Genotyping of rs12997 SNP in binding site of let-7b miRNA in colorectal cancer

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Abstract

The current study aims to Genotyping of rs12997 SNP in binding site of let-7b miRNA in ACVR1 gene using PCR-sequencing, the results found the percentage of deletion mutation in patient was 66.66% while in control group 3.7 % in highly significant differences, other study characteristic non- significantly association with rs12997 belong to the gender the deletion mutation was higher in male 41.66% than female 25%, the percentage of deletion mutation was a same percentage (10.41%) in both in Adenocarcinoma and Mucinous adenocarcinoma, in cancer grade the highest percentage was observed in well differentiated (37.5%) and moderate differentiated (29.16%), the deletion mutation appeared in all grades of lymph node metastases, in the N0 (31.25%), N1 (14.58 %) , N2 (8.33%), N1b (2.08%), N2b (6.25%) and N2a (4.16%). the highest percentage of deletion mutation observed in III and I (20.83%) , and in II ,IIA and IIIb (6.25%) , According to metastasis the M1 deletion mutation was (4.16%) while in the Mx the deletion mutation was (2.08%) , non-sig association abserved between genotypes (CT, CC, and TT) between patients and control (p 1.3333, 0.3811) and also non- significant association with cancer characteristic in current study. The findings concluded that the deletion mutation was strong association with colorectal cancer but genotypes didn't effecte in colorectal cancer characteristics.

Keywords

Genotyping, rs12997 SNP, binding site, let-7b miRNA, colorectal cancer.

The miRNAs classified in cancer by researchers to two types including oncogene (oncomiRNA) and tumor suppressor miRNA (TSmiRNA). The OncomiRNAs have an oncogenic features target tumor suppressor genes while TSmiRNAs have a tumor-suppressive role by oncogenes targeting. The excessive production of oncomiRNAs cusses' elevation cell proliferation and inhibition in apoptosis processing, meanwhile TSmiRNAs down regulation lead to tumor development acceleration (Iorio et al., 2012). The un controlled production of some miRNAs have been found to be associated with different types of cancer (Calin et al., 2002). Investigation found more than 11.5 million SNPs that found in every 100-300 bp that located in coding and non-coding sequences but in high

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percentage in the UTRs, with a minor allele frequency of >1% (MAF > 1%). SNPs can be effected in gene expression, types of proteins and in different gene regulation processing (Cargill et al., 1999; Altshuler et al., 2005; Guo et al., 2013; Sukhumsirichart et al., 2018). the gene expression can be affected by SNPs in the UTR by disrupting miRNA binding, protein- mRNA interactions and polyadenylation (Schwerk et al., 2015; Steri et al., 2018). The deregulation of genes are the main mechanisms by which cells can develop to malignancy, this is while a large proportion of genes that implicate in cancers are regulated by miRNAs that bind to 3-UTRs region of them (Skeeles et al., 2013). The current study aims to detect on of an important microRNA binding site of let-7 b and its

association with colorectal cancer in some Iraqi cases.

Methodology

A case control study was designed to study association binding site variation of microRNA let-7 b with some Iraqi colorectal cancer. 49 colorectal cancer cases and 27 healthy individuals were enrolled in current study. The Histopathology test and diagnosis were implemented in the Alhasanin lab by Dr. liwaa Al-Kelabi. The DNA was isolation from embedded tissue by DNA extraction kit, the rs12997 was detected by PCR-sequencing using f-AAATGTTGGCTGCGTACTCC and r-TGTCACGTGGGTAATGGCTA to produce 398 bp at TM 58 ϵ C. then products were sequenced by genetic analyzer. Data analyzed using x2 test and odd ratio at p value less than 0.05.

Results and discussion



Figure (1) the electrophoresis pattern of rs12997 amplification in study groups, M DNA ladder (100-1000bp), lanes 1-6 amplification target SNP in patients, lanes 7-13 amplification target SNP in control group, sample 8 referred to deletion

mutation in study groups. Amplification product 398 bp.

The results of rs12997 SNP genotyping showed that the Polymerase chain reaction product about (398 bp) for both cancer patients and control group as shown in Figure (1).

The result of rs12997 genotyping shows three genotyping, the wild type homozygotes CC and TT, and the mutant heterozygote genotyping CT, as shown in Figure (2).

According to the projection, the genome contains up to 11.5 million SNPs, most of which are located in UTRs. These SNPs are predicted to occur every 100–300 base pairs and have a minor allele frequency (MAF) of >1% (MAF > 1%). There are two types of SNPs in the coding region: synonymous and non-synonymous, which do not change the order of amino acids. Non-coding regulatory SNPs (rSNPs) can affect gene expression by modifying mRNA splicing/degradation and promoter function (Sukhumsirichart et al., 2018; Altshuler et al., 2005; Guo et al., 2013). As a result,

each specific SNP in a gene may have a unique impact on pathophysiology. Given that genetic variants and SNPs in the 3'-UTR can alter gene expression by interfering with miRNA binding, polyadenylation, and protein-mRNA interactions, the functional impact of these SNPs has received excessive attention (Steri et al., 2018).



Figure (2) the histograms of rs12997 sequences in study groups (homozygotes CC and TT, heterozygote CT)

The deletion mutation was observed in both patient and control group, the percentage of deletion mutation in patient was 66.66% while in control group 3.7 % the remain sample that observed the normal gene without deletion was 33.33% in patient and 96.29% in control group, there is statistically differences between normal and deletion mutation in the study group. Figure (3)



■ patients ■ control Figure (3) the percentage of deletion mutation (rs12997) in study group (X2, p <0.05).

Numerous tumors have been linked to the abnormal expression of miRNAs, it has been shown. For the first time, Calin et al. showed in 2002 that down regulation of MIR-15a/16-1 is related to chronic lymphocytic leukemia (Calin et

al., 2002).

The result shows the distribution of deletion mutation in rs12997 according to the gender deletion mutation was higher in male 41.66% than female 25%, while the normal also higher in male 22.91% than female 10.41%, and there are not significantly differences in the study group, Figure (4).







The identification of an mRNA by a miRNA is mostly based on its seed sequence, which consists of nucleotides 2-7. A number of studies have also demonstrated that SNPs in the 3'-UTR of an mRNA can affect the functions of miRNAs by altering the secondary structure of the 3'-UTR and thermodynamic characteristics of the hybridization upsetting miRNA recognition elements site. (MREs), reducing binding yield, and possibly creating new sites or increasing binding efficiency between miRNA and the target site (Landi et al., 2008). A miRNA's 3'-UTR is also released when a binding site is broken, which increases the miRNA's bioavailability and causes it to bind to each of its 200 anticipated targets. Numerous studies have demonstrated that 3'- UTR-located SNPs can be interesting candidates for the disease susceptibility, assessment of the development of a precision medicine strategy, and the observation of cancer patients in clinical settings (Ding et al., 2018; Ryan et al., 2010). We describe the miRNA binding site polymorphism in inflammatory genes linked to CRC in the following from two perspectives: a detailed look at the past with a literature review and a peep at the future with a bioinformatics analysis to recommend miRSNPs for subsequent investigations.

The two sub- types of colon cancer were investigated in this study the Mucinous adenocarcinoma and Adenocarcinoma, according to the result of analysis the percentage of deletion mutation was same percentage (10.41%) in both in Adenocarcinoma and Mucinous adenocarcinoma, while in Adenocarcinoma the normal region without deletion was higher (56.25%), in the Mucinous adenocarcinoma the normal region was (22.91%) and there were no significant differences among two type, Figure (5).





The result of distribution of deletion mutation in cancer grade, in the well differentiated the percentage of normal (without deletion) was 18.75%, while the percentage of deletion mutation was 37.5%, in the midrate differentiated the percentage of normal 10.41% while the percentage of deletion mutation was 29.16%, in both Poor differentiated and high grad of colon cancer the deletion mutation disappeared and the normal percent was appearance in the same percentage 2.08% and there were no significant differences observed among grade of colon cancer, as shown in (Figure 6), by comparing the percentage of deletion mutation in all grade of colon cancer the percentage of deletion mutation from highest percentage observed in both well was differentiated(37.5%) modrate and differentiated(29.16%) and absent in both poor differentiated and high grade respectively.



eletion normal
Figure (6) the percentage of deletion mutation (rs12997) in patients group according to cancer grade

The metastases of lymph node, the deletion mutation appeared in all grade of lymph node metastases, in the N0 the percentage of deletion mutation was 31.25% and 18.75% is normal, in the N1 14.58% was deletion mutation and 6.25% was normal, in the N2 8.33% was deletion and 4.16% was normal, in N1b the same percentage was observed in both deletion and normal (2.08%), in the N2b the deletion mutation was 6.25% and 2.08% was normal, in the N2a deletion mutation was 4.16% and the normal absent , by compare the percentage of deletion mutation in lymph node the highest percentage was in N0 while deletion mutation not observed in N2a , and there is no significantly differences among study group p-value ($p \ge 0.050$) Figure (7).



Figure (7) the percentage of deletion mutation (rs12997) in patients group according to lymph node

Activin A's type I receptor, commonly known as ALK2's, is ACVR1 (Renlund et al., 2007) Activins are structurally related signaling proteins that are dimeric growth and differentiation factors that are members of the TGF-superfamily. A heteromeric complex of receptor serine kinases, including at least two type I (I and IB) and two type II (II and IIB) receptors (Wu et al., 1994). These receptors are all transmembrane proteins that contain a cytoplasmic domain with predicted serine/threonine specificity, a transmembrane domain, and an extracellular domain that binds ligands and has a cysteine-rich region (Donaldson et al., 1992).

Type II receptors are necessary for binding ligands and for the production of type I receptors, whereas type I receptors are crucial for signaling. After ligand binding, types I and II receptors come together to form a stable complex, which causes type II receptors to phosphorylate type I receptors. Together with activin type II receptors, the activin A type I receptor encoded by ACVR1 signals a specific transcriptional response (Renlund et al., 2007). The majority of earlier investigations on ACVR1 revealed that this gene's mutations have been linked to the prevalence of progressive fibrodysplasia ossificans (Eresen et al., 2013). The connection between ACVR1 and cancer was only noted in two papers. Recurrent copy number increases of ACVR1 and accompanying transcript overexpression have been linked to survival in head and neck squamous cell carcinomas, according to Ambrosio et al (2011). According to Wiley et al. (2011), the

mouse lens's Acvr1 BMP receptor functions as a tumor suppressor. In the current investigation, we hypothesized that the mutation rs12997 on ACVR1 could alter its binding to miR-330-3p and result in the loss of regulation. As a result, ACVR1 with the G allele may express differently from the reference allele, indicating a relationship with the risk of CRC. According to a study, the gene ACVR1 may be crucial for tumor development (Gong et al., 2014).

The distribution of deletion mutation in the cancer stage, the highest percentage was the same in both III and I (20.83%), and also the same percent in both II ,IIA and IIIb was (6.25%), equal percentage of deletion mutation appearances in IV, IIIC and IIC as shown in Figure (8).



■deletion ■normal Figure (8) the percentage of deletion mutation (rs12997) in patients group according to stages of cancer

The deletion of particular microRNA types, such as the miR-15 and miR-16-1 cluster in mice, successfully highlighted the crucial function of these two miRNAs in tumor suppression by accurately recapitulating the symptoms associated with chronic lymphocytic leukemia seen in humans (Klein et al., 2010). The miRNA expression is dysregulated in cancer, and its signatures could be exploited for tumor categorization, diagnosis, and prognosis, according to miRNA profiling and deep sequencing results in the years that followed.

According to metastasis of cancer the result shows that in the M1 stages the higher normal region with percent (62.5%) and deletion mutation was (4.16%) while in the Mx the deletion mutation was (2.08%) and the normal was (31.25%) and no significant obseved amoung metastasis of cancer , Figuer (9).



Figure (9) the percentage of deletion mutation (rs12997) in patients group according to metastasis of cancer

Changes in genomic miRNA copy numbers and gene positions are frequently implicated as the cause of abnormal miRNA expression in malignant cells relative to normal cells (amplification, deletion or translocation). The loss of the miR-15a/16-1 cluster gene at chromosome 13q14, which is frequently seen in people with B-cell chronic lymphocytic leukemia, is the earliest identification of a miRNA gene position alteration (Calin et al., 2002). MiR-143 and miR-145's home on 5q33 are frequently deleted in lung cancer, which lowers the expression of both miRNAs (Calin et al., 2006). In contrast, miR-17-92 cluster gene amplification was seen in Bcell lymphomas (Tagawa et al., 2005) and lung cancers (Hayashita et al., 2005), as well as T-cell acute lymphoblastic leukemia (Mavrakis et al., 2010). These translocations of this cluster gene result in overexpression of these miRNAs in these tumors. High-resolution array-based comparative genomic hybridization on 227 specimens from human ovarian cancer, breast cancer, and melanoma confirmed the high frequency of genomic changes in miRNA loci (Zhang et al., 2006).

Additional genome-wide analyses showed that many miRNA genes are situated in genomic areas linked to cancer. These regions may include fragile sites or common breakpoint regions, minimal regions of loss of heterozygosity, which may contain tumor suppressor genes, minimal regions of amplification, which may also contain oncogenes (Peng and Croce, 2016).

The result of rs12997 genotyping shows three genotyping the mutant heterozygote (CT) and homozygotes (CC) and (TT) , the mutant heterozygote (CT) was higher frequency in control (20) than patient (12) while the distribution of homozygotes (CC) was in patient (1) and absent in control groups, the homozygotes (TT) higher in control (5) than patient group (3) , no significant observed between genotyping and gender as shown in Table (1).

Table (1) distribution of study groups a	ccording to rs12997	genotyping
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Genotyping Of rs10889677	Patients	Control	Odd ratio (CI95%)	Р
СТ	12	20	1.3333 0.2984 to 5.9575	1.3333
CC	1	0	4.7143 0.1467 to 151.4895	0.3811
TT	3	5		

The result of rs12997 genotyping distribution of sub type shows that the heterozygotes AT was more frequant in Adenocarcinoma (7) while homozygotes CC was (1) and TT was (3), in another subgroup Mucinous adenocarcinoma also the heterozygotes AT was more frequant (5) while homozygotes CC and homozygotes TT was not appeared (0), and there are no significant differences among sub-type, In the differentiated the mutant heterozygotes AT was most common popular ,in the stages well differentiated was (7) while in the Moderate differentiated (4) and in the high grad (1) and not appeared in Poor differentiated.as shown in Table (2).

In the colon cancer stages, the mutant heterozygotes AT was appeared in similar frequency (1) in both II, IIA, IIC and I while high frequency in both III with (5) and IIIB with(3) and absent in both IIIC and IV, the homozygotes CC was absent in all stages expect IIIB stages with (1) frequent, the homozygotes TT appeared with (2)frequent in III and also appeared with less frequent (1) in IIIB stage, and disappearances in each II, IIIC, IIA, IIC, I and IV, In the case of Metastases of Lymph node the distribution of mutant heterozygotes AT was higher in N0 with (7)frequent, in N1 and N2 was similar frequent, and (1) frequent in N1b and disappeared in both N2b and N2a, the frequencies of homozygotes CC despite lymph node

Metastases was absent in all stages expect N1 with (1) frequency and the homozygotes TT was appeared in both N0 with (2) frequency and in N2b with (1) frequent and absent in all other stages .

In the two stages of Metastases in the Mx stages the heterozygotes AT was (10) while the homozygous CC was (1) and TT was (3) while the M1 stages only the heterozygotes AT appeared (2) and the homozygous CC and TT was absent , the tumor growth in colon cancer mutant heterozygotes AT was in T2 with (4) , the homozygous CC and TT was absent , in the T3 mutant heterozygotes AT was more popular (7) , the homozygous CC was (1) and TT was (3) , In development stages T4 only the mutant heterozygotes AT was appeared (1) while the homozygous CC and TT was absent . In all distribution of genotyping with the sub-groups of colon cancer the result shows no significant differences among rs12997genotyping as shown in Table (2).

Low levels of Dicer expression or its disruption in colorectal and breast cancer encourage epithelial-tomesenchymal transition (EMT), metastasis formation, and the development of cancer stemness (Martello et al., 2010; Iliou et al., 2014). Along with its role as a haplo-insufficient tumor suppressor, Dicer has also been linked in recent studies to the promotion of CSC and metastatic activity in a variety of cancer cell lines and human tumors. HIF-1 suppresses Dicer expression by encouraging its ubiquitination and autophagymediated degradation, which prevents the maturation of known tumor suppressor miRNAs like let-7 and miRNA-200b (Lai et al., 2018).

Subjects	CT	CC	TT	Р
Sub-types				
Mucinus adeno carcinoma	5	0	0	0 1771
Adenocarcinoma	7	1	3	0.1771
Differentiation				
Well differentiated	7	1	1	
Moderate differentiated	4	0	1	0 2602
Poor differentiated	0	0	1	0.2092
High grade	1	0	0	
Stage				
III	5	0	2	
IIIB	3	1	1	
II	1	0	0	
IIIC	0	0	0	0.0555
IIA	1	0	0	0.9555
IIC	1	0	0	
Ι	1	0	0	
IV	0	0	0	
Lymph node				
NO	7	0	2	
N1	2	1	0	
N2	2	0	0	0.0500
N1b	1	0	0	0.2599
N2b	0	0	1	
N2a	0	0	0	
Metastases				
Mx	10	1	3	0 (922
M1	2	0	0	0.0832

Table (2) distribution of patient sub- groups according to rs12997 genotyping

A subset of RBPs, as opposed to Dicer1, DGCR8, and AGO RBPs, can compete with or inhibit miRNA-mediated mRNA silencing by binding sequences at or close to miRNA recognition elements. Let-7 (and other miRNAs) maturation and subsequent silencing of target mRNAs are mediated by let-7 (and other miRNAs) RBPs (MREs) (van Kouwenhove, et al., 2011) The suppression of let-7 expression and function, as well as how Lin28A and Lin28B (together known as Lin28) affect stem cell maintenance, metabolism, and cancer, are the most well-known effects of these (Viswanatha et al, 2009; Cho et al., 2012; Shyh-Chang et al., 2013). Two closely similar RBPs and proto-oncogenes called Lin28A and Lin28B bind to the let-7 precursor (prelet-7) and prevent the miRNA-processing machinery from cleaving it, hence inhibiting let-7 synthesis through different methods (Newman et al., 2008; Piskounova, et al., 2011; Michlewski et al., 2019). Pre-let-7 is bound by Lin28B, which hinders miRNA processing in the nucleus, but Lin28A functions in the cytoplasm to attract TUT4 or TUT7, which adds a short oligo (U) stretch to the 3'-end of pre-let-7, preventing Dicer from processing it, causing pre-let-7 breakdown (Michlewski et al., 2019; Heo et al., 2009) Activation of either Lin28A or Lin28B causes the

worldwide post-transcriptional down regulation of let-7 miRNAs in many cancers, which is connected to advanced tumor stages and poor patient outcomes. Lin28A and Lin28B are aberrantly expressed in a variety of tissue malignancies (Viswanathan et al., 2009). Overall, these results imply that particular genomic areas enclosing miRNA genes may be amplified or deleted, leading to aberrant miRNA expression in malignant cells.

References

- Skeeles LE, Fleming JL, Mahler KL, Toland AE. The impact of 3' UTR variants on differential expression of candidate cancer susceptibility genes. PLoS ONE. 2013;8:e58609.
- Iorio MV, Croce CM. MicroRNA dysregulation in cancer: diagnostics, monitoring and therapeutics. A comprehensive review. EMBO Mol Med. 2012;4:143–59.
- Calin GA, Dumitru CD, Shimizu M, Bichi R, Zupo S, Noch E, et al. Frequent deletions and down-regulation of micro-RNA genes miR15 and miR16 at 13q14 in chronic lymphocytic leukemia.
- Proc Natl Acad Sci USA. 2002;99:15524–9. Cargill M, Altshuler D, Ireland J, Sklar P, Ardlie K, Patil N, et al. Characterization of single-nucleotide polymorphisms in coding regions of human genes. Nat Genet. 1999;22:231.
- Sukhumsirichart W. Polymorphisms. In Genetic Diversity and disease susceptibility. IntechOpen. 2018;76:728.

- Altshuler D, Donnelly P, Consortium IH. A haplotype map of the human genome. Nature. 2005;437:1299.
- Guo L, Du Y, Chang S, Zhang K, Wang J. rSNPBase: a database for curated regulatory SNPs. Nucleic Acids Res. 2013;42(D1): D1033–D9.
- Steri M, Idda ML, Whalen MB, Orrù V. Genetic variants in mRNA untranslated regions. Wiley Interdiscip Rev: RNA. 2018;9:e1474.
- Schwerk J, Savan R. Translating the untranslated region. JImmunol. 2015;195:2963–71.
- Sukhumsirichart W. Polymorphisms. In Genetic Diversity and disease susceptibility. IntechOpen. 2018;76:728.
- Mullany LE, Herrick JS, Wolff RK, Slattery ML. Single nucleotide polymorphisms within MicroRNAs, MicroRNA targets, and MicroRNA biogenesis genes and their impact on colorectal cancer survival. Genes Chromosomes Cancer. 2017 Apr;56(4):285-295. doi: 10.1002/gcc.22434. Epub 2017 Jan 25. PMID: 27859935; PMCID: PMC6007859.
- Altshuler D, Donnelly P, Consortium IH. A haplotype map of the human genome. Nature. 2005;437:1299.
- Guo L, Du Y, Chang S, Zhang K, Wang J. rSNPBase: a database for curated regulatory SNPs. Nucleic Acids Res. 2013;42(D1):D1033–D9. <u>PubMed PubMed</u> <u>Central Article CAS Google Scholar</u>
- Steri M, Idda ML, Whalen MB, Orrù V. Genetic variants in mRNA untranslated regions. Wiley Interdiscip Rev: RNA. 2018a;9:e1474.
- Landi D, Gemignani F, Naccarati A, Pardini B, Vodicka P, Vodickova L, et al. Polymorphisms within micro-RNAbinding sites and risk of sporadic colorectal cancer. Carcinogenesis. 2008;29:579–84.
- Ding H-X, Lv Z, Yuan Y, Xu Q. MiRNA polymorphisms and cancer prognosis: a systematic review and metaanalysis. Front Oncol. 2018;8:596. <u>PubMed PubMed</u> <u>Central Article Google Scholar</u>
- Ryan BM, Robles AI, Harris CC. Genetic variation in microRNA networks: the implications for cancer research. Nat Rev Cancer. 2010;10:389
- Renlund N, O'Neill FH, Zhang L, Sidis Y, Teixeira J. Activin receptor-like kinase-2 inhibits activin signaling by blocking the binding of activin to its type II receptor. J Endocrinol. 2007; 195: 95–103.
- Wu TC, Jih MH, Wang L, Wan YJ. Expression of activin receptor Iland IIB mRNA isoforms in mouse reproductive organs and oocytes.Mol Reprod Dev. 1994;38:9–15.
- Donaldson CJ, Mathews LS, Vale WW. Molecular cloning andbinding properties of the human type II activin receptor. BiochemBiophys Res Comm. 1992; 184: 310–6.
- Eresen Yazicioglu C, Karatosun V, Kizildag S, Ozsoylu D, KavukcuS. Acvr1 Gene mutations in four Turkish patients diagnosed asfibrodysplasia ossificans progressiva. Gene. 2013; 515 :444–6.
- Wiley LA, Rajagopal R, Dattilo LK, Beebe DC. The tumor suppressor gene TRP53 protects the mouse lens against posterior subcapsularcataracts and the bmp receptor ACVR1 acts as a tumor suppressor in the lens. Disease Models Mech. 2011; 4: 484–95.
- Ambrosio EP, Drigo SA, Bergamo NA, Rosa FE, Bertonha FB, deAbreu FB, et al. Recurrent copy number gains of ACVR1 andcorresponding transcript overexpression are associated with survivalin head and neck squamous cell carcinomas. 2011;59:81–9.

Gong, Jing; Shen, Na; Zhang, Hong-Mei; Zhong, Rong; Chen,

Wei; Miao, Xiaoping; Guo, An-Yuan (2014). A genetic variant in microRNA target site of TGF-8 signaling pathway increases the risk of colorectal cancer in a Chinese population. Tumor Biology, 35(5), 4301–4306. doi:10.1007/s13277-013-1562-9.

- Klein U, Lia M, Crespo M, Siegel R, Shen Q, Mo T et al. The DLEU2/miR-15a/16-1 cluster controls B cell proliferation and its deletion leads to chronic lymphocytic leukemia. *Cancer Cell* 2010; **17**: 28–40.<u>Return to ref 9 in article</u>
- Calin GA, Croce CM . MicroRNAs and chromosomal abnormalities in cancer cells. *Oncogene* 2006; **25**: 6202– 6210. <u>CAS PubMed Google Scholar</u>
- Calin GA, Sevignani C, Dumitru CD, Hyslop T, Noch E, Yendamuri S et al. Human microRNA genes are frequently located at fragile sites and genomic regions involved in cancers. *Proc Natl Acad Sci USA* 2004; **101**: 2999–3004.
- Calin GA, Dumitru CD, Shimizu M, Bichi R, Zupo S, Noch E et al. Frequent deletions and down-regulation of micro-RNA genes miR15 and miR16 at 13q14 in chronic lymphocytic leukemia. *Proc Natl Acad Sci USA* 2002; **99**: 15524–15529.
- Tagawa H, Seto M . A microRNA cluster as a target of genomic amplification in malignant lymphoma. *Leukemia* 2005; **19**: 2013–2016. <u>CAS PubMed Google</u> <u>Scholar</u>
- Hayashita Y, Osada H, Tatematsu Y, Yamada H, Yanagisawa K, Tomida S et al. A polycistronic microRNA cluster, miR-17-92, is overexpressed in human lung cancers and enhances cell proliferation. *Cancer Res* 2005; **65**: 9628–9632. <u>CAS PubMed Google Scholar</u>
- Mavrakis KJ, Wolfe AL, Oricchio E, Palomero T, de Keersmaecker K, McJunkin K et al. Genome-wide RNAmediated interference screen identifies miR-19 targets in Notch-induced T-cell acute lymphoblastic leukaemia. *Nat Cell Biol* 2010; **12**: 372–379.<u>CAS PubMed PubMed Central Google Scholar</u>
- Zhang L, Huang J, Yang N, Greshock J, Megraw MS, Giannakakis A et al. MicroRNAs exhibit high frequency genomic alterations in human cancer. *Proc Natl Acad Sci* USA 2006; 103: 9136–9141. <u>CAS PubMed PubMed</u> <u>Central Google Scholar</u>
- Peng, Y., Croce, C. The role of MicroRNAs in human cancer. Sig Transduct Target Ther 1, 15004 (2016). https://doi.org/10.1038/sigtrans.2015.4
- Martello, G.; Rosato, A.; Ferrari, F.; Manfrin, A.; Cordenonsi, M.; Dupont, S.; Enzo, E.; Guzzardo, V.; Rondina, M.; Spruce, T.; et al. A MicroRNA targeting dicer for metastasis control. Cell 2010, 141, 1195–1207. [CrossRef]
- Iliou, M.S.; da Silva-Diz, V.; Carmona, F.J.; Ramalho-Carvalho, J.; Heyn, H.; Villanueva, A.; Munoz, P.; Esteller, M. Impaired DICER1 function promotes stemness and metastasis in colon cancer. Oncogene 2014, 33, 4003– 4015. [CrossRef].
- Lai, H.H.; Li, J.N.; Wang, M.Y.; Huang, H.Y.; Croce, C.M.; Sun, H.L.; Lyu, Y.J.; Kang, J.W.; Chiu, C.F.; Hung, M.C.; et al. HIF-1alpha promotes autophagic proteolysis of Dicer and enhances tumor metastasis. J. Clin. Investig. 2018, 128, 625–643. [CrossRef][PubMed]
- van Kouwenhove, M.; Kedde, M.; Agami, R. MicroRNA regulation by RNA-binding proteins and its implications for cancer. Nat. Rev. Cancer 2011, 11, 644–656. [CrossRef]
- Viswanathan, S.R.; Powers, J.T.; Einhorn, W.; Hoshida, Y.; Ng, T.L.; Toffanin, S.; O'Sullivan, M.; Lu, J.; Phillips, L.A.; Lockhart, V.L.; et al. Lin28 promotes transformation and is associated with advanced human malignancies. Nat. Genet. 2009, 41, 843–848.

[CrossRef]

- Cho, J.; Chang, H.; Kwon, S.C.; Kim, B.; Kim, Y.; Choe, J.; Ha, M.; Kim, Y.K.; Kim, V.N. LIN28A is a suppressor of ERassociated translation in embryonic stem cells. Cell 2012, 151, 765–777. [CrossRef] [PubMed].
- Shyh-Chang, N.; Daley, G.Q. Lin28: Primal regulator of growth and metabolism in stem cells. Cell Stem Cell 2013, 12, 395–406. [CrossRef]
- Newman, M.A.; Thomson, J.M.; Hammond, S.M. Lin-28 interaction with the Let-7 precursor loop mediates regulated microRNA processing. RNA 2008, 14, 1539–1549. [CrossRef]
- Piskounova, E.; Polytarchou, C.; Thornton, J.E.; LaPierre, R.J.; Pothoulakis, C.; Hagan, J.P.; Iliopoulos, D.; Gregory, R.I. and Lin28B inhibit let-7 microRNA biogenesis by distinct mechanisms. Cell 2011, 147, 1066–1079. [CrossRef].
- Michlewski, G.; Caceres, J.F. Post-transcriptional control of miRNA biogenesis. RNA 2019, 25, 1–16. [CrossRef] [PubMed]
- 62. Heo, I.; Joo, C.; Cho, J.; Ha, M.; Han, J.; Kim, V.N. Lin28 mediates the terminal uridylation of let-7 precursor MicroRNA. Mol. Cell 2008, 32, 276–284. [CrossRef] [PubMed].
- Viswanathan, S.R.; Powers, J.T.; Einhorn, W.; Hoshida, Y.; Ng, T.L.; Toffanin, S.; O'Sullivan, M.; Lu, J.; Phillips, L.A.; Lockhart, V.L.; et al. Lin28 promotes transformation and is associated with advanced human malignancies. Nat. Genet. 2009, 41,

843–848. [CrossRef]

Heo, I.; Joo, C.; Kim, Y.K.; Ha, M.; Yoon, M.J.; Cho, J.; Yeom, K.H.; Han, J.; Kim, V.N. TUT4 in concert with Lin28 suppresses

microRNA biogenesis through pre-microRNA uridylation. Cell 2009, 138, 696–708. [CrossRef] [PubMed]