



热休克蛋白gp96在恶性肿瘤中的研究进展*

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摘要 热休克蛋白90B1又称为糖蛋白96(gp96). gp96属于热休克蛋白90家族, 是一种高度保守且普遍存在的糖蛋白. 作为一种内质网蛋白, gp96在维持内质网稳态、内质网应激、钙稳态等方面起着重要的调控作用, 这些调控网络在肿瘤的发生发展过程中起着重要的作用. gp96作为分子伴侣在稳定和激活客户蛋白等方面有众多报道, 其中包括HER2、整合素和Toll样受体等多个客户蛋白. 大量研究表明, gp96在肝癌、乳腺癌、胃癌等不同类型的肿瘤中高表达, 并在肿瘤的生长、侵袭和转移等方面起着重要的作用. 本文从gp96的基本结构和功能及其在肿瘤发生发展中的作用等方面进行综述, 并着重阐述细胞膜gp96相关的研究进展. 最后, 重点介绍基于胞膜gp96结构所设计的选择性小分子抑制剂、抗体和多肽等药物在肿瘤靶向治疗中的潜在应用.

关键词 热休克蛋白gp96, 分子伴侣, 胞膜gp96, 肿瘤, 靶向治疗

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热休克蛋白(heat shock proteins, HSPs)又称应激蛋白, 是一大类分子伴侣蛋白, 在外界不利因素(如温度变化、缺氧、营养缺乏、毒素暴露、细胞因子释放、生理和心理压力等)刺激下迅速合成, 用以保护信号蛋白不被过早激活并保证蛋白质的正确折叠, 是一类具有广泛功能的蛋白质. 1962年, Ritoosa等^[1]第一次通过高温刺激的方式, 在果蝇幼虫唾液腺中, 发现某些基因的表达会异常活跃, 这些基因表达的蛋白质分子质量大多在26~70 ku, 因此得名热休克蛋白. 后来发现热休克蛋白几乎存在于所有生物体中, 根据分子质量的不同, 将其分为HSP110、HSP90、HSP70、HSP60、HSP40和小分子热休克蛋白(sHSPs), 它们在不同物种中基因核苷酸序列和蛋白质氨基酸序列高度同源. HSPs最重要的功能之一是作为主要分子伴侣参与新合成蛋白质的正确折叠, 帮助蛋白质在应激损伤后进行复性, 维持蛋白质的构象和稳定性^[2-3]. 此后, 随着研究的不断深入, 又证明了HSP90在多种疾病模型中有重要研究价值, 包括癌症、朊病毒疾病以及自身免疫病等^[3-7].

HSP90家族包括4种亚型: 胞质HSP90 α 和HSP90 β 、线粒体TRAP1(tumor necrosis factor-associated protein 1)和gp96(glycoprotein 96). 它们的长度分别为732、724、704和803个氨基酸^[8-9]. 热休克蛋白gp96, 又名GRP94(94-ku glucose-regulated protein)、HSP90B1(heat shock protein 90B1)、CaBP4(calcium binding protein 4)、TRA1(tumor rejection antigen 1)或ERp99(endoplasmic reticulum protein 99)等, 是HSP90家族的内质网成员^[10]. 它与细胞胞浆内对应的HSP90有50%的同源性. 人的gp96基因位于12号染色体上, 编码803个氨基酸. 该蛋白质具有一个由21个氨基酸组成的信号肽, 该肽段被共反式切割, N端有潜在糖基化位点, C端包含内质网驻留

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序列KDEL, 并包含4个钙高亲和力结合位点和11个钙低亲和力结合位点^[10-12]. gp96在几乎所有的细胞类型中都有组成性表达, 并且与另一个重要的内质网驻留伴侣grp78在转录上共同调节^[13]. 它的表达在干扰素和各种干扰内质网功能的应激刺激下发生上调, 如葡萄糖饥饿、内质网钙储存减少、糖基化阻断、还原环境、蛋白酶体抑制以及错误折叠蛋白的过度累积^[14-18]. gp96参与了多个细胞过程, 包括细胞生长、细胞周期调控、激素信号传导和细胞凋亡等重要生理过程^[10-13]. 同时, 多项研究表明, gp96的过表达与多种病理状态相关, 如癌症、病毒感染、炎症、神经退行性疾病和自身免疫性疾病等, 提示gp96可能在多种疾病发生发展机制中起重要作用^[3-7]. 本文将概述gp96蛋白作为分子伴侣和药物设计靶点在肿瘤发生发展、转移过程中的重要功能.

1 gp96的结构域及其分子伴侣功能

HSP90是最丰富的热休克蛋白, 约占细胞总蛋

白质的1%~2%. HSP90以同源二聚体的形式存在, 每个结构域执行特定的功能, 同时又会相互影响. gp96主要存在3种构象: 伸展构象或椅状构象、较少伸展构象和闭合或扭曲V构象^[19]. 同HSP90家族其他成员类似, gp96蛋白构象处于动态变化中, 当gp96与核苷酸、共伴侣分子或客户蛋白结合时构象转换为闭合二聚体状态^[20-21]. 每个单体分子分别由3个基础结构域所组成, 包含N端结构域(N-terminal domain, NTD)、C端结构域(C-terminal domain, CTD)和中间结构域(middle domain, MD)^[21]. 在真核生物中, 有一个可变的铰链区连接子结构(the charged linker region, CR)将NTD连接到MD区域. CTD负责蛋白质的二聚化, 而NTD通过结合ATP可发生短暂的二聚化. gp96的CTD中含有一段帮助其滞留在内质网上的特殊多肽基序, 即KDEL序列^[8-9, 21]. 人类HSP90家族的NTD从结构上看与酵母的HSPs区域非常相似, 有一个高度保守的ATP结合区域, 这其中包含GHKL超家族结构(回旋酶、HSP90、组氨酸激酶和MutL)^[21]. gp96的结构和功能如图1所示.

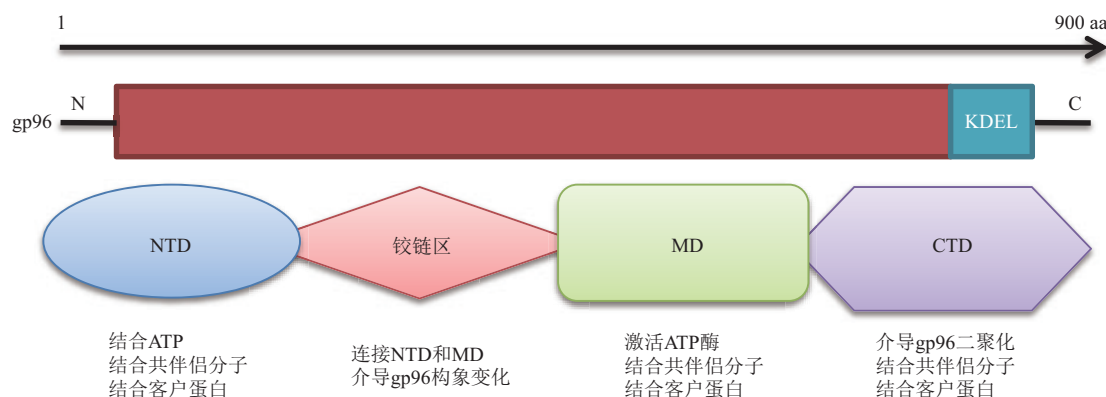


Fig. 1 The domain structure and function of gp96^[21]

图1 热休克蛋白gp96的结构和功能示意图^[21]

图中编号1~900为氨基酸序列. gp96蛋白由803个氨基酸组成. 图中显示了gp96的内质网保留基序KDEL序列. 图片下方的图形和注释代表gp96的亚结构单位及其生物学功能.

1.1 N端结构域

gp96的NTD包含从信号肽到蛋白质第337个氨基酸的区域, 该区域与HSP90高度同源. NTD是HSP90家族的主要ATP酶结构域, 属于GHKL超家族, 与组氨酸激酶、回旋酶和拓扑异构酶具有高度的结构相似性^[20-21]. NTD的核心区域有一段被称为“盖子(lid)”的结构, 这个结构与ATP的结合相

关, 包含两个螺旋之间的5个额外残基^[19, 21-22]. 目前, NTD已被用于HSP90家族抑制剂的主要靶点, 如格尔达那霉素(geldanamycin, GDA)和镭射醇(radicalol, RD), 这些天然产物抑制剂与ATP竞争结合NTD中的ATP结合区. 镭射醇不仅可以抑制gp96蛋白与ATP结合, 还可以阻止gp96与多肽结合和聚集^[23-24]. 此外, gp96 NTD ATPase活性受

CTD调节,这可能与蛋白质的二聚化有关,因为CTD可以被胱氨酸桥取代^[25-26].Huck等^[27]的实验结果证明,在gp96的N端结构之前存在一个pre-N结构域(pre-N domain),该区域高度保守,且不存在于其他HSP90成员中.研究进一步发现,pre-N结构对gp96的客户蛋白的成熟至关重要,是ATP水解和NTD二聚体闭合的重要调节器,通过该结构与多肽的结合,模拟gp96与客户蛋白之间的相互作用,这些都为验证gp96对客户蛋白成熟的影响提供有力的数据支持.

1.2 中间结构域

gp96的MD与其他HSP90家族成员高度同源.目前,关于MD相关功能的报道较少.这些研究主要集中于MD与NTD结合来调节ATP酶活性、作为与客户蛋白的结合位点以及激活客户蛋白功能等方面^[28-30].Huai等^[28]认为, gp96的MD可以与Aha1等共伴侣蛋白结合,同时可以与部分客户蛋白相互作用.Rutz等^[29]集中关注了HSP90的MD中一个高度保守的色氨酸残基W300.这个残基位于客户蛋白结合位点附近,在HSP90晶体结构外侧的明显位置.他们的研究表明W300残基可以促进糖皮质激素受体-配体(glucocorticoid receptor-ligand binding domain, GR-LBD)形成正确的构象.他们认为, W300残基不直接参与客户蛋白的结合,但可以作为一个分子开关点,在gp96与客户蛋白的结合与加工过程中,或是在促进特定的构象形成过程中,起重要调节作用.这些报道填补了MD在结构和功能上研究的不足,从崭新的角度阐释了HSP90蛋白与客户蛋白间的相互作用关系.

1.3 C端结构域

gp96的CTD包含第595~804位氨基酸区域,与HSP90其他成员相似,CTD包含有两个关键点:一个是钙调蛋白结合位点,另一个是二聚化位点^[31-32].Soti等^[33]研究证明,HSP90家族蛋白的该结构域中,还包含一个核苷酸结合位点,该位点在N端位点被占据后打开,充当N端ATPase活性的变构调节因子.有趣的是,NTD和CTD核苷酸结合位点对其配体表现出不同的特异性,NTD结合位点是含有完整腺嘌呤环的腺苷酸特异性位点,如烟酰胺腺嘌呤二核苷酸和腺苷酸多聚磷酸核苷酸,而GTP和UTP核苷酸对C端结合位点具有特异性^[32-35].Wu等^[31]证明gp96的第652~678位氨基酸所形成的C端环状结构是Toll样受体(Toll-like

receptors, TLRs)和整合素(integrins)结合的关键区域(client-binding domain, CBD),该区域在gp96作为分子伴侣发挥功能的过程中起着重要作用.同时,该团队还通过特异性靶向CBD区域的多肽抑制了该区域的生物学功能.结果显示,该肽段能够显著抑制gp96整合素的相互作用,从而抑制肿瘤的侵袭和转移.他们的研究从生物化学角度丰富并拓宽了人们对gp96 CTD区域功能的认知^[32].

1.4 铰链区

真核生物HSP90家族有一个高度保守疏水性Ile-x-Leu(IxL)基序,将NTD和MD连接起来,这个短的动态区域即为铰链区^[19].gp96的铰链区更短,富含酸性氨基酸(Asp和Glu),并含多个钙结合位点并形成了一个富含赖氨酸的结构区域.gp96是一种低亲和力、高容量的钙结合蛋白,有4个中等亲和力结合位点(K_d 约为2 mmol/L),可能有11个低亲和力结合位点(K_d 约为600 mmol/L). Ca^{2+} 结合可诱导蛋白质构象变化并至少调节gp96的某些功能,包括与多肽结合活性^[30, 36].铰链区也是gp96的一个重要结构域,当ATP发生水解时,该区域可介导gp96的构象改变,因而也被认为是维持gp96基本活性的必要结构域,然而该区域目前由于难以结晶所以结构并不清楚^[19, 22-23].

gp96与其他客户蛋白或共伴侣分子相互作用的分子机制是gp96结构功能研究中的一个热点.大量研究表明, gp96可结合多种抗原多肽并参与抗原呈递和T细胞活化^[37-38],这与NTD的功能密切相关.另外,包括gp96在内的HSP90家族成员与相应的客户蛋白结合模式尚未阐明.目前,一些间接证据表明,NTD、MD和CTD均参与相互作用^[32, 39-40].由于目前为止并没有获得任何gp96与其他蛋白质或多肽结合的复合物晶体结构或冷冻电镜结构,因此其作为分子伴侣的结构基础并不完全清楚.

2 肿瘤细胞中gp96的过度表达与肿瘤的发生发展以及不良预后密切相关

Srivastava等^[41]于1986年发现热休克蛋白gp96在肿瘤细胞中呈现高表达,该团队将细胞膜和细胞质分离后,对两种组分中gp96进行了免疫源性分析,发现来源于肿瘤的gp96具有抗肿瘤的免疫原性和特异性.多项研究表明gp96在多种恶性肿瘤中存在过表达,Wang等^[42]用免疫组化方法研究了120例食管鳞癌及癌旁黏膜中HSP72蛋白和

gp96的表达情况,发现HSP72和gp96的表达与肿瘤浸润以及淋巴结转移显著相关.此后,Zheng等^[43]应用免疫组化方法,对含有胃癌、腺瘤和非肿瘤黏膜的组织进行微阵列研究,并将它们的表达与癌的临床病理学参数进行比较,证明gp96表达上调可能与胃癌的发生、发展、侵袭和转移有关,提示gp96可作为胃癌侵袭和预后不良的客观有效标志物.此后,也有研究表明原本位于内质网的gp96可锚定于细胞表面,胞膜gp96表达增加同样与肿瘤的发生发展相关^[44-45].Hou等^[46]分析了88例患者的石蜡包埋肝肿瘤标本和相应的肿瘤邻近组织后发现,肝肿瘤组织的细胞膜gp96水平明显高于癌旁组织中的细胞膜gp96水平.Yan等^[47]的实验结果也证明,相对于内质网中的gp96,细胞膜上的gp96有更高的N-聚糖含量,胞膜gp96更易与乳腺癌细胞中的表皮生长因子受体(epidermal growth factor receptor, EGFR)和表皮生长因子受体2(epidermal growth factor receptor-2, HER2)形成复合物.

同时, gp96表达与骨髓瘤、乳腺癌、胆囊癌、肝癌和大肠癌等癌症患者的肿瘤分型、不良预后和低生存率相关^[42, 46, 48-49].Chhabra等^[48]检测了gp96在浆细胞疾病和非浆细胞疾病患者的异常骨髓浆细胞(bone marrow plasma cells, BMPCs)的表达水平,发现gp96在多发性骨髓瘤(multiple myeloma, MM)患者的浆细胞中高表达, gp96的表达水平与CD138的表达水平显著相关.他们还发现,根据国际肿瘤分期系统(ISS), III期MM患者的BMPCs中gp96的表达水平高于ISS I /II期患者. gp96可作为一种新的MM诊断和预后生物标志物和治疗靶点^[49].Liu等^[50]通过免疫组化方法分析了139例乳腺癌患者中gp96蛋白的表达,结果显示, gp96蛋白在乳腺癌细胞胞浆中的表达增加,与患者年龄、肿瘤大小、淋巴结转移分类、临床分期、雌激素受体表达无明显相关性.但gp96与孕酮受体表达呈显著负相关.高表达gp96的乳腺癌患者的生存时间明显短于gp96低表达的患者,多因素分析表明gp96表达水平是乳腺癌患者生存的独立预后指标.Dejeans等^[51]的结果也表明gp96的过度表达可能是乳腺癌高侵袭和复发的标志.Chen等^[52]比较107例胆囊癌、70例胆囊腺瘤和67例慢性胆囊炎组织中gp96的表达水平,并采用单因素和多变量分析临床病理因素与患者生存率的关系,发现胆囊癌中gp96高表达的阳性率明显高于胆囊

腺瘤和慢性胆囊炎组织,多因素和Cox回归分析显示gp96阳性表达是胆囊癌预后不良的独立预测因子.Ji等^[53]用免疫组化和定量PCR法检测了正常组织和肝癌组织中gp96蛋白和mRNA表达情况,结果显示,正常肝组织gp96表达均较低,而54%的肝癌组织中gp96高表达,且gp96蛋白表达与肿瘤TNM分期和肿瘤复发相关,提示gp96是肝癌根治性切除术后肿瘤复发和总生存率的潜在和可靠的预后生物标志物.Lee等^[54]结合709例大肠癌患者肿瘤组织切片数据、病理资料发现, gp96在癌细胞中的表达水平显著高于正常细胞, gp96的表达水平与肿瘤大小和患者癌症分期密切相关.这些研究提示, gp96是根治性切除术后肿瘤复发的潜在和可靠的预后生物标志物,同时可作为潜在药物靶点.

利用基因敲除技术建立的一系列gp96条件性敲除小鼠模型,进一步阐释了gp96在肿瘤发生发展中的作用.Rachidi等^[55]构建肝脏条件性敲除gp96的小鼠肝癌模型发现, gp96 KO的小鼠肝细胞中,由于残余gp96阳性细胞发生代偿性代谢扩张,致使这类gp96阳性肝细胞更易形成肝癌.Dejeans等^[51]的实验结果也证明gp96基因敲除可降低乳腺癌细胞MDA-MB-231增殖和迁移能力,在细胞水平上验证了gp96促进乳腺癌增殖和侵袭的作用.这些直接或间接的证据均表明, gp96在肿瘤中存在过表达现象,与肿瘤的发生发展以及不良预后有着密切的关系.

3 gp96作为分子伴侣可与多个肿瘤相关分子相互作用

1992年Melnick等^[56]首次证明, gp96作为分子伴侣可以促进膜蛋白的稳定性或帮助分泌蛋白的折叠和组装.此后的数年,不断有新的客户蛋白被证实^[57-58]. gp96与其他内质网伴侣蛋白最重要的区别在于它对结合的客户蛋白具有相对严格的选择性^[57].内质网环境与细胞质环境不同,内质网是蛋白质组装和成熟的场所,因此gp96在不同的环境中会应对不同的客户蛋白^[20, 57-58].

目前,已报道的gp96客户蛋白包括Toll样受体、整合素、低密度脂蛋白受体相关蛋白6(low density lipoprotein receptor-related protein 6, LRP6)、胰岛素样生长因子(insulin-like growth factor, IGF)、结合免疫球蛋白(binding immunoglobulin protein, BiP)和糖蛋白A重复序

列 (glycoprotein A repetitions predominant, GARP) 等^[56-59] (表1). Liu等^[60]利用串联质谱方法, 从白血病前期B淋巴细胞中发现gp96与MesD (mesoderm development LRP chaperone) 蛋白有很强的互作. 多项研究表明, MesD是LRP5/6和Wnt信号通路的关键蛋白, 并在肿瘤的发生发展中起着重要的作用^[61-63]. 此外, 他们还发现, gp96可以与LRP6相互作用, LRP6和Frizzled都是细胞表面Wnt受体的共受体, 是典型Wnt信号传递所必需的. 鉴于Wnt信号通路在肿瘤研究中的重要地位, 该团队提出, gp96可以与LRP6-MesD形成复合物,

通过调节Wnt信号通路进而影响肿瘤的发生和发展^[60]. Hu等^[64]探讨gp96对恶性胶质瘤U87细胞增殖、侵袭和调控信号传导的影响, 证明了gp96通过Wnt/ β -catenin信号通路促进胶质母细胞瘤细胞的增殖. 在gp96的客户蛋白谱中, 还有一些客户蛋白与肿瘤的发展和转移有关. 这类蛋白质主要介导细胞-细胞、细胞-细胞外基质通讯, 如对细胞黏附和转移起着很重要作用的整合素^[64]. 整合素是连接细胞外基质和细胞骨架的跨膜蛋白质, 对各种生物过程如生存、增殖、凋亡、黏附、趋化、极性、分化和基因表达等都很重要^[65-66]. gp96的客户蛋白

Table 1 The known client proteins of gp96 are marked^[20, 58]
表1 目前已知的gp96客户蛋白^[20, 58]

客户蛋白	文献
胰岛素样生长因子 (insulin-like growth factors, IGF)	[67-70]
高尔基体酪蛋白激酶 (Golgi apparatus casein kinase, G-CK)	[71]
软骨寡聚基质蛋白 (cartilage oligomeric matrix protein, COMP)	[72]
甲状腺球蛋白 (thyroglobulin, Tg)	[73-74]
载脂蛋白 (apolipoprotein)	[75]
结合免疫球蛋白 (binding immunoglobulin protein, BiP)	[56, 76]
整合素 (integrins)	[65, 77]
尿激酶型纤溶酶原激活剂受体 (urokinase-type plasminogen activator receptor, uPAR)	[46]
p53	[78]
共伴侣分子3 (co-chaperone canopy 3, CNPY3)	[79-80]
骨肉瘤扩增9-伴侣凝集素复合物 (osteosarcoma amplified 9 chaperone-lectin complex, OS-9)	[81]
血小板糖蛋白Ib-IX-V复合物 (platelet glycoprotein Ib-IX-V complex, GPIb-IX-V)	[82]
表皮生长因子受体2 (epidermal growth factor receptor-2, HER2)	[83-84]
胆盐依赖性脂肪酶 (bile-salt-dependent lipase, BSDL)	[85]
HSV-1糖蛋白B (HSV-1 glycoprotein B*, HSV-1 gB)	[18]
胶原蛋白 (collagen)	[86]
蛋白C (protein C*)	[87]
Ig α 链 (Ig α chain)	[88]
凝血酶反应蛋白 (thrombospondin, TSP)	[74]
雌激素受体 α 36 (estrogen receptor α 36, ER- α 36)	[89]
细胞表面蛋白糖蛋白A优势重复序列 (cell-surface protein glycoprotein A repetitions predominant, GARP)	[90]
亚砷酸盐刺激的ATP酶 (arsenite-stimulated ATPase, ASNA-1)	[91]
Wnt信号共受体-低密度脂蛋白受体相关蛋白6 (Wnt signaling co-receptor the low-density lipoprotein receptor-related protein 6, Wnt co-receptor LRP6)	[60]
主要组织相容性复合体I类和II类 (major histocompatibility complex class I and class II, MHC I and II)	[92-93]
Toll样受体 (Toll-like receptors, TLRs)	[94-95]
氨酰-tRNA合成酶相互作用多功能蛋白1 (aminoacyl-tRNA synthetase-interacting multifunctional protein 1, AIMP1)	[96]
前肽A型崩解素样和金属蛋白酶结构域与血栓反应蛋白1型基序9 (propeptide a disintegrin-like and metalloprotease domain with thrombospondin type 1 motifs 9, Pro-ADAMTS9)	[97]
CLAVATA复合体 (CLAVATA complex, CLV complex)	[98]
α 1-抗胰蛋白酶 (α 1-antitrypsin*, AAT)	[99]

*代表突变蛋白.

中还有 IGF，是一种对多种细胞和组织具有的促有丝分裂活性的激素，是抑制细胞凋亡、促进细胞周期进展、血管生成和各种癌症转移的重要因子^[67]。Ostrovsky 等^[68]证明 gp96 可以与 IGF-II 发生直接相互作用，并在 IGF-II 加工和分泌中起着重要的作用。Barton 等^[69]和 Marzec 等^[70]的结果也进一步阐释了 gp96 在 IGF-I 和 IGF-II 的成熟和分泌中所发挥的重要作用。表 1 展示了目前已知与肿瘤发生发展相关的 gp96 客户蛋白。

4 细胞膜gp96促进肿瘤的增殖和侵袭

尽管 gp96 蛋白主要定位于细胞的内质网中，但在特定细胞和外界刺激下 gp96 也可能分布于细胞膜表面、高尔基体、细胞核和细胞外环境中^[44-45, 58-59]。其中，细胞膜 gp96 (m gp96) 作为一种肿瘤特异性的靶蛋白，受到了广泛的关注^[100-101]。Altmeyer 等^[45]在小鼠 Meth-A 肉瘤细胞表面发现 m gp96，而正常成纤维细胞表面却没有检测到。Melendez 等^[102]的结果也证实 m gp96 仅在人乳腺上皮的恶性细胞系中（如 MCF7 和 AU565）呈

现阳性表达。这些前人的研究结果都显示了 m gp96 作为恶性肿瘤治疗的特异性靶点有着巨大的研究价值。我们团队利用 HER2 过表达的乳腺癌模型证明，m gp96 的 NTD 区域与 HER2 在细胞膜上互作，从而增加 HER2 蛋白的稳定性并活化下游细胞信号通路，促进肿瘤细胞的增殖和侵袭^[83]。同时，m gp96 也通过与 ER- α 36 互作从而促进乳腺癌细胞的生长和侵袭^[89]。我们通过临床肿瘤样本分析发现，原发性肝癌患者肿瘤 m gp96 水平与肿瘤转移、复发和预后不良有关，进一步对 m gp96 结合的潜在蛋白质进行质谱分析，鉴定出细胞膜表面的尿激酶型纤溶酶原激活剂受体（urokinase-type plasminogen activator-receptor, uPAR）作为 gp96 的互作蛋白，利用 siRNA 或特异性 mAb 靶向 m gp96 能显著抑制肝癌细胞的生长、存活和侵袭^[46]。gp96 在正常细胞膜表面并不表达或低表达，而只在特定肿瘤细胞表面呈现高表达，m gp96 还可以与多个肿瘤相关蛋白互作增加其稳定性并影响相关的下游信号通路（图 2），因此 m gp96 是理想的抗肿瘤药物潜在靶点。

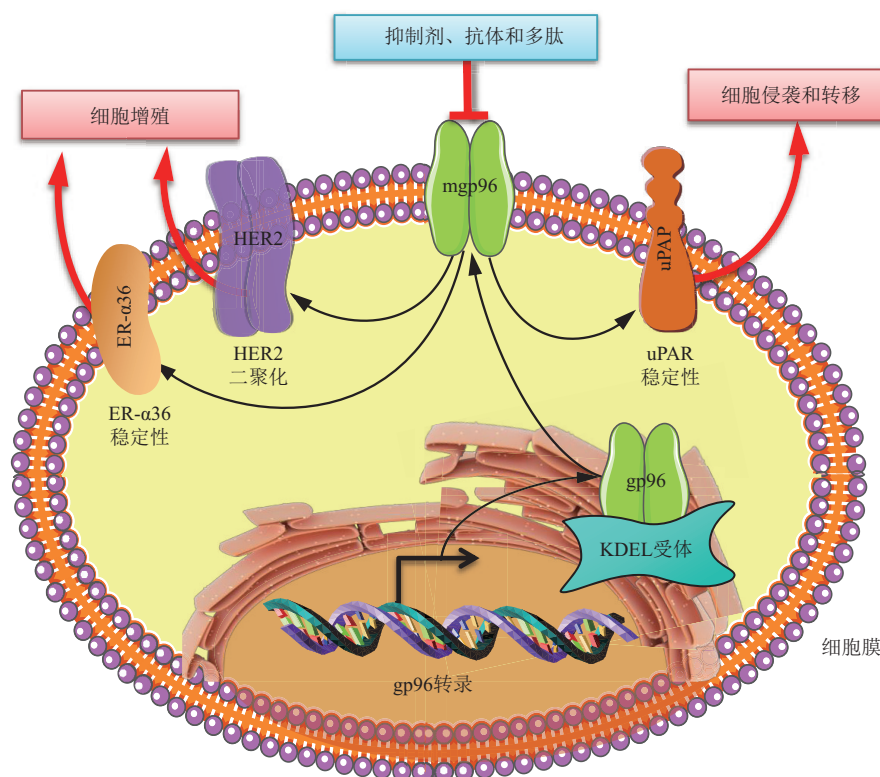


Fig. 2 The role of membrane gp96 in cancer progress^[46, 83, 89]

图2 m gp96在肿瘤细胞的增殖、侵袭和转移中的作用^[46, 83, 89]

m gp96是ER- α 36、uPAR和HER2的重要分子伴侣，影响ER- α 36和uPAR稳定性，以及HER2的二聚化，在肿瘤细胞的增殖、侵袭和转移中起重要作用。

5 gp96可作为治疗肿瘤的新靶点

近年来基于gp96独特的二级结构域, 已经鉴定出多种特异性化合物, 如PU-H54、PU-WS13和PU-H39等. 这些化合物多数为靶向gp96的ATP结合区及其调控区域^[103-105]. 格尔达那霉素是一种苯醌安塞霉素类天然产物抑制剂, 具有广谱而有效的抗癌效果^[106-107]. 此外, 研究人员在HSP90 N端结构域的X射线晶体中, 发现了一个非常规的ATP结合折叠结构域, 继而发现了一种腺苷受体激动剂N-乙基卡波美定(N-ethylcarboxamidoadenosine, NECA). 该化合物在发挥作用时, 具有一定的选择特异性. 相较于其他HSP90家族成员, 它会优先与gp96相互作用, 从而起到特异性抑制gp96的作用^[19, 104, 108]. 此后, 有人将化合物库筛选与模拟、计算分析相结合, 发现了另一种靶向gp96嘌呤结构的选择性抑制剂PU-H54^[105, 109]. 对该化合物进一步结构修饰后, 得到具有更强特异性的化合物PU-WS13^[105, 109]. 他们发现PU-WS13能够以剂量依赖的方式抑制IGF-II的分泌和TLR9的转运, 但是对HSP70的诱导和AKT的降解没有影响, 表明它对gp96有特异性的抑制作用^[103]. PU-WS13的发现为研究gp96的分子伴侣功能提供了新的工具, PU-WS13可以使SKBr3细胞膜上的HER2减少, 同时诱导HER2高表达乳腺癌细胞系在G1期发生阻滞、凋亡和细胞活性受损, 这些结果表明gp96能够在细胞膜上维持HER2稳定性和功能的发挥. 这也证明了gp96是HER2高表达乳腺癌的潜在治疗靶点^[109-110]. Hua等^[49]的研究也表明, PU-WS13可以通过靶向抑制gp96活性, 阻断Wnt-LRP Survivin通路, 抑制骨髓瘤细胞生长并诱导其发生凋亡和坏死, 这些研究为多发性骨髓瘤的治疗提供了新的思路. Rachidi等^[55]的研究结果表明gp96靶向治疗可能是一种很有前途的肝癌治疗方法. 在PU-WS13处理后的HepG2细胞中, gp96受到抑制后, 一些在细胞的增殖、自噬、凋亡和细胞周期中均起着重要作用的分子, 如 β -catenin、cyclin D1、p-AKT、p-STAT3、PARP (poly ADP-ribose polymerase) 和Beclin1等蛋白质水平均发生了显著的变化. 其他以gp96为靶点的抑制剂还有间苯二酚类抑制剂(KUNG38)、氨基环己醇类抑制剂(SNX2112)和苯甲酰胺类(ACO1)等^[111-115]. 图3为靶向gp96的

抗肿瘤药物图谱. 这些研究结果显示, gp96是多种癌症的潜在药物靶标, 因此以gp96为靶点的药物开发具有巨大前景^[103, 105]. 由于gp96在所有的细胞内质网中都有组成性表达, 而在细胞膜主要局限在某些肿瘤细胞膜上才有表达, 因此相对于胞内gp96而言, 胞膜gp96是肿瘤更加特异的靶点^[100-101]. Sabbatino等^[116]开发的gp96特异性单克隆抗体(W9mAb), 可以选择性地靶向gp96的胞外表位, 该抗体可以恢复并提高人B-RAFV600E黑色素瘤细胞对B-RAF抑制剂的敏感性. Jeoung等^[117]开发的特异性gp96阻断性抗体对多种西妥昔单抗(Cetuximab)耐药的结肠癌细胞株生长具有强烈的抑制作用. 该团队的研究表明, 与西妥昔单抗相比, 单独使用gp96抗体就能够显著降低结肠癌耐药细胞株HCT116细胞的生长, 且有较低的因脱靶效应引起的毒性反应, 因此细胞表面gp96可能是治疗西妥昔单抗耐药结肠癌的新靶点. 我们团队发现一种靶向胞膜gp96 ATP结合区的 α 螺旋肽(p37), 其通过抑制gp96分子内构象变化从而显著增加与HER2的结合, 进而降低HER2的二聚化和下游信号传导, 该多肽靶向细胞膜gp96促进HER2泛素化和溶酶体降解, 抑制乳腺癌细胞生长和促进凋亡, 小鼠体内试验也证明该多肽显著抑制乳腺肿瘤生长, 为乳腺癌的治疗提供了新策略^[118].

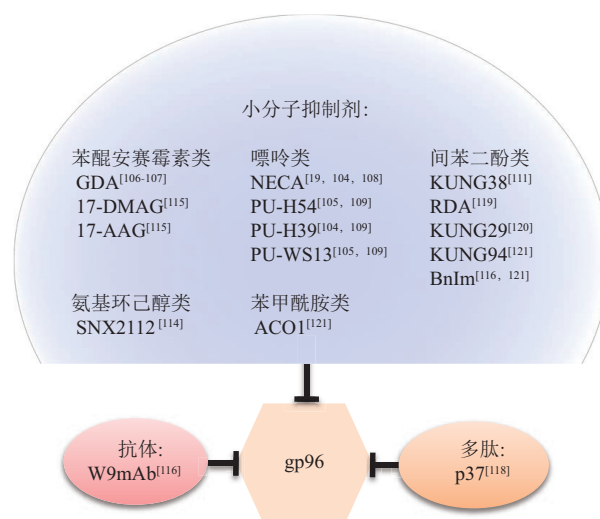


Fig. 3 Application of anti-cancer drugs targeting gp96^[101, 105, 115]

图3 靶向gp96的抗肿瘤药物图谱^[101, 105, 115]

基于gp96结构设计的靶向药物, 如小分子抑制剂、多肽和单克隆抗体等, 这些药物可以显著抑制恶性肿瘤发生发展.

6 总结和展望

细胞内 gp96 作为一种定位于内质网的分子伴侣, 在某些肿瘤蛋白加工、合成和转运等方面起重要作用. 这些 gp96 的客户蛋白如 HER2、uPAR、整合素和 IGF 等, 在促进肿瘤生长、分化、转移、侵袭以及肿瘤微环境调节等方面起着重要的作用. gp96 作为一种在内质网质量控制和应激反应中起重要作用的分子伴侣蛋白, 也是一个在肿瘤发生发展中起重要作用的关键分子, 它在癌症的诊断和治疗研究中有着潜在的应用价值. 同时, mgp96 作为一种只在肿瘤细胞表面高表达的靶蛋白, 靶向 gp96 的抑制药物, 如多肽、抗体和抑制剂等, 可能对胞膜高表达 gp96 的恶性肿瘤有更加明显的治疗效果, 因此, mgp96 作为潜在的肿瘤治疗靶点, 为肿瘤的靶向治疗和药物设计提供了新的思路.

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Research Progress of The Role of Heat Shock Protein gp96 in Cancer Development and Progression*

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Abstract Glycoprotein 96 (gp96) is a highly conserved and ubiquitous glycoprotein that belongs to the heat shock protein 90 (HSP90) family. It comprises 4 domains: N-terminal domain (NTD), middle domain (MD), C-terminal domain (CTD) and charged linker region (CR). Each domain performs a specific function. NTD containing the nucleotide binding site interacts with and hydrolyzes ATP. MD is involved in client protein recognition, and is the site of constitutive dimerization. The ATP hydrolytic activity of NTD requires cooperative action of CR and MD. The schematic representation of gp96 topology is shown in the main text. An increased expression of gp96 has been reported in multiple cancers. Its upregulation in tumors is closely correlated with poor prognosis and decreased overall survival of patients, indicating that gp96 serves as a potential diagnostic and prognostic biomarker. As a chaperone protein gp96 directs the folding and/or assembly of secreted and membrane proteins. It has a limited client protein profile that is involved in key processes linked with the hallmarks of cancer. Previous studies have shown that cellular gp96 physically interacts with and directs the folding and assembly of several client proteins, including insulin-like growth factors (IGF), integrins, epidermal growth factor receptor-2 (HER2) and Wnt co-receptor LRP6, which are involved in the regulation of cell multiplication, normal tissue differentiation, cancer progression and metastasis. It has been found that gp96 was only expressed on cell surface of malignant tumor but not benign tissues. Cell membrane gp96 is closely associated with cancer cell proliferation, invasion, and metastasis. We further demonstrated that gp96 on cell membrane interacts with HER2, urokinase-type plasminogen activator-receptor (uPAR) or ER- α 36. Targeting gp96 by siRNA or a monoclonal antibody for gp96 led to decreased cell growth and invasion, increased apoptosis *in vitro*, and suppression of tumor growth *in vivo*, validating cell membrane gp96 as a therapeutic target. At present, the selective small-molecule inhibitors (NECA and PU-WS13), a gp96-specific monoclonal antibody (W9mAb), and an inhibitory gp96-targeted polypeptide (p37) are under development and their potential applications in the tumor targeting therapy are highlighted in this review.

Key words heat shock protein gp96, molecular chaperone, cell membrane gp96, cancer, targeted therapy

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