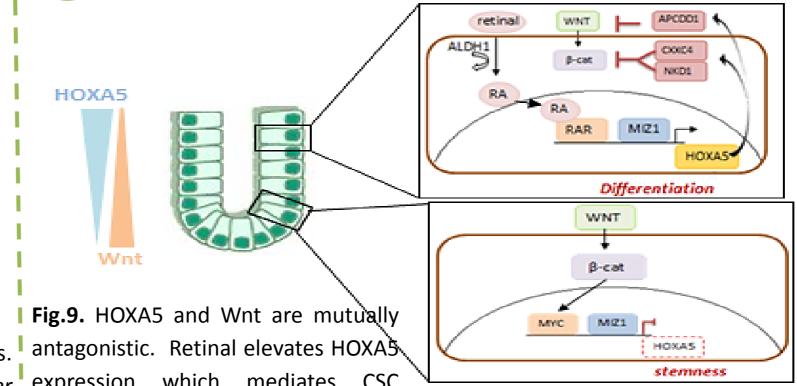
Resistance to conventional therapeutics is caused by presence of cancer stem cells (CSCs) and optimal therapies are those that target this population. Current treatment consists in surgical intervention along with chemotherapy and radiotherapy but it cannot kill all CSC. Therefore, there is a great interest in developing strategies targeting selectively Wnt signaling in CSCs.

constitutively active state due to mutations of pathway components resulting in cancer. 4









differentiation. (Adapted from [9]).

Fig. 10. PKC α phosphorylates β -catenin degradation. (Adapted from Gwak, J., et al. (2009). Journal Of Cellular And Molecular Medicine, 13(8b), 2171-

CONCLUDING REMARKS

- Wnt/β-catenin pathway controls maintenance of colon crypts production and renewal by inducing SC proliferation. Thus, its alterations are responsible of CRC initiation and progression.
- Wnt pathway also regulates cell positioning along the crypts by controlling EphB-ephrinB expression. EphB signaling inhibition during transition to carcinoma induces tumor invasion and metastasis.
- There are promising current research strategies that target Wnt signaling. However, there is still much work to do in order to downregulate Wnt pathway specifically in CSCs, preventing tumor progression and cancer relapse after treatment.

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