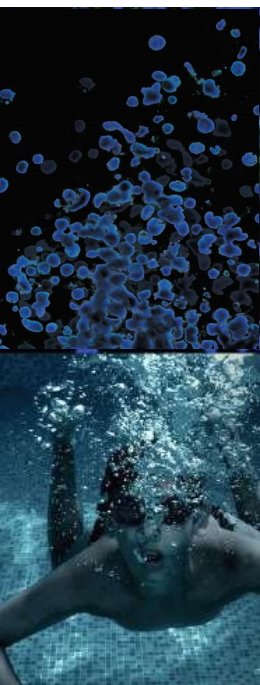




EMT reporter cell lines: Elevating biological models of metastasis

Diana Douglas, BS
Senior Biologist, ATCC

Credible Leads to Incredible™

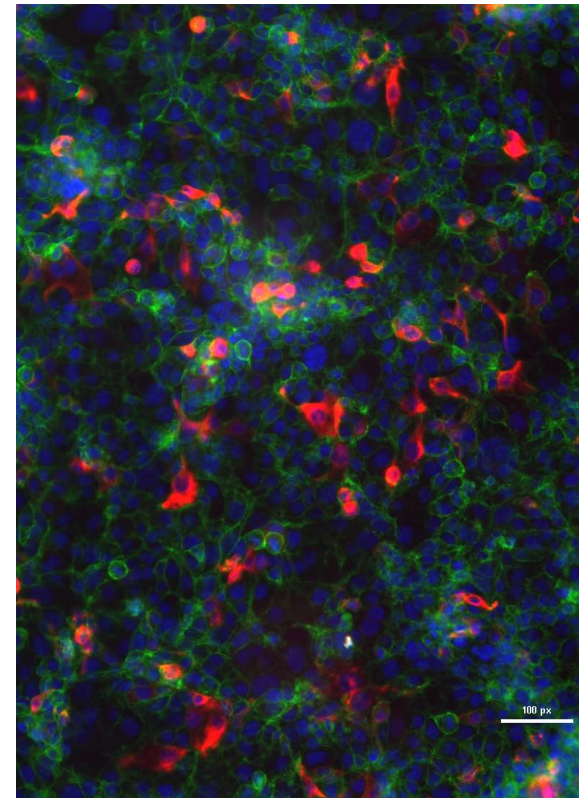


About ATCC

- Founded in 1925, ATCC is a non-profit organization with HQ in Manassas, VA, and an R&D and Services center in Gaithersburg, MD
- World's largest, most diverse biological materials and information resource for microbes – the “gold standard”
- Innovative R&D company featuring gene editing, microbiome, NGS, advanced models
- cGMP biorepository
- Partner with government, industry, and academia
- Leading global supplier of authenticated cell lines, viruses, and microbial standards
- Sales and distribution in 150 countries, 18 international distributors
- Talented team of 450+ employees, over one-third with advanced degrees

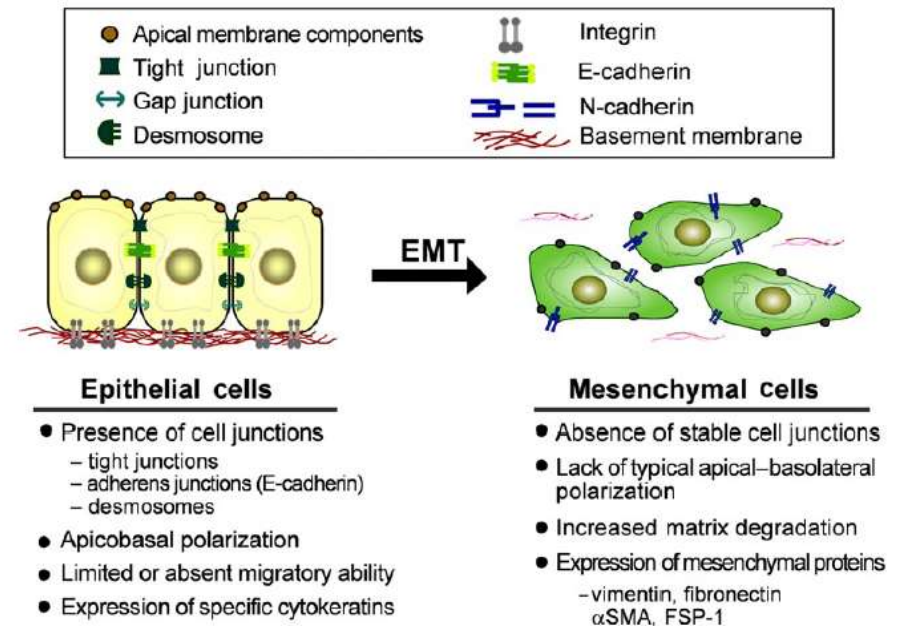
Agenda

- Background
 - EMT
 - EMT and cancer metastasis
- VIM-RFP reporter lines
 - HCT116 VIM RFP EMT
 - MDA-MB-231 VIM RFP MET
 - A549 VIM RFP EMT
- ECAD-EmGFP reporter lines
 - PANC-1 ECAD EmGFP MET
 - BT-474 ECAD EmGFP EMT
 - MCF10A ECAD EmGFP EMT
- Conclusions



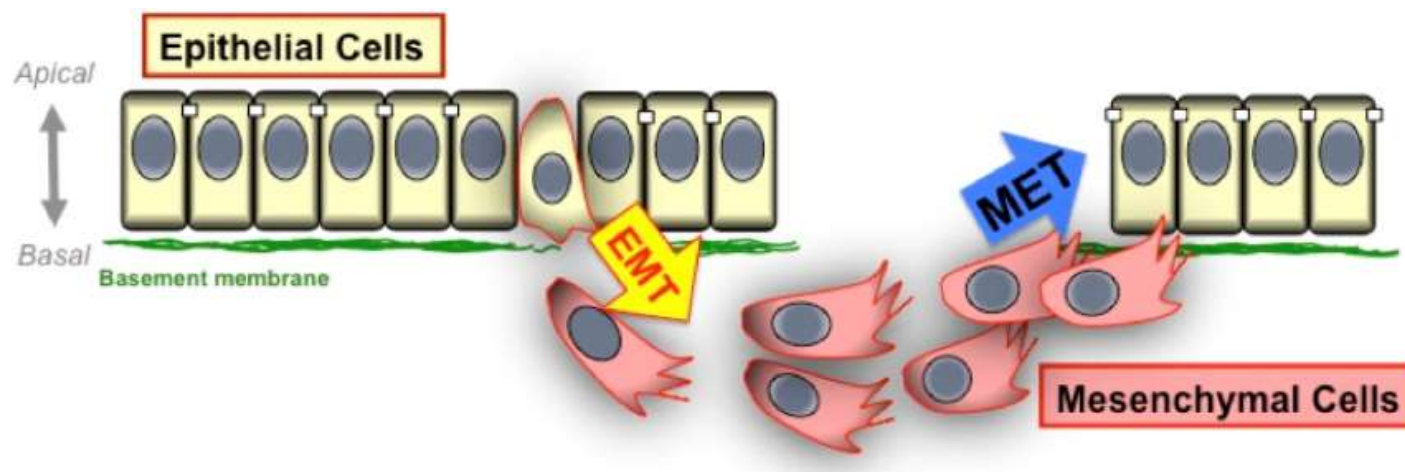
Background – EMT

- The epithelial-to-mesenchymal transition (**EMT**) is a reversible process. Epithelial cells:
 - Reduce their intercellular adhesions and proliferative capacity
 - Gain a mesenchymal phenotype with increased migratory and invasive properties
- EMT classifications and functions:
 - Implantation, embryogenesis, and organogenesis
 - Wound healing, tissue regeneration, and organ fibrosis
 - Tumor metastasis



Lee et al, *International Review of Cell and Molecular Biology*, 2012.

EMT and MET in cancer progression



<http://murraylab.biosciences.uom.org.au/>

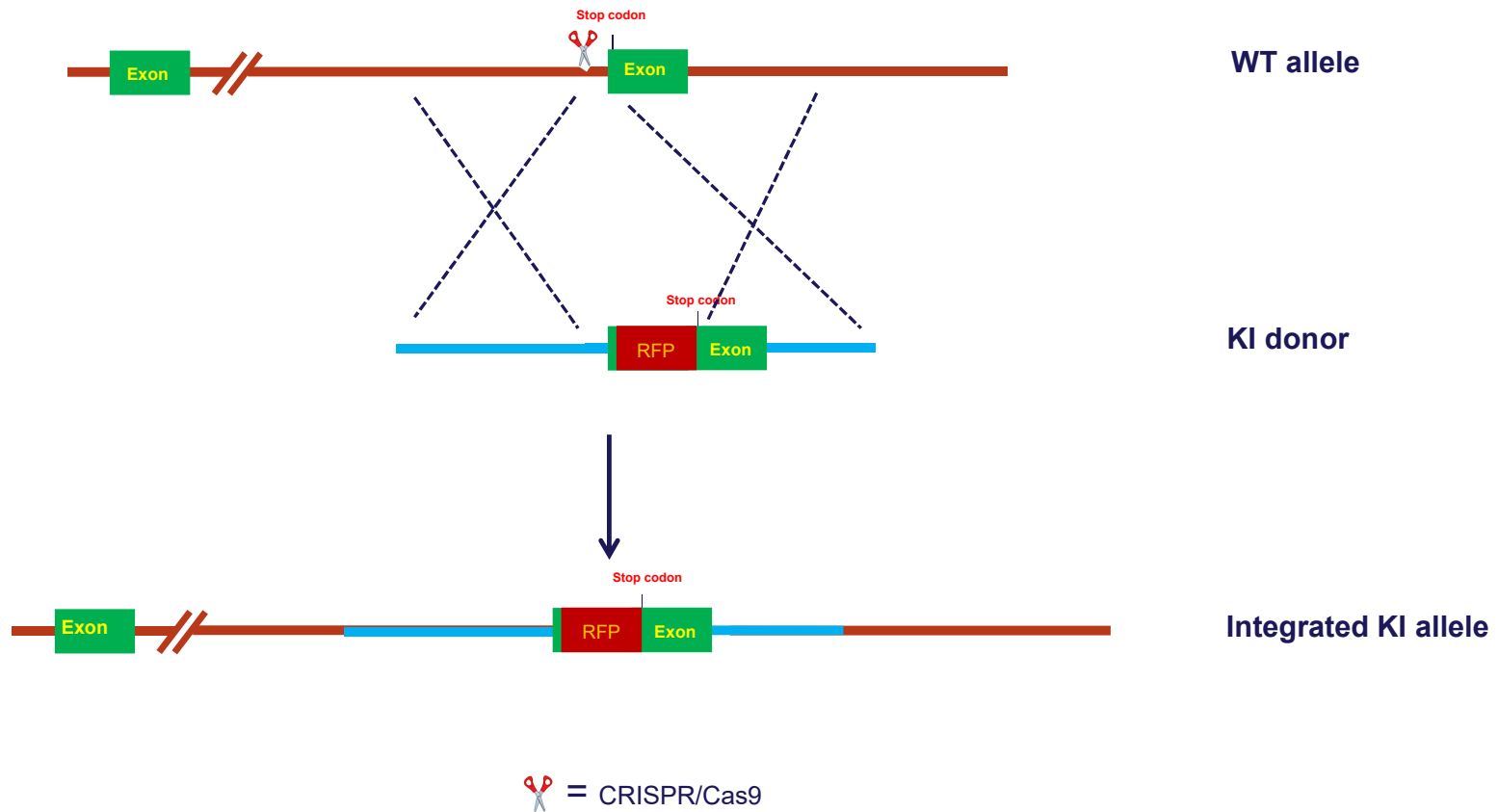
- Epithelial cancer cells reactivate EMT
- The EMT process facilitates metastatic dissemination
- “Partial EMT”: the transition is a complex and multistep process

ATCC's EMT and MET reporter cell lines

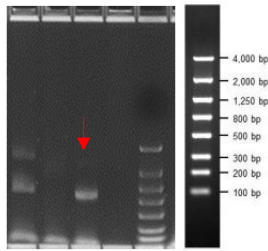
- We have developed EMT and MET reporter cell lines for use as a platform in drug screening and to learn more about the EMT/MET pathway and how it relates to cancer progression
- In these cell lines, commonly used EMT marker genes (VIM or ECAD) are tagged with a fluorescent protein to allow real-time tracking of cellular status

Designation	ATCC® No.	Tissue type/disease	EMT or MET	Marker	Availability
A549 VIM RFP	CCL-185EMT™	Lung cancer	EMT	VIM-RFP	Available
HCT116 VIM RFP	CCL-247EMT™	Colorectal cancer	EMT	VIM-RFP	Available
MDA-MB-231 VIM RFP	HTB-26MET™	Breast cancer	MET	VIM-RFP	Available
BT-474 ECAD EmGFP	HTB-20EMT™	Breast cancer	EMT	ECAD-GFP	Available Q4 2019
PANC-1 ECAD EmGFP	CRL-1649MET™	Pancreatic cancer	MET	ECAD-GFP	Available Q1 2020
MCF10A ECAD EmGFP	CRL-10317EMT™	Breast epithelial cells	EMT	ECAD-GFP	Available Q1 2020

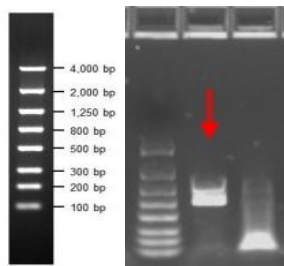
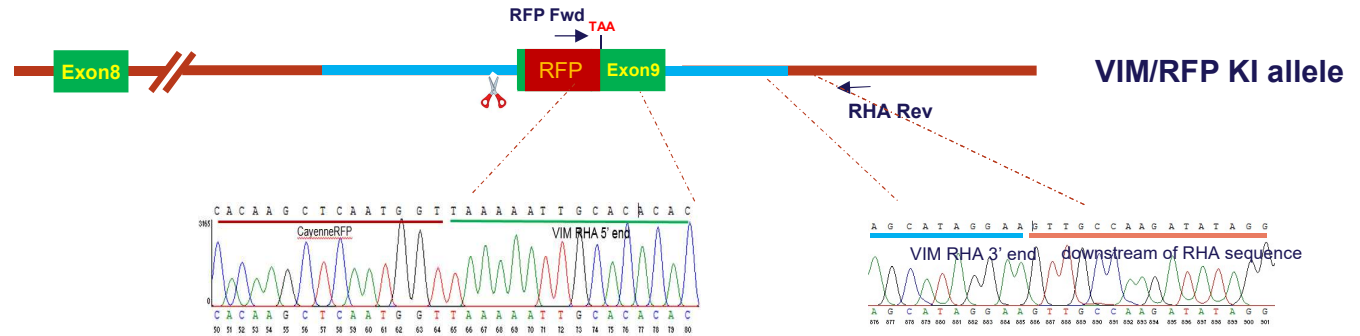
Precision editing to create reporter KI alleles in cancer cell lines



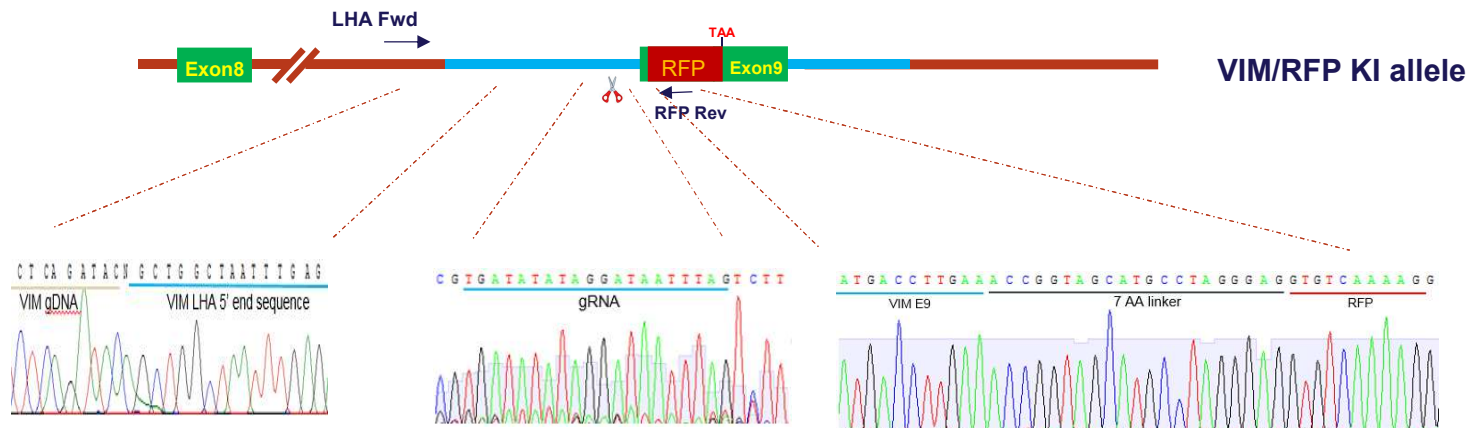
Knock-in verification at the genomic level



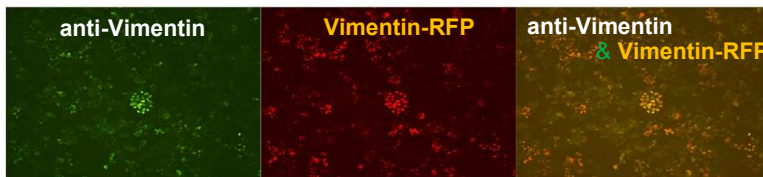
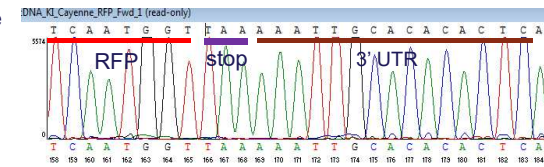
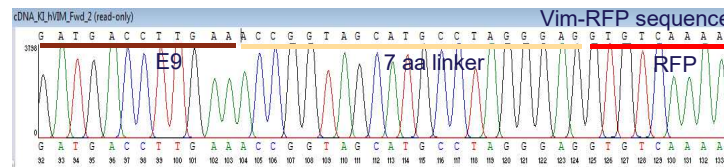
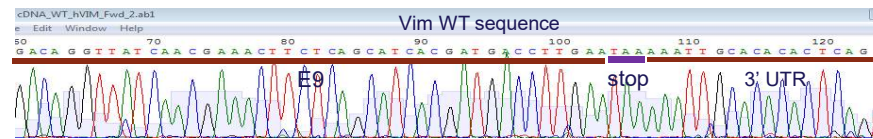
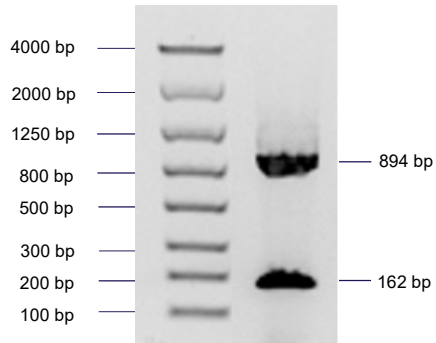
RHA: ~ 1.0 kb



LHA: ~ 1.1 kb

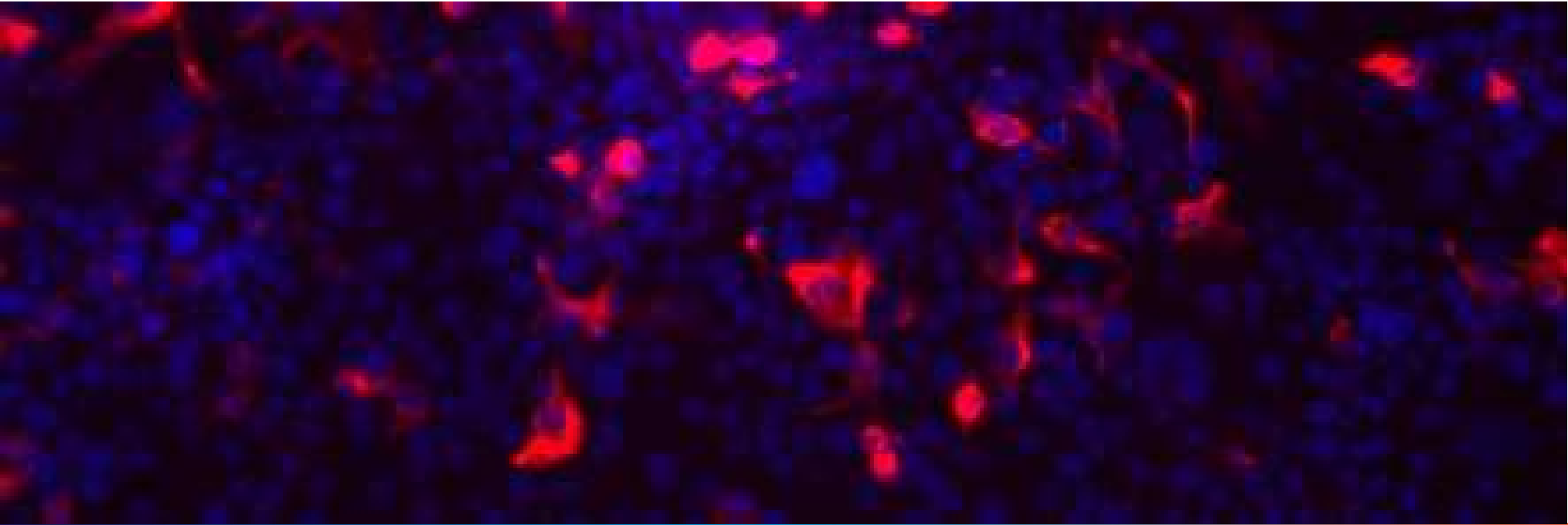


Knock-in verification at the transcriptional and translational levels



ON/OFF	Target	Locus	Sequence	# mismatches	Score	Gene	ontarget
ON			CTAAATTATCCTATATATCACGG	0	100	None	True
OT1		chr3:+138434072	CTTGATTATCCTATATATCACGG	2	5.1	None	False ✓
OT2		chr4:+26013990	CTAAACTCTGCTATATATCACGGG	3	1.4	None	False ✓
OT3		chrX:+98243253	CGTCATTTTCCTATATATCAAGG	4	1.3	None	False ✓
OT4		:hr16:+69339888	AATAATTATGCTATATATCACGG	4	1.3	None	False ✓
OT5		chr4:+160836913	TTTTATTATCTATATATCATGG	4	1.3	None	False ✓
OT6		chr2:-14364834	CTAATATAGCCTATATATCACGGG	3	0.9	None	False ✓
OT7		chr10:-15151953	TTAACCTATGCTATATATCACGG	4	0.8	NM_004808	False ✓
OT8		chrX:-100600804	TTAACTTACCCTGATATATCACGGG	4	0.4	NM_004085	False ✓
OT9		chr7:+91788412	CTCAATTCTCCTATATTTCTTGG	4	0.3	NM_001161528	False ✓
OT10		chr14:-103805277	CTAAAGTATCATATATCTAAAGG	4	0.1	NM_001969	False ✓
OT11		chr17:-6364831	CTACATGATCCTTACATCACGG	4	0.1	NM_031220	FALSE ✓

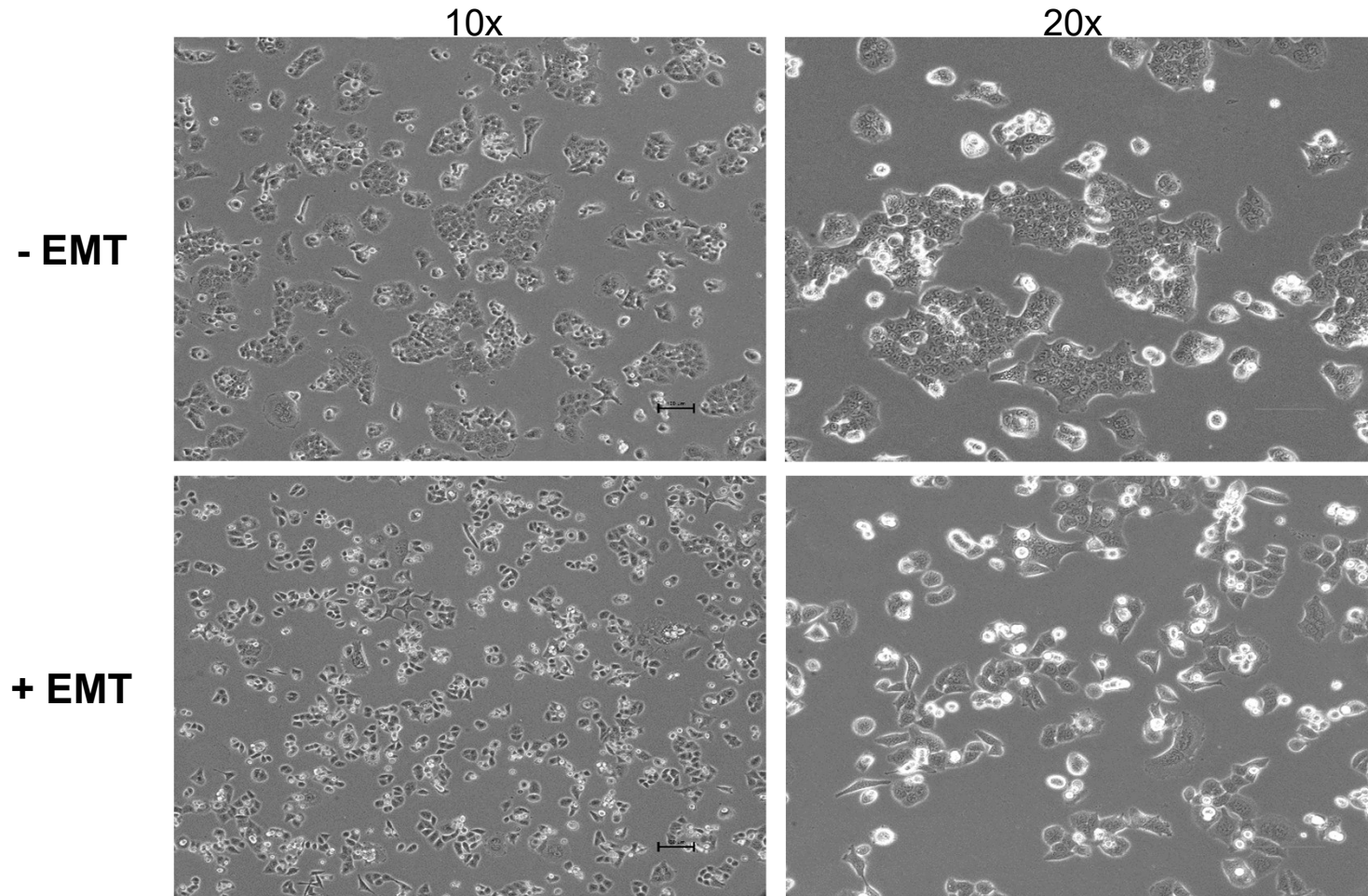




Vimentin-RFP reporter lines

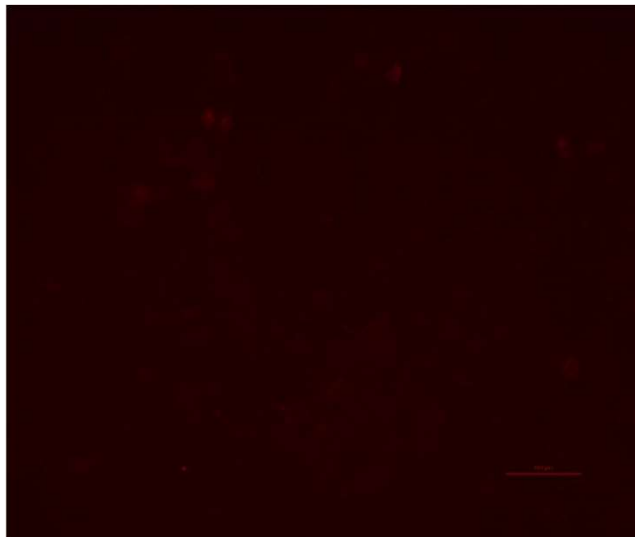
HCT16 VIM RFP: colorectal cancer
MDA-MB-231: breast cancer
A549 VIM RFP: lung cancer

HCT 116 VIM RFP EMT reporter cells display an epithelial-to-mesenchymal morphology change upon induction

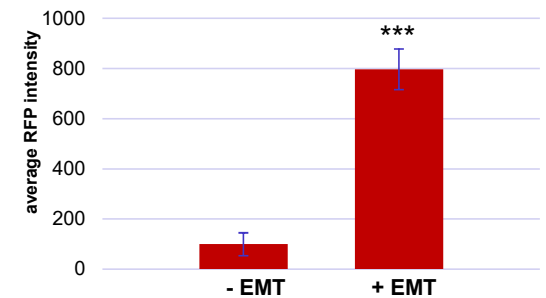
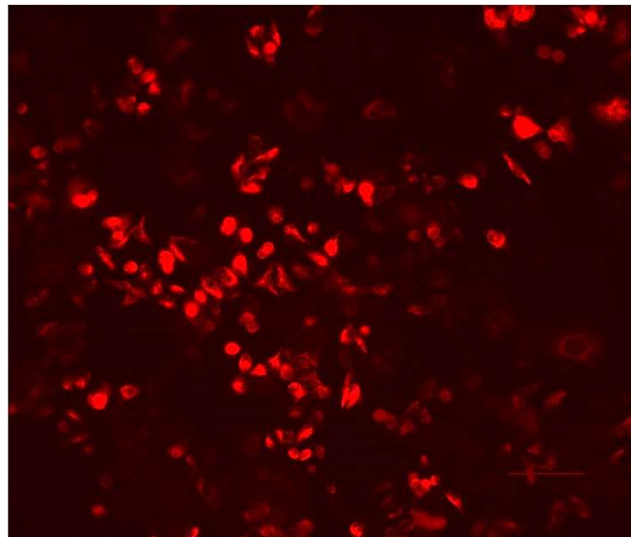


HCT116 VIM RFP reporter cells display an increase in intrinsic vimentin expression

- EMT



+ EMT

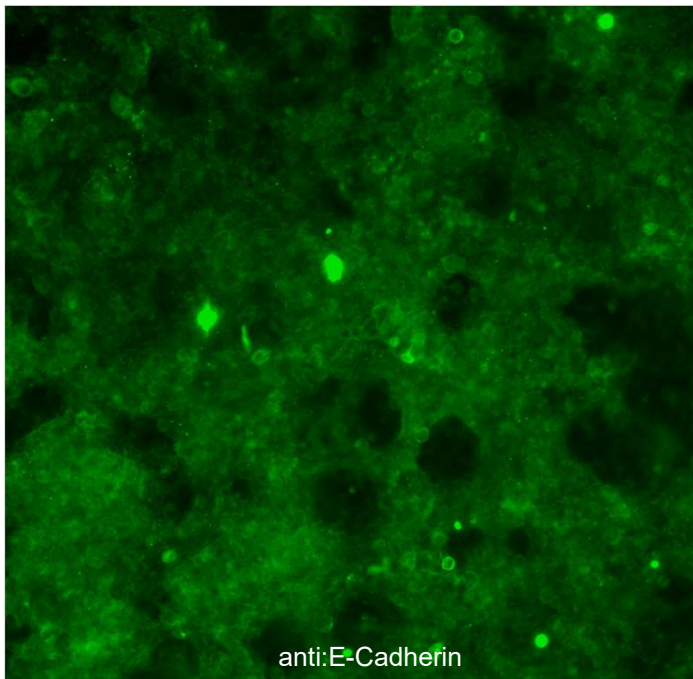


Student's t-test, $p < 0.001$

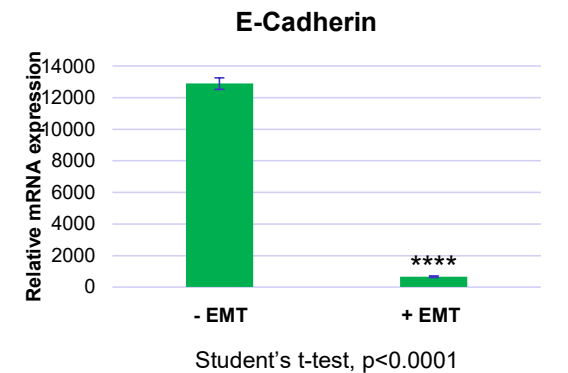
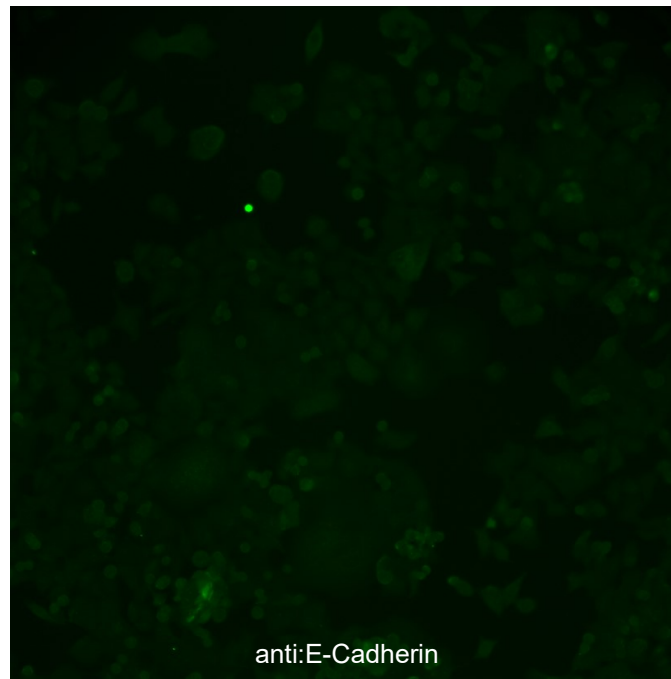
~ 8.0 fold increase

HCT116 VIM RFP reporter cells display a decrease in the epithelial marker E-cadherin

- EMT

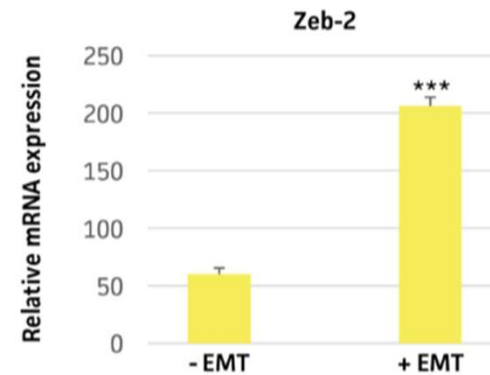
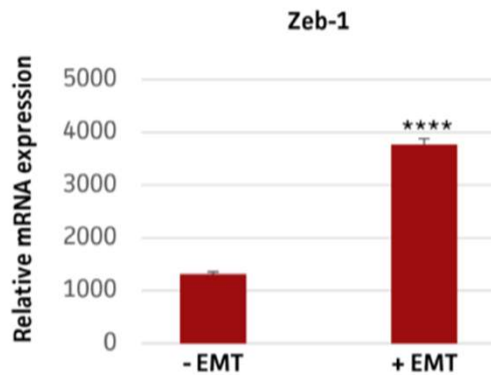
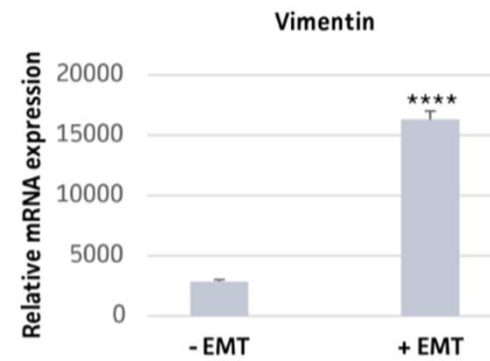
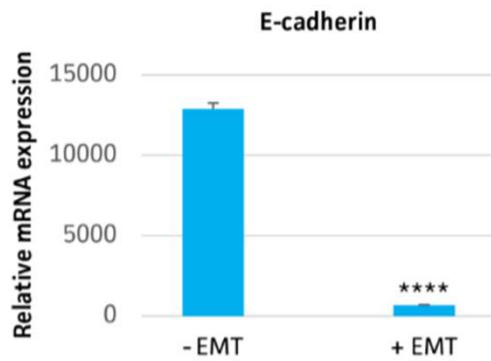


+ EMT



~ 19.8 fold decrease (95% decrease)

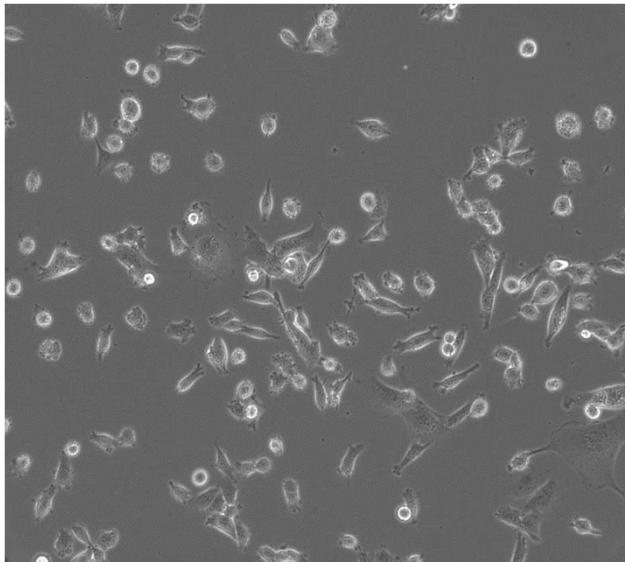
HCT116 VIM RFP: quantitative analysis of EMT marker gene expression by ddPCR™



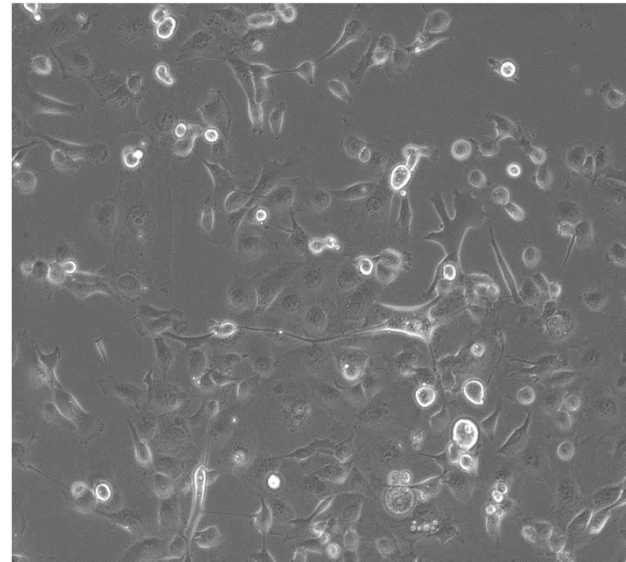
Student's t-test, *** $p < 0.001$, **** $p < 0.0001$

MDA-MB-231 VIM RFP MET cells display a morphology change upon MET induction

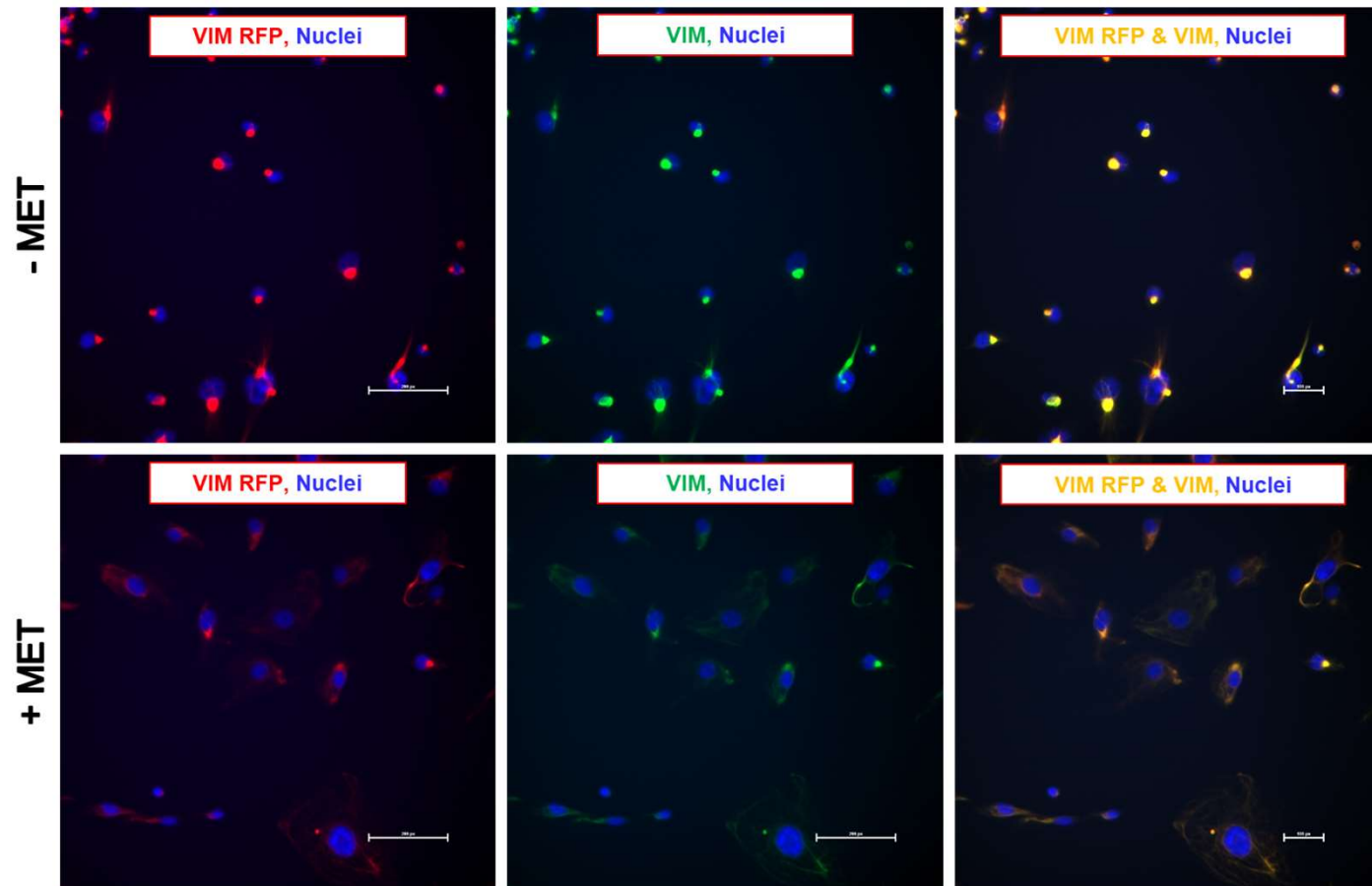
-MET



+MET

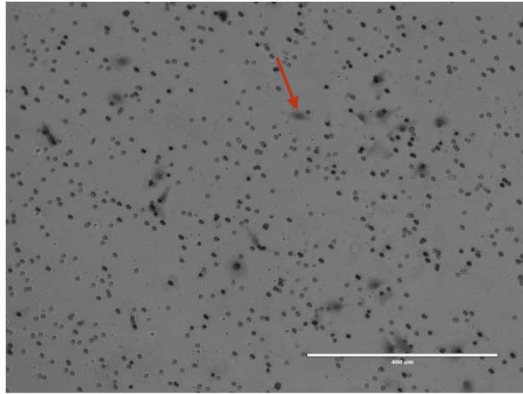


MDA-MB-231 VIM RFP MET cells display a decrease in the intrinsic mesenchymal marker vimentin

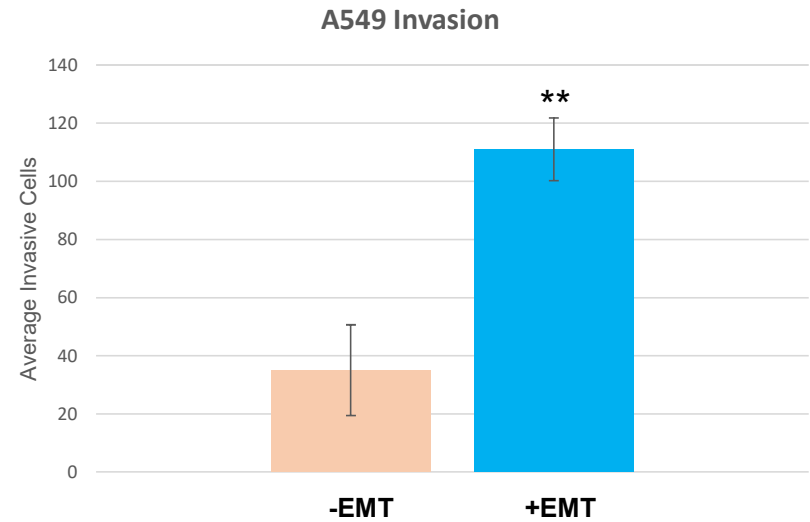
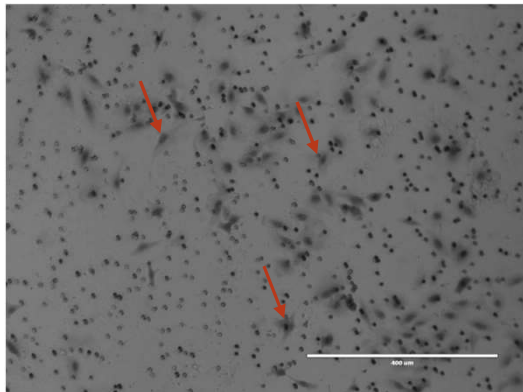


A549 VIM RFP EMT cells display an increase in invasive capacity upon EMT induction

-EMT



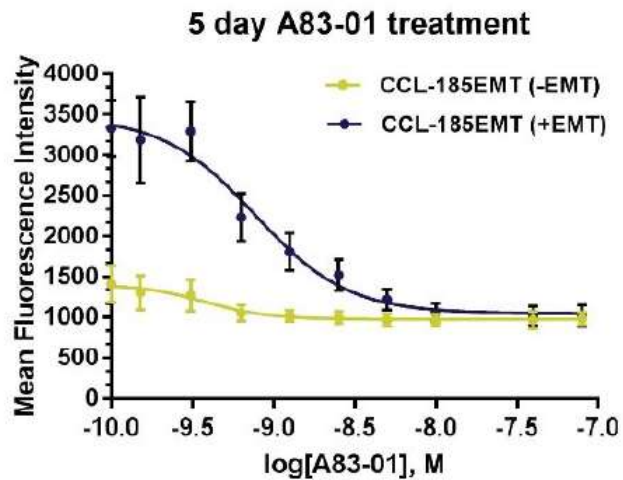
+EMT



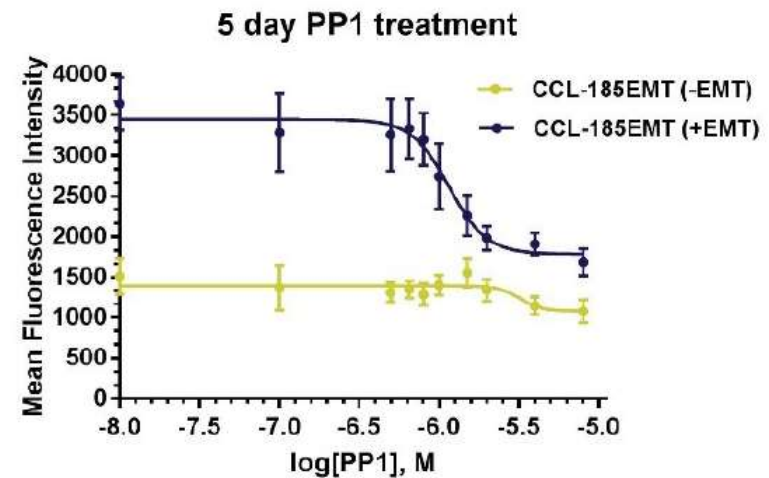
Student's t-test, $p < 0.01$

~3 fold increase in invasive cells upon EMT induction

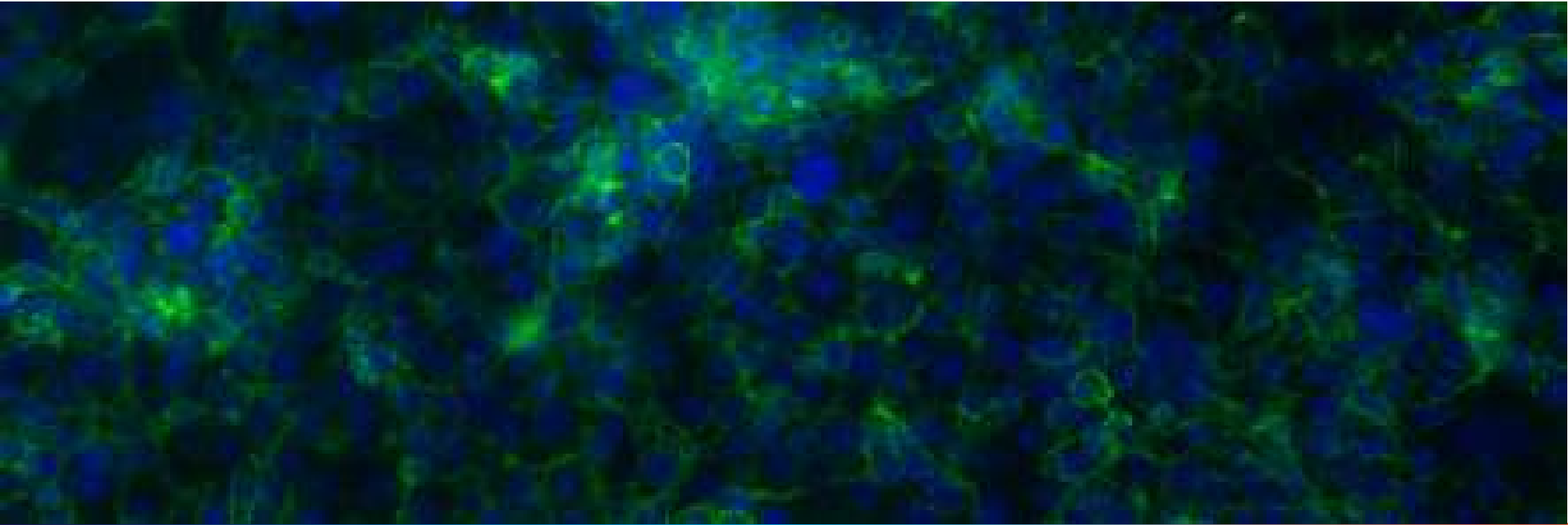
Treatment of A549 VIM RFP EMT cells with small molecule EMT inhibitors effectively blocks EMT



	CCL-185EMT (-EMT)	CCL-185EMT (+EMT)
IC50	3.822e-010	7.733e-010



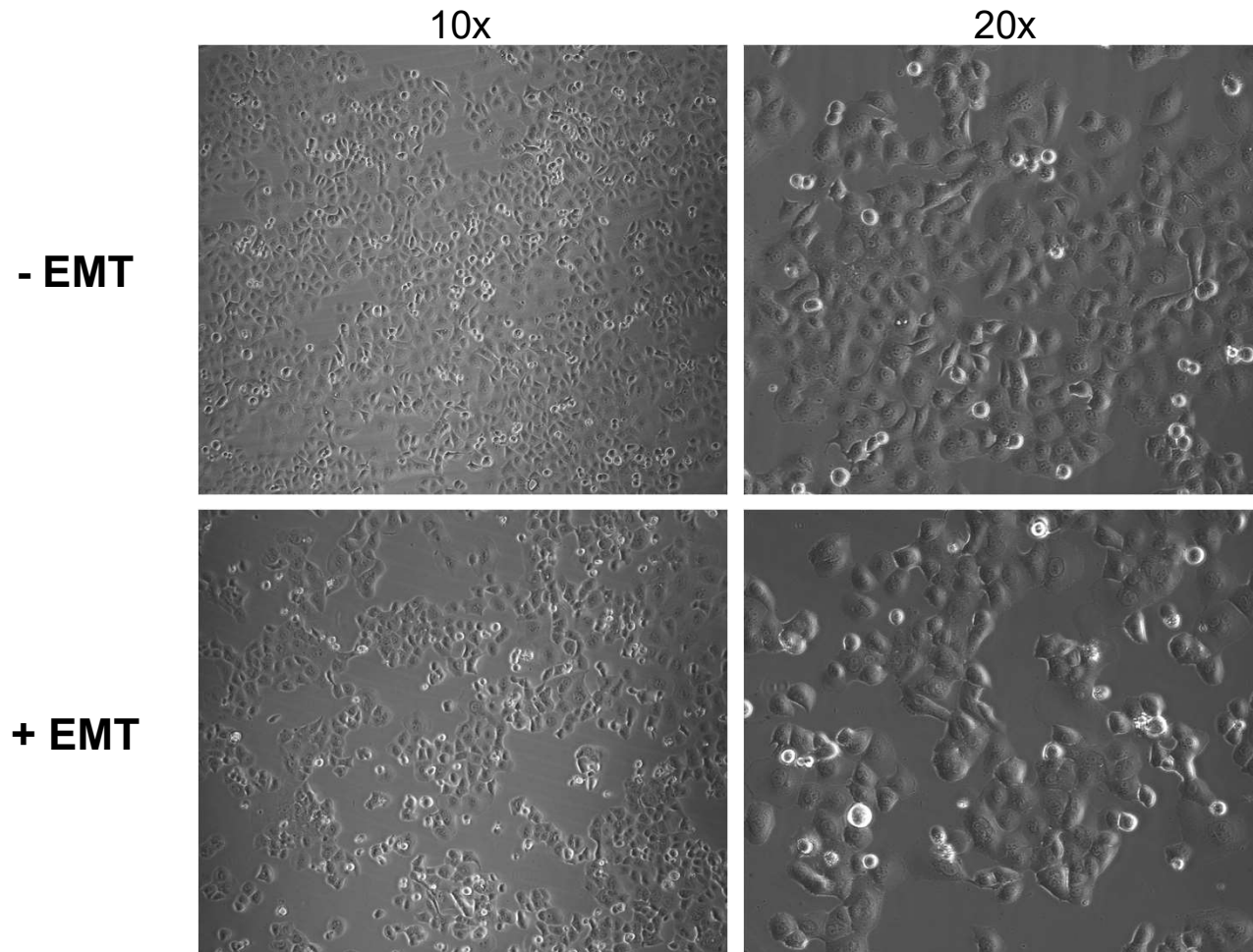
	CCL-185EMT (-EMT)	CCL-185EMT (+EMT)
IC50	3.22e-006	1.154e-006



E-cadherin-EmGFP reporter lines

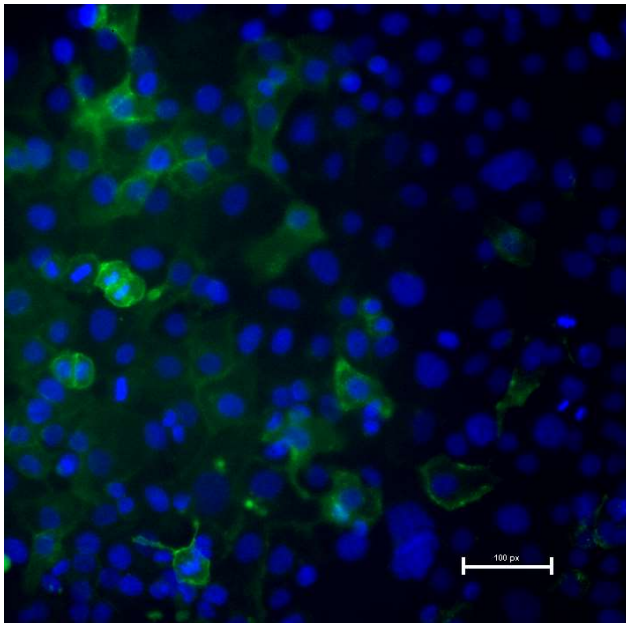
PANC-1 ECAD EmGFP: pancreatic cancer
BT-474 ECAD EmGFP: breast cancer
MCF10A ECAD EmGFP: breast epithelial cells

PANC-1 ECAD EmGFP MET reporter cells display a morphology change upon induction

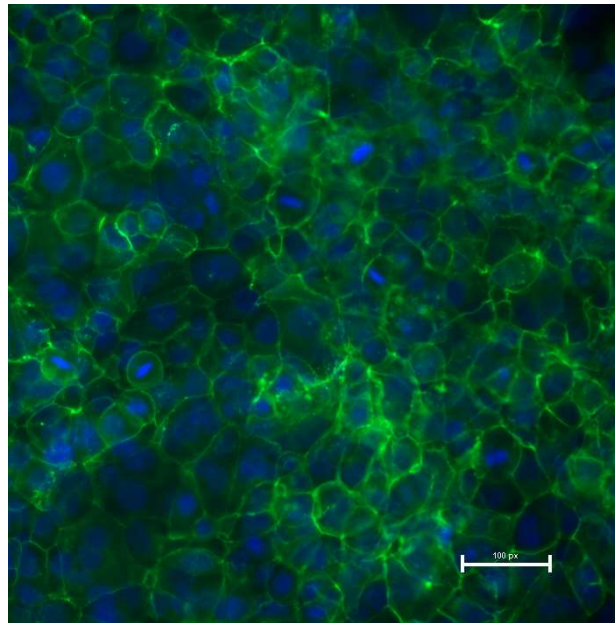


PANC-1 ECAD EmGFP MET cells display an increase in intrinsic E-cadherin expression

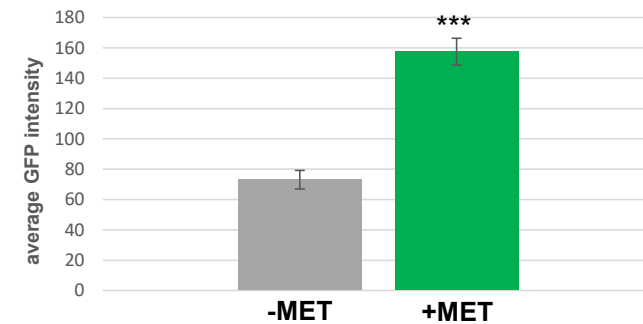
- MET



+ MET (Pre-miR-200)



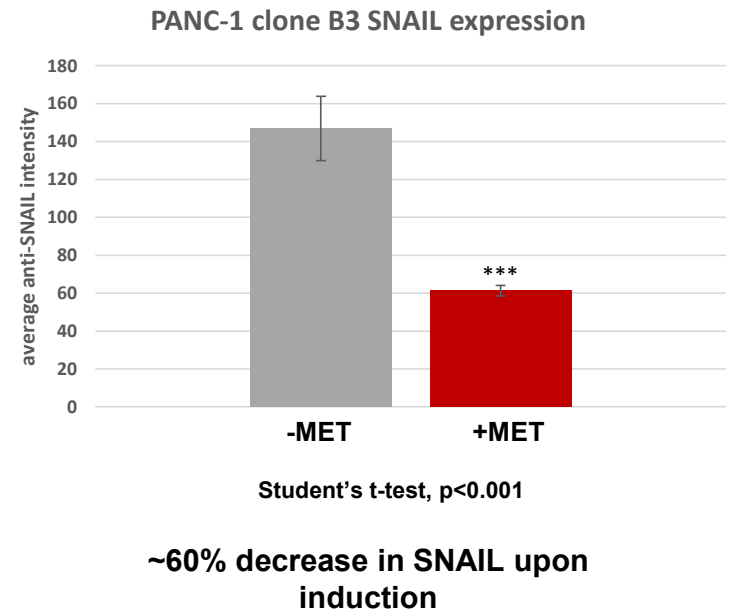
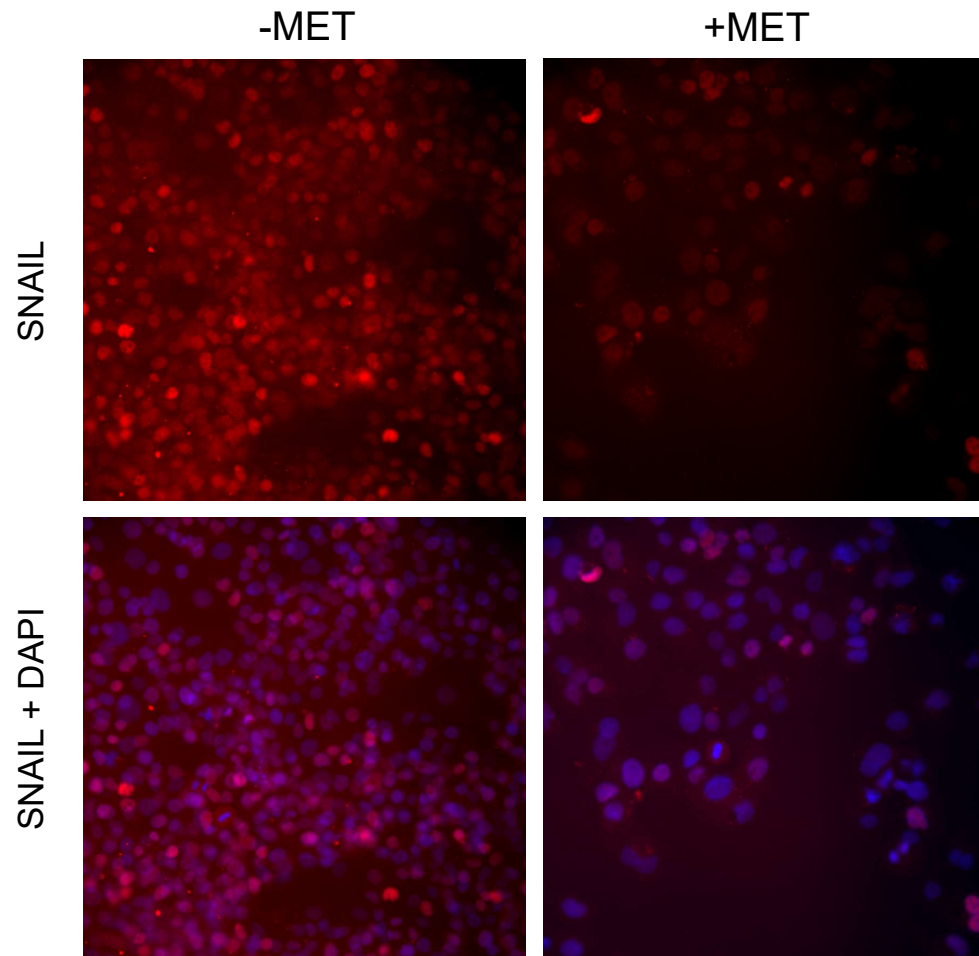
PANC-1 clone B3 ECAD expression



Student's t-test, $p < 0.001$

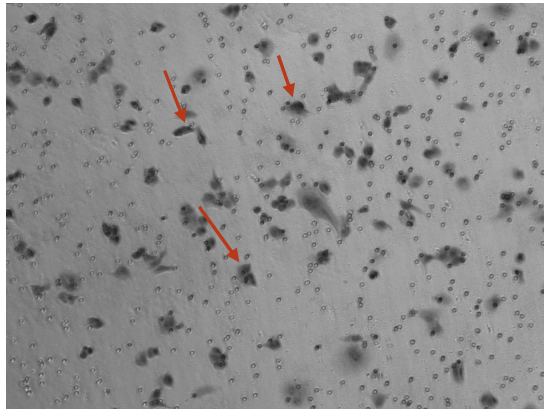
Increase in ECAD expression upon MET induction > 2-fold

PANC-1 ECAD EmGFP cells display a decrease in the mesenchymal marker SNAIL

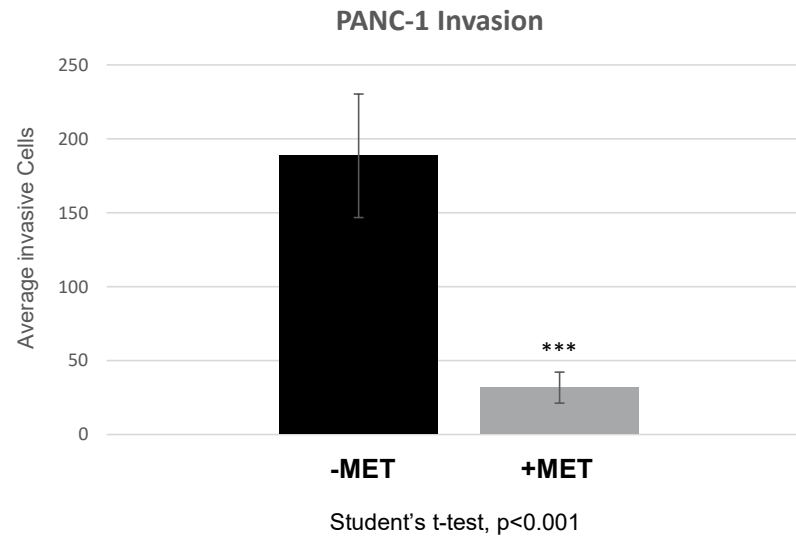
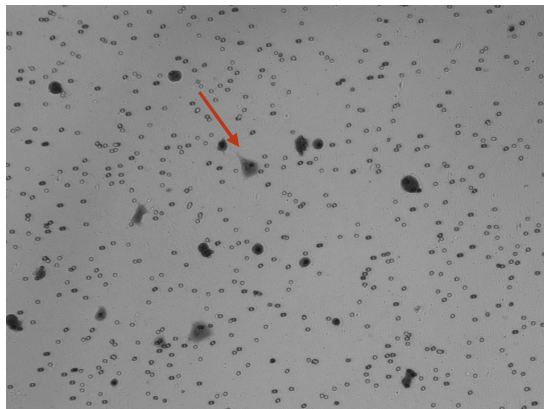


PANC-1 ECAD EmGFP cells show a decreased invasive capacity after EMT

-MET

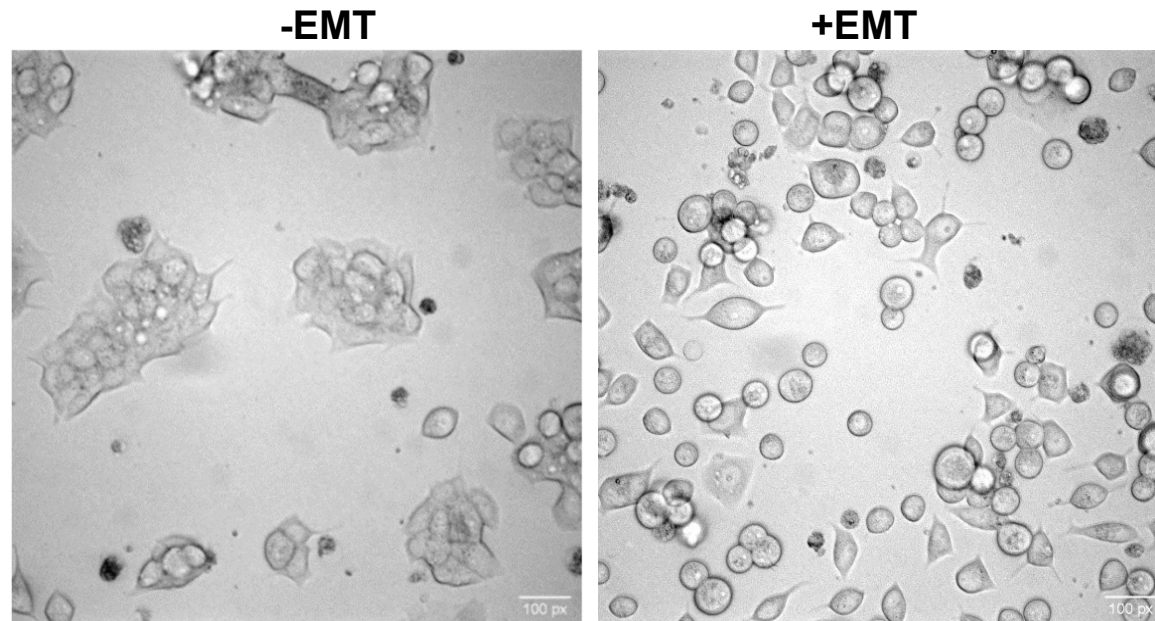


+MET



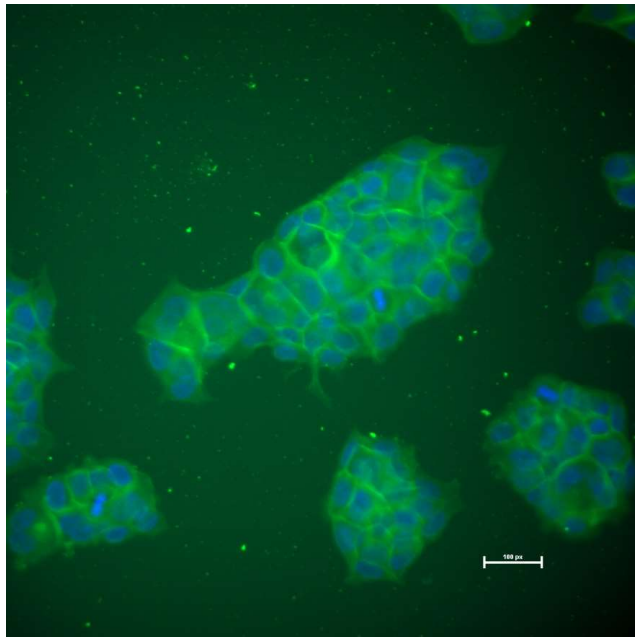
~6 fold decrease in invasive cells upon MET induction

BT-474 ECAD EmGFP EMT cells display a morphology change upon EMT induction



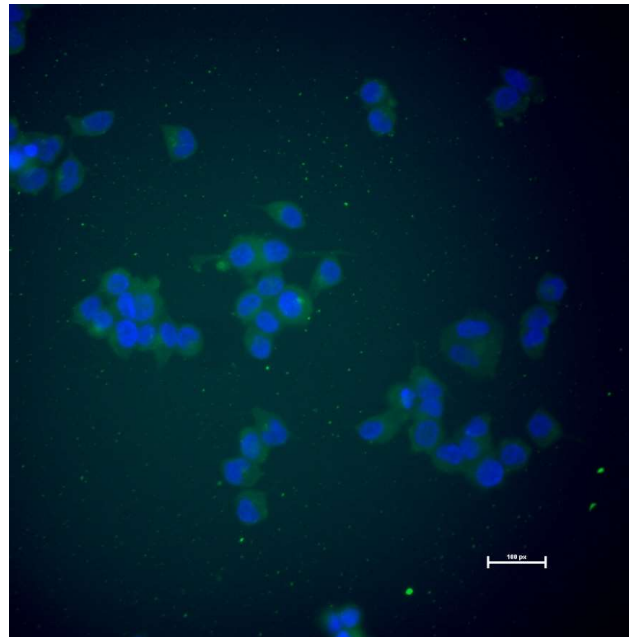
BT-474 ECAD EmGFP EMT display a decrease in endogenous E-cadherin expression

-EMT

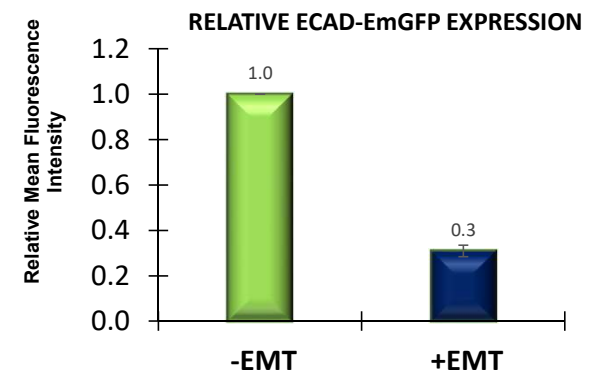


ECAD, Nuclei

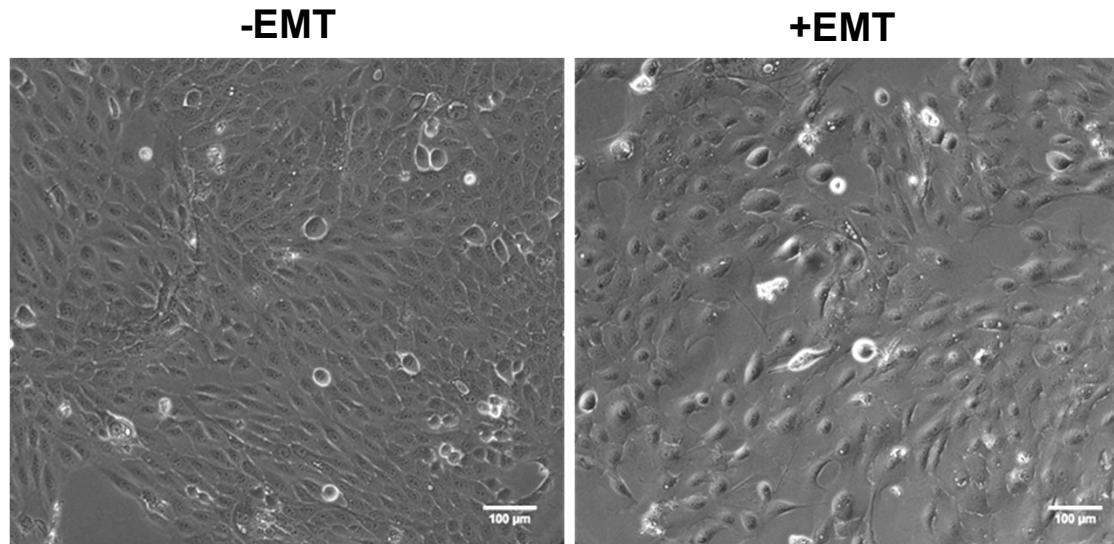
+EMT



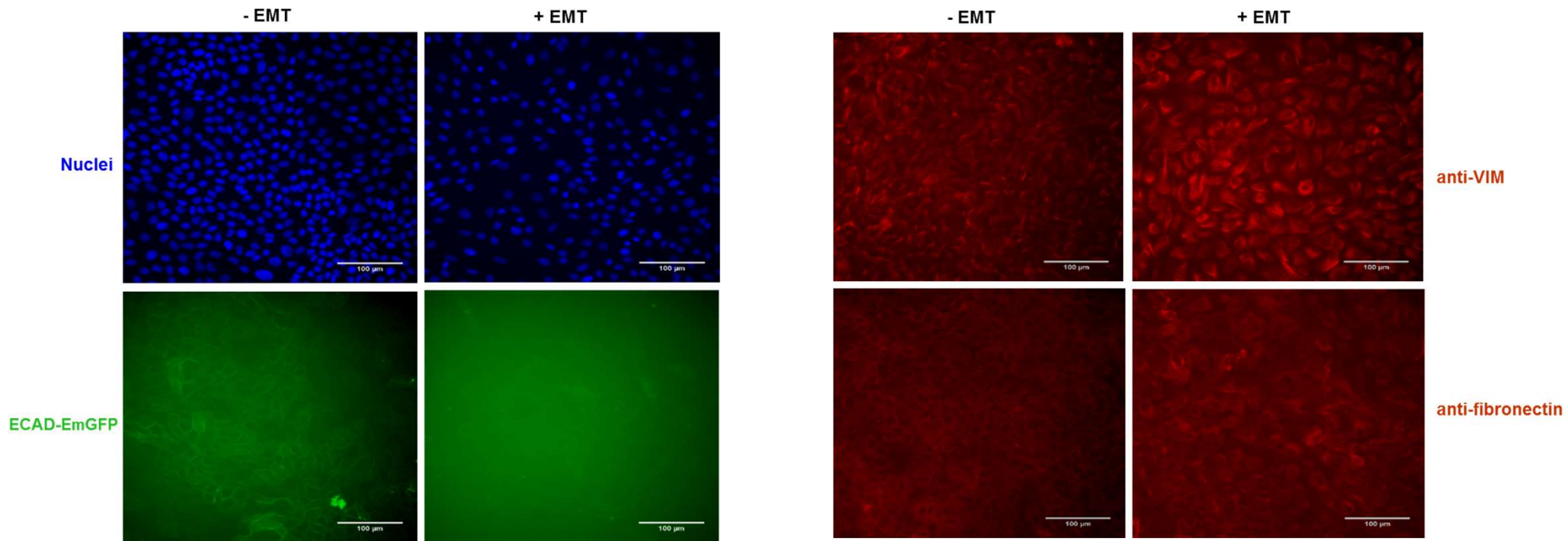
ECAD, Nuclei



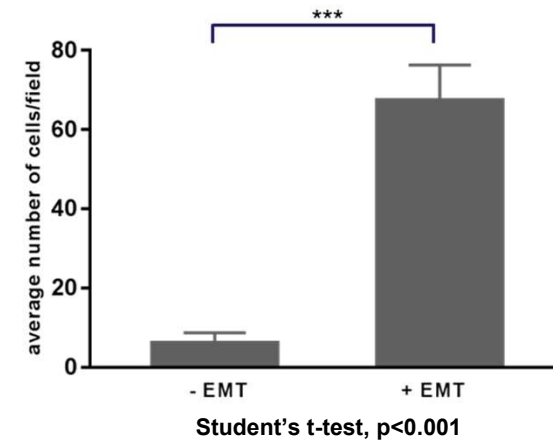
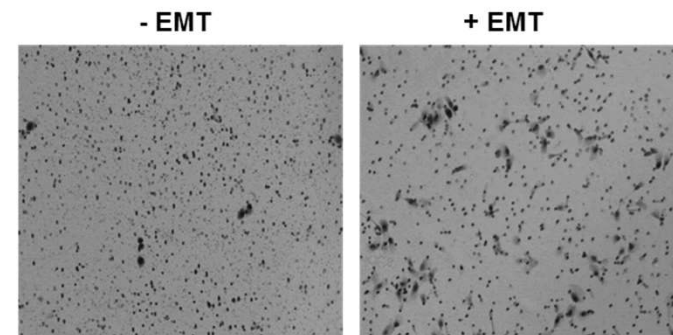
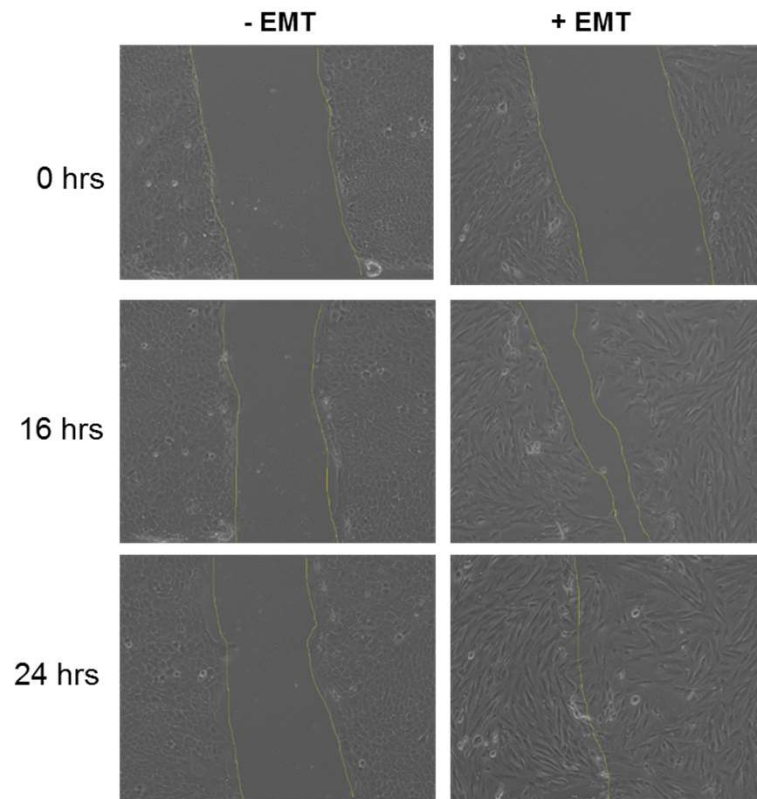
MCF10A ECAD EmGFP EMT cells display a morphology change upon EMT induction



MCF10A ECAD EmGFP cells display both epithelial and mesenchymal marker changes



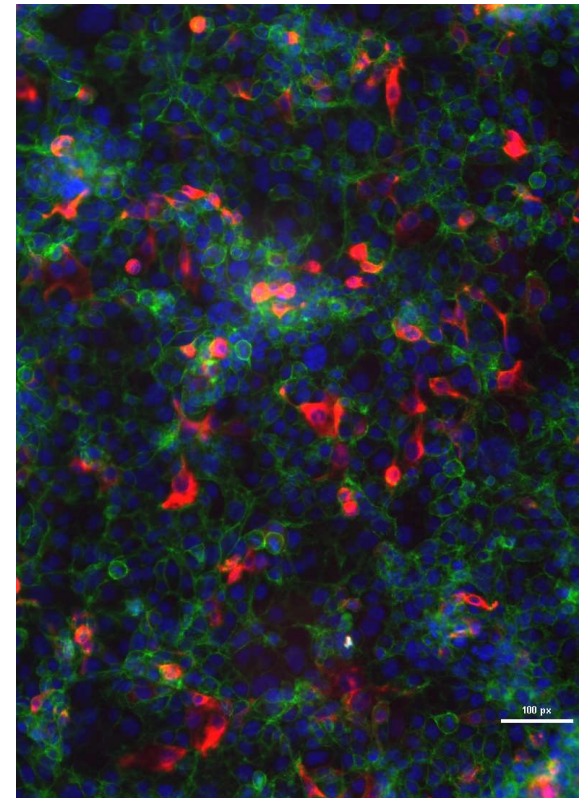
MCF10A ECAD EmGFP EMT cells show a significant increase in motility in a wound healing assay



Conclusion

- ATCC scientists have created a number of EMT/MET reporter cell lines using CRISPR/Cas9 gene editing
- The EMT reporter lines have been thoroughly verified and validated at the genomic, transcriptional, and translational levels, as well as with in-depth induction/transition assays and bio-functional characterization
- These cell lines can be used to monitor cellular status changes in real time or as a platform for drug development

www.atcc.org/EMT



Cultivating collaboration to support global health

Go to www.atcc.org/EMT for more information

Upcoming webinars:

- **On the edge of the bubble: Use of exosomes as reference materials in biomedical research**
October 31, 12:00 ET
- **Prevent Analysis Variability by Using Reference-quality Microbial Genomes — Shift from Consensus to Discernible**
November 14, 12:00 ET

www.atcc.org/webinars

