

## ORIGINAL ARTICLE

# Wnt5a signaling is involved in the aggressiveness of prostate cancer and expression of metalloproteinase

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**Wnt5a is a representative ligand that activates the  $\beta$ -catenin-independent pathway in Wnt signaling. Although it has been reported that abnormal activation of the Wnt/ $\beta$ -catenin-dependent pathway is often observed in human prostate cancer, the involvement of the  $\beta$ -catenin-independent pathway in this cancer is unclear. Abnormal expression of Wnt5a and  $\beta$ -catenin was observed in 27 (28%) and 49 (50%) of 98 prostate cancer cases, respectively, by immunohistochemical analyses. Simultaneous expression of Wnt5a and  $\beta$ -catenin was observed in only five cases, suggesting their exclusive expression. The positive detection of Wnt5a was correlated with high Gleason scores and biochemical relapse of prostate cancer, but that of  $\beta$ -catenin was not. Knockdown and overexpression of Wnt5a in human prostate cancer cell lines reduced and stimulated, respectively, their invasion activities, and the invasion activity required Frizzled2 and Ror2 as Wnt receptors. Wnt5a activated Jun-N-terminal kinase through protein kinase D (PKD) and the inhibition of PKD suppressed Wnt5a-dependent cell migration and invasion. In addition, Wnt5a induced the expression of metalloproteinase-1 through the recruitment of JunD to its promoter region. These results suggest that Wnt5a promotes the aggressiveness of prostate cancer and that its expression is involved in relapse after prostatectomy.**

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**Keywords:** Wnt5a; prostate cancer; Gleason score; invasion; MMP-1

## Introduction

Prostate cancer (PCa) is an increasingly prevalent cancer in men, which develops and progresses under the

influence of androgenic steroids (Jemal *et al.*, 2008). PCa screening by assessing serum prostate-specific antigen (PSA) level has led to increased detection of early-stage PCa that can be cured by radical prostatectomy or radiation therapy. Although overall cancer control rates are high for clinically localized diseases, 20–30% of patients will experience recurrence manifested initially as a rising PSA level without clinical or radiographic metastasis (Han *et al.*, 2003). This biochemical relapse is indicative of the presence of prostate tissue and is assumed to represent cancer. Many patients with biochemical relapse have indolent disease that grows slowly and requires no treatment but some will have rapid progression. A critical issue for patients is determination of whether rising PSA represents local or systemic disease, as the former may be cured by salvage radiotherapy and the latter requires hormone therapy. High risk of recurrence is defined according to preoperative PSA level (>20 ng/ml), biopsy Gleason score ( $\geq 8$ ) and the 1992 American Joint Committee on Cancer clinical T stage ( $\geq T2c$ ) (Partin *et al.*, 1997; D'Amico *et al.*, 2000). These factors are helpful but not perfect due to significant clinical heterogeneity. Identifying molecules that are expressed in clinically localized PCa but associated with PCa invasion and metastasis might significantly improve the prognostic capabilities and management of patients with PCa after a curative approach.

The accumulation of cytoplasmic and nuclear  $\beta$ -catenin has been documented in many malignancies, including breast, gastric, colon, esophageal, hepatic, pancreatic, thyroid, cerebellar and skin carcinoma (Polakis, 2000; Kikuchi, 2003). In PCa, abnormal accumulation of  $\beta$ -catenin has been detected in 20–50% of tumors, and high levels of  $\beta$ -catenin expression are associated with advanced, metastatic and hormone-refractory PCa (Yardy and Brewster, 2005). Although  $\beta$ -catenin was originally identified as a cadherin-binding protein, it is known to be a key molecule in the Wnt signaling pathway. Wnt proteins are a large family of cysteine-rich secreted molecules that exhibit unique expression patterns and distinct functions in development (Logan and Nusse, 2004). The well-established intracellular signaling pathway activated by Wnt proteins is a  $\beta$ -catenin-dependent signaling pathway that is

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highly conserved among species (Logan and Nusse, 2004; Kikuchi *et al.*, 2009). When Wnt acts on its cell-surface receptor, which consists of Frizzled and low-density lipoprotein receptor-related protein 5/6, cytoplasmic  $\beta$ -catenin is stabilized by release from the Axin complex. The accumulated  $\beta$ -catenin is translocated to the nucleus, where it binds to the transcription factor T-cell factor/lymphoid enhancer factor and thereby stimulates the expression of various genes (Hurlstone and Clevers, 2002). At least 19 Wnt members have been shown to be present in mammals to date, and some Wnts, including Wnt1, Wnt3a and Wnt7a, activate the  $\beta$ -catenin pathway. In addition to T-cell factor/lymphoid enhancer factor,  $\beta$ -catenin binds to androgen receptor, and these Wnt ligands also increase androgen receptor-mediated transcription even in the absence of androgen ligands (Verras *et al.*, 2004). Therefore, activation of the  $\beta$ -catenin pathway appears to be involved in the initiation and progression of PCa as shown in other tumors.

Another class of Wnts, including Wnt2, Wnt4, Wnt5a, Wnt5b, Wnt6 and Wnt11, activates a  $\beta$ -catenin-independent pathway that primarily modulates cell movement and polarity (Veeman *et al.*, 2003). This pathway is known to activate several protein kinases including  $\text{Ca}^{2+}$ /calmodulin-dependent protein kinase II, protein kinase C (PKC), c-jun N-terminal kinase (JNK) and Rho-associated kinase. Wnt5a is a representative of the Wnt proteins that activate the  $\beta$ -catenin-independent pathway, which includes multiple pathways, and Wnt5a activates distinct routes (Veeman *et al.*, 2003; Kurayoshi *et al.*, 2007; Kikuchi and Yamamoto, 2008). It has been shown that Wnt5a stimulates migration in some cancer cells and that its expression is correlated with the aggressiveness of melanoma, breast cancer, lung cancer and gastric cancer (Weeraratna *et al.*, 2002; Veeman *et al.*, 2003; Huang *et al.*, 2005; Kurayoshi *et al.*, 2006; Pukrop *et al.*, 2006; Kikuchi and Yamamoto, 2008; Yamamoto *et al.*, 2009), suggesting that Wnt5a has oncogenic properties. Other reports indicate that Wnt5a acts as a tumor suppressor based on the finding that Wnt5a has an ability to inhibit proliferation, migration and invasiveness in thyroid tumor and colorectal cancer cell lines (Dejmek *et al.*, 2005; Kremenskaja *et al.*, 2005). Although the  $\beta$ -catenin-independent pathway activated by Wnt5a is also involved in tumorigenesis, the relationship between the expression of Wnt5a and PCa is not well understood. This study showed that a high expression level of Wnt5a significantly correlates with biochemical relapse of clinically localized PCa cases treated with radical prostatectomy. It was also shown that Wnt5a promotes invasion activities of PCa cells at least through the activation of JNK and the expression of matrix metalloproteinase-1 (MMP-1).

## Results

### *Immunohistochemical analysis of Wnt5a in PCa tissues*

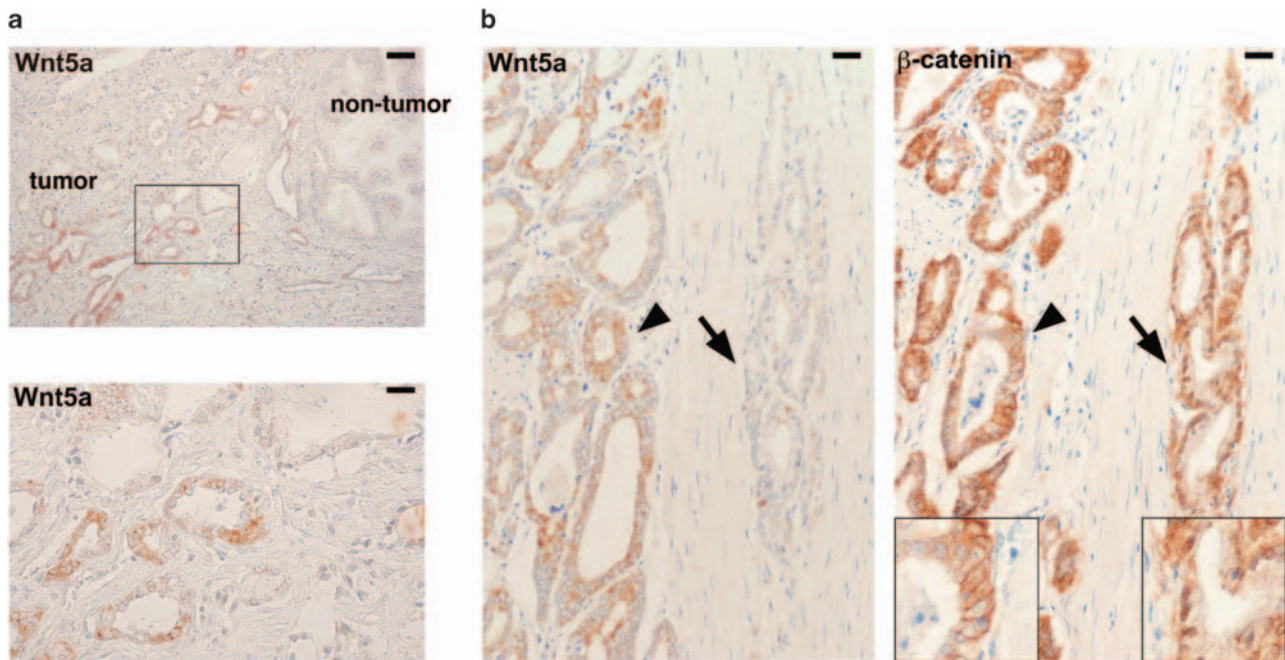
Preceding immunohistochemical studies showed that approximately 30% of 237 gastric cancer cases exhibit high expression levels of Wnt5a (Kurayoshi

*et al.*, 2006). Using the same antibody, we examined the expression of Wnt5a in PCa. In adjacent non-neoplastic prostate tissue including glandular hyperplasia, weak or no staining of Wnt5a was observed in epithelial and stromal cells (Figure 1a). However, PCa tissue showed stronger and more extensive staining than corresponding non-neoplastic mucosa (Figure 1a). In the majority of PCa cases containing Wnt5a-positive tumor cells, more than 50% of the tumor cells showed cytoplasmic staining for Wnt5a. Of 98 PCa cases, 27 (28%) were positive for Wnt5a. In these PCa cases, no tendency of strong staining for Wnt5a at the invasive front was observed. The relationship between Wnt5a staining and clinicopathological characteristics was analyzed. Wnt5a positivity was found more frequently in PCa showing a Gleason score  $\geq 8$  (12/24, 50%) than in PCa showing a Gleason score  $\leq 7$  (15/74, 20%,  $P=0.0079$ , Fisher's exact test) (Supplementary Table S1). Therefore, the expression of Wnt5a may be associated with the aggressiveness of PCa. However, Wnt5a staining did not correlate with age, pT classification or preoperative PSA concentration (Supplementary Table S1).

An immunohistochemical analysis of  $\beta$ -catenin expression in PCa was also performed. Although  $\beta$ -catenin was usually detected at the cell membranes, cytosomal or nuclear accumulation of  $\beta$ -catenin was observed in 49 (50%) of 98 PCa cases (Supplementary Table S2). However,  $\beta$ -catenin staining in cytoplasm and nucleus did not correlate with age, pT classification, Gleason score or preoperative PSA concentration (Supplementary Table S2). These results suggested that the abnormal expression of  $\beta$ -catenin may be involved in the initiation of PCa but not in the aggressiveness of the tumor. The relationship between the expression of Wnt5a and  $\beta$ -catenin in PCa was analyzed further. Wnt5a positivity was found more frequently in cytosomal or nuclear  $\beta$ -catenin-negative cases (22/49, 45%) than in cytosomal or nuclear  $\beta$ -catenin-positive cases (5/49, 10%,  $P=0.0002$ , Fisher's exact test) (Supplementary Table S1). In the five PCa cases positive for both Wnt5a and cytosomal or nuclear  $\beta$ -catenin, there was a tendency that Wnt5a-positive cancer cells do not show cytosomal or nuclear accumulation of  $\beta$ -catenin (Figure 1b). These findings suggested that Wnt5a and cytosomal and nuclear  $\beta$ -catenin are expressed in an exclusive pattern in PCa.

### *Relapse of patients with PCa expressing Wnt5a*

Next, the relationship between Wnt5a immunostaining and relapse in PCa was examined. Univariate analysis revealed that the expression of Wnt5a ( $P=0.0045$ , log-rank test) decreases the ratios of relapse-free survival in patients as well as high Gleason score ( $P<0.0001$ ) and high preoperative PSA concentration ( $P=0.0167$ ) (Figure 2a), whereas cytosomal or nuclear accumulation of  $\beta$ -catenin, age and pT classification did not correlate with relapse (Figure 2b). A Cox proportional hazards multivariate model was used to examine the relationship between clinicopathological factors, expression of Wnt5a and  $\beta$ -catenin, and relapse-free survival. Multi-



**Figure 1** Immunohistochemical analyses of Wnt5a and  $\beta$ -catenin in prostate cancer (PCa). (a) Top panel, expression levels of Wnt5a in nontumor and tumor regions were compared. Bar, 50  $\mu$ m. Bottom panel, high-magnification image of the fields indicated by the box in the upper panel. The tumor regions were enlarged. Bar, 12  $\mu$ m. (b) A sample of PCa was stained with anti-Wnt5a (left panel) and anti- $\beta$ -catenin (right panel) antibodies. Bars, 25  $\mu$ m. Arrowheads indicate Wnt5a-positive and cytosomal or nuclear  $\beta$ -catenin-negative PCa cells. Arrows indicate Wnt5a-negative and cytosomal or nuclear  $\beta$ -catenin-positive PCa cells. Insets, high-magnification images of the fields indicated by the arrow and arrowhead in the right panel.

ivariate analysis indicated that Wnt5a staining, Gleason score and preoperative PSA concentration are independent predictors of relapse of PCa, but cytosomal or nuclear  $\beta$ -catenin staining, age and pT classification are not (Table 1). These results suggested that Wnt5a expression contributes directly to the malignant potential of PCa.

#### *Involvement of Wnt5a in migration and invasion of PCa cells*

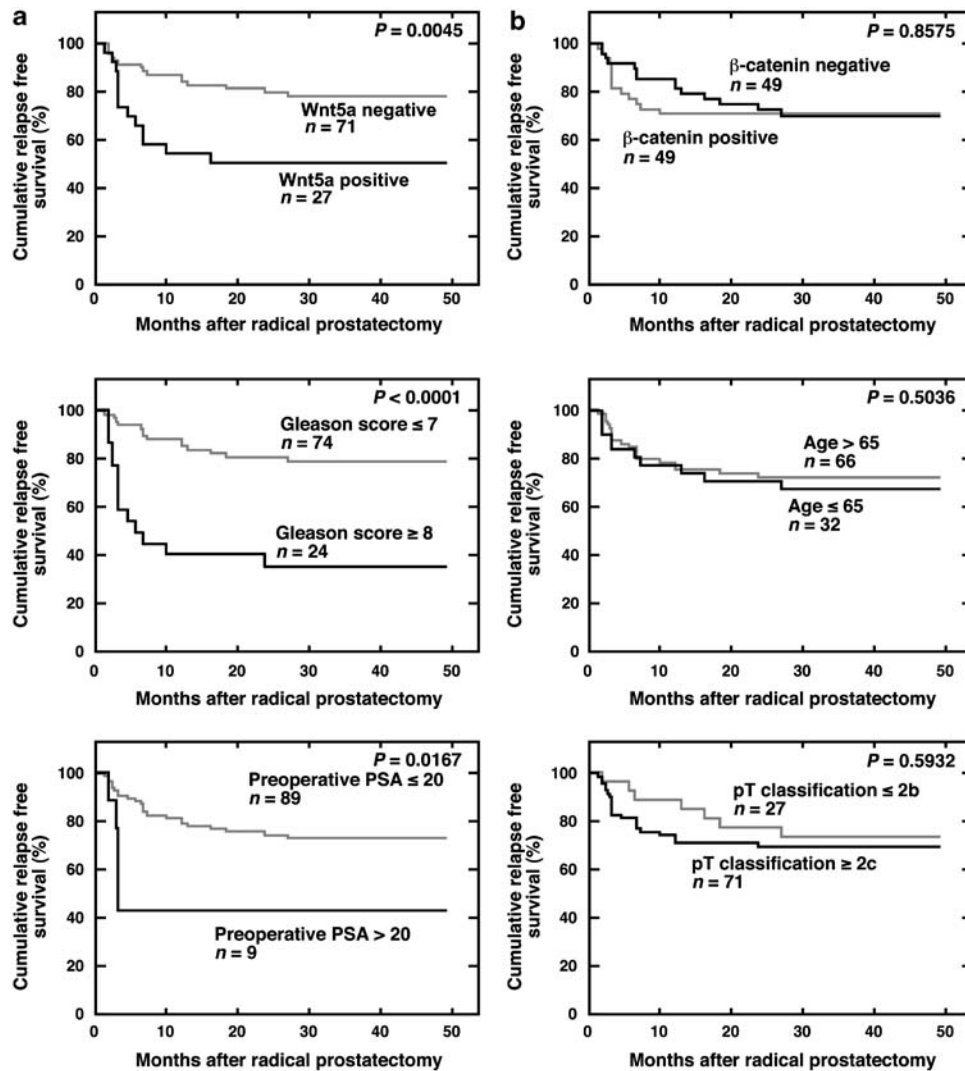
To understand the relationship between the expression of Wnt5a and aggressiveness of PCa, we examined the expression levels of various Wnts in PCa cells (Figure 3a). DU145 and PC3 cells are androgen-independent PCa cells and LNCap cells are androgen-dependent PCa cells. *Wnt5a* mRNA was highly expressed in DU145 and LNCap cells, but PC3 cells showed a low expression level. mRNA expression of *Wnt4* was observed in all cell lines. *Wnt5b* mRNA was detected in DU145 but not in LNCap and PC3 cells. Neither *Wnt3a* nor *Wnt11* mRNA was detected in these cells. Wnt5a siRNA reduced the mRNA level of *Wnt5a* in LNCap cells and suppressed migration activity in transwell assays using a Boyden chamber (Figure 3b, Supplementary Figure S1). Knockdown of Wnt5a in DU145 cells also decreased cell migration (Figure 3c), but knockdown of Wnt5b did not (data not shown). Wnt7a siRNA did not affect cell migration of LNCap and DU145 cells (Figures 3b and c, Supplementary Figure S1). Migration activity in Wnt4-knockdown cells

was decreased to about 70% of control cell (Figure 3c). Wnt4 has been reported to activate both the  $\beta$ -catenin-dependent and  $\beta$ -catenin-independent pathways (Bernard and Harley, 2007), but the role of Wnt4 in cell migration is not well understood. Therefore, we did not study the role of Wnt4 in migration of PCa cells further. It is known that DU145 and PC3 cells, but not LNCap cells, have invasion activities. Whereas control DU145 cells invaded the Matrigel, Wnt5a knockdown cells were less invasive (Figure 3c). Transient overexpression of Wnt5a enhanced the invasion activities of PC3 cells, but that of Wnt5a CA, which is an inactive form of Wnt5a generated by mutating Cys104 to Ala (Kurayoshi *et al.*, 2007), did not (Figure 3d).

Secreted Frizzled-related protein 2 (sFRP2) binds to Wnt proteins and acts as a negative regulator of Wnt signaling (Kawano and Kypta, 2003). DU145 cells were allowed to migrate in scratch-wound cultures, resulting in wound closure after 24 h, and the migration of DU145 cells in scratch-wound cultures was inhibited by the addition of sFRP2 conditioned medium (CM) (Figure 3e). Furthermore, an anti-Wnt5a antibody suppressed the migration of DU145 cells in scratch-wound cultures (Figure 3f). Taken together, these results indicated that Wnt5a stimulates cell migration and invasion in PCa cells.

#### *Mechanism of Wnt5a-induced invasion by PCa cells*

The mechanism by which Wnt5a induces invasion of DU145 and PC3 cells was examined as an *in vitro* model



**Figure 2** Relapse-free survival of patients with prostate cancer (PCa) expressing Wnt5a or  $\beta$ -catenin. (a) Kaplan–Meier curves of patients with PCa with Wnt5a-negative or Wnt5a-positive PCa (upper panel), with low Gleason score ( $\leq 7$ ) or high Gleason score ( $\geq 8$ ) PCa (middle panel), and with low preoperative prostate-specific antigen (PSA) concentration ( $\leq 20$  ng/ml) or high preoperative PSA concentration ( $> 20$  ng/ml) (lower panel). (b) Kaplan–Meier curves of patients with PCa with or without  $\beta$ -catenin expression in the cytoplasm and nucleus (upper panel), with younger ( $\leq 65$ ) or older ( $> 65$ ) age (middle panel) and with low pT classification ( $\leq 2b$ ) or high pT classification ( $\geq 2c$ ) PCa (lower panel).

of invasive PCa cells. Frizzled (Fz) family members are known to function as Wnt receptors (Wang *et al.*, 2006). Fz2, Fz6 and Fz7 were expressed highly in DU145 cells compared with other Fzs (Supplementary Figure S2a). Wnt5a bound to Fz2, Fz5 and Fz8 but not to Fz6 and Fz7 (Sato *et al.*, 2010) (data not shown), and Ror2, a single transmembrane protein, is known to function as a Wnt5a receptor (Oishi *et al.*, 2003). To examine which receptor(s) are involved in cell migration of DU145 cells, we depleted Wnt receptors by siRNA (Supplementary Figure S2b). Knockdown of Fz2 and Ror2 but not Fz6 reduced cell invasion by DU145 cells significantly (Figure 4a). Knockdown of Fz7 showed a tendency to decrease cell invasion, but the difference was not statistically significant (Figure 4a). Wnt5a induced the phosphorylation of protein kinase D (PKD)/PKC $\mu$  in DU145 cells (Figure 4b). PKD is a protein kinase, which

not only is a direct target of diacylglycerol but also lies downstream of novel PKCs (Rozenfurt *et al.*, 2005). Therefore, these results suggested that Wnt5a activates novel PKCs. Staurosporine, a PKC inhibitor, indeed suppressed Wnt5a-dependent migration and invasion activities of DU145 cells (Figure 4b). Furthermore, Gö6976, an inhibitor that is relatively specific for PKD, suppressed Wnt5a-dependent migration and invasion activities of DU145 cells (Figure 4b). These results suggested that PKD activation by Wnt5a probably through the activation of novel PKCs is involved in Wnt5a-dependent migration and invasion. In addition, Wnt5a activated small G protein Rac, which has a role in cell migration (Figure 4c).

It has been reported that many genes associated with aggressive behavior, including Wnt5a and MMP-9, were increased in androgen-independent metastatic tumors

**Table 1** Multivariate analysis of factors influencing relapse-free survival

	Hazard ratio (95% CI)	$\chi^2$	P-value
<i>Wnt5a staining</i>			
Negative	1 (Reference)	3.907	0.0312
Positive	2.451 (1.007–5.960)		
<i>Cytosomal or nuclear <math>\beta</math>-catenin staining</i>			
Negative	1 (Reference)	1.681	0.1947
Positive	1.782 (0.744–4.265)		
<i>Age</i>			
$\leq 65$	1 (Reference)	0.101	0.7507
$> 65$	1.138 (0.513–2.525)		
<i>pT classification</i>			
$\leq 2b$	1 (Reference)	0.161	0.6882
$\geq 2c$	1.215 (0.469–3.148)		
<i>Gleason score</i>			
$\leq 7$	1 (Reference)	10.976	0.0009
$\geq 8$	3.912 (1.745–8.769)		
<i>Preoperative PSA concentration</i>			
$\leq 20$	1 (Reference)	4.574	0.0325
$> 20$	3.176 (1.101–9.161)		

Abbreviations: CI, confidence interval; PSA, prostate-specific antigen.

and that MMP-1 is involved in invasion by DU145 cells (Stanbrough *et al.*, 2006; Zeng *et al.*, 2006). The stimulation of DU145 cells with Wnt5a increased the expression of *MMP-1* (collagenase) mRNA but not those of *MMP-2* (gelatinase A), *MMP-3* (stromelysin-1) or *MMP-9* (gelatinase B) mRNA, and knockdown of Wnt5a decreased the levels of *MMP-1* mRNA (Figure 5a). Consistent with these results, Wnt5a increased the protein levels of MMP-1 (Figure 5a). As shown in transient expression of Wnt5a in PC3 cells, the invasion activities of PC3 cells were also enhanced by stable expression of Wnt5a, and knockdown of MMP-1 suppressed the invasion activities (Figure 5a). To evaluate the role of Wnt5a on *MMP-1* promoter activity, we transfected the *MMP-1* 5'-flanking region containing two activator protein-1 (AP-1) sites (–517/+60) with *luciferase* gene into PC3 cells (Figure 5b). Wnt5a increased the promoter activity (Figure 5b). It was reported that the proximal AP-1 site at –72 is necessary for the phorbol ester-induced expression of MMP-1 (Hall *et al.*, 2003). The basal reporter gene activity was decreased by introducing mutations in this area (*AP-1 mut*), and Wnt5a did not stimulate it (Figure 5b). Consistent with these results, Wnt5a indeed induced the phosphorylation of JNK at Thr183 and Tyr185, which indicates the activation of JNK, in DU145 cells (Figure 5c). In addition, G66976 suppressed Wnt5a-dependent JNK activation (Figure 5c), suggesting Wnt5a activates JNK through PKD. c-Jun or JunD has been shown to bind to the AP-1 site in the promoter region of *MMP-1* in MKN45 and U937 cells (Doyle *et al.*, 1997; Wu *et al.*, 2006). In a chromatin immunoprecipitation assay, *MMP-1* promoter occupancy of JunD was decreased in DU145/Wnt5a knockdown cells compared with DU145/control cells (Figure 5d). Furthermore, G66976 interfered the binding of JunD to *MMP-1* promoter, but knockdown of Rac did not affect the

Wnt5a-induced binding of JunD and *MMP-1* promoter (Figure 5d). Taken together, these results suggested that Fz2 and Ror2 function as Wnt5a receptors in this signaling of PCa cells and that PKD and JNK mediate Wnt5a-dependent expression of MMP-1 through the recruitment of JunD to the AP-1 site of the *MMP-1* promoter.

## Discussion

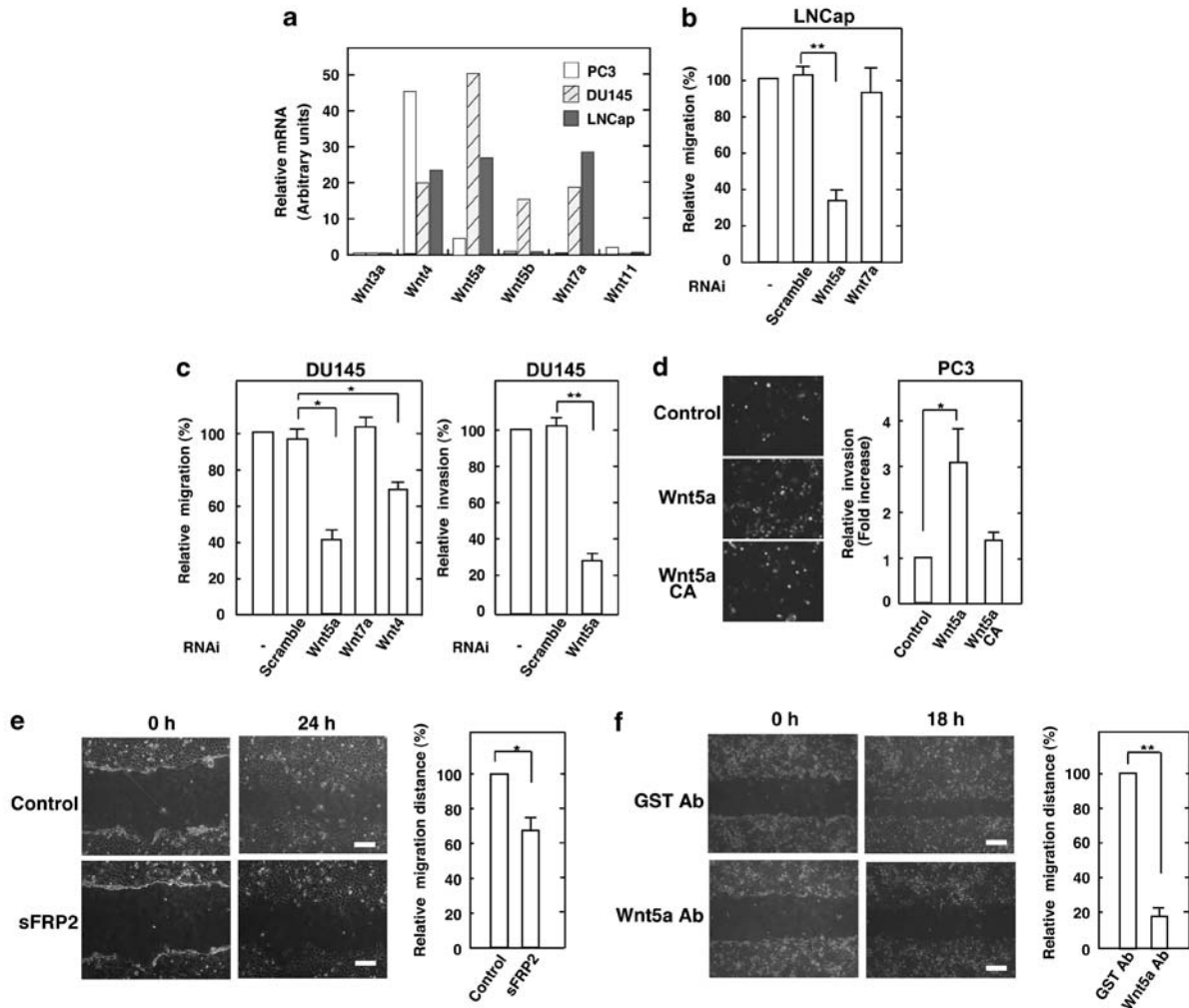
### *Clinical relevance of Wnt5a expression in PCa*

PCa is the most commonly diagnosed malignancy, and its incidence is rising in many countries (Hsing *et al.*, 2000; Jemal *et al.*, 2008). The present results showed that the expression of Wnt5a is correlated with a prostatectomy Gleason score  $\geq 8$ . Gleason score is the most frequently used grading system for PCa and is a powerful prognostic indicator (Gleason and Mellinger, 1974). It has also been reported that prostatectomy Gleason score is a predictor of distant metastasis (Pound *et al.*, 1999). When the Gleason score was  $\geq 8$ , the probability of distant metastasis was  $>65\%$  at 5 years. In the present cases, patients with a Gleason score  $\geq 8$  indeed showed a significantly higher risk of biochemical relapse. Furthermore, multivariate analyses showed that the expression of Wnt5a is an independent predictor of biochemical relapse, along with prostatectomy Gleason score and preoperative PSA concentration, indicating that Wnt5a might be a good indicator of the recurrence of PCa. Biochemical relapse indicates the presence of PCa, which may have already migrated to distant sites when the prostatectomy was performed. PCa cells positive for Wnt5a expression could have an ability to invade. Knockdown and overexpression of Wnt5a in PCa cells indeed inhibited and activated, respectively, their migration and invasion activities. Taken together with the observations that sFRP2 and anti-Wnt5a antibody inhibited migration of PCa cells, it is conceivable that Wnt5a is a candidate molecular target of therapy for PCa.

It has been reported that high levels of  $\beta$ -catenin are associated with aggressiveness in PCa (Yardy and Brewster, 2005). Among the current 98 cases, PCa abnormally expressing both Wnt5a and  $\beta$ -catenin was observed in only 5 cases. This is similar to the situation in cases of gastric cancer (Kurayoshi *et al.*, 2006). At present the reason why the expression of Wnt5a and  $\beta$ -catenin is mutually exclusive is not known.

### *Mechanism by which Wnt5a promotes aggressiveness of PCa*

How is Wnt5a involved in the aggressiveness of PCa? Wnt5a increased *MMP-1* mRNA and protein levels in PCa cells, but it did not induce the expression of *MMP-2*, *MMP-3* and *MMP-9* mRNAs. MMPs are zinc-containing endopeptidases that degrade extracellular matrix components and are associated with cancer cell invasion and metastasis (Egeblad and Werb, 2002). It was suggested that upregulation of MMP-1 is an

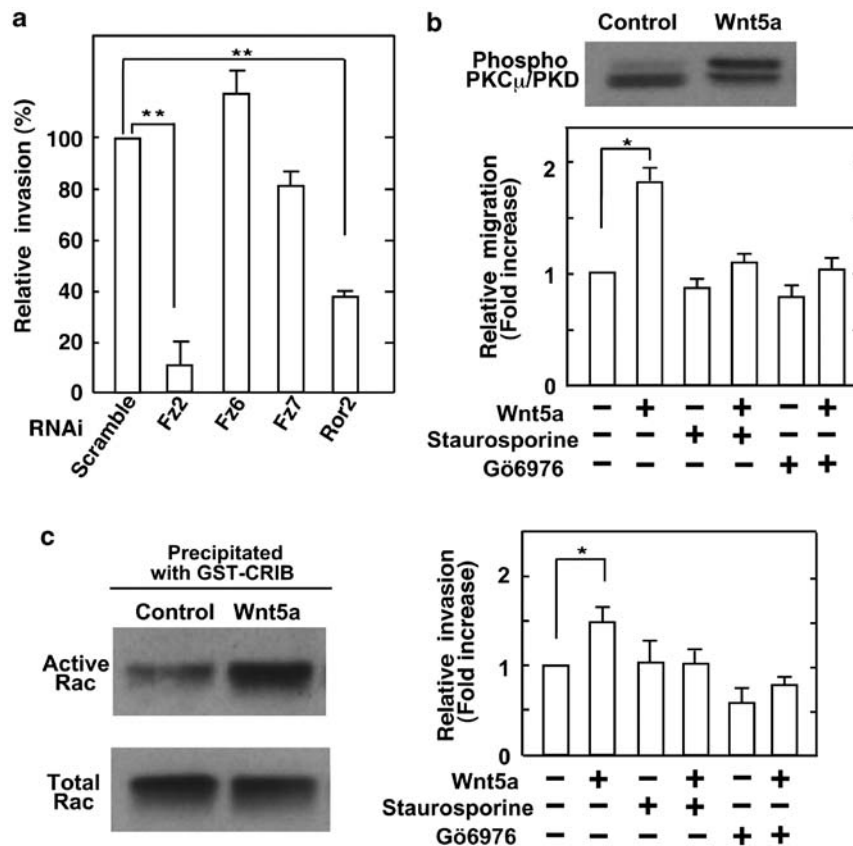


**Figure 3** Wnt5a is involved in migration and invasion of prostate cancer (PCa) cells. (a) The mRNA levels of various Wnts in PC3, DU145 and LNCap cells were quantified by quantitative reverse transcription (RT)-PCR. (b) LNCap cells transfected with *scrambled* (control), *Wnt5a* or *Wnt7a* siRNA were placed in transwell chambers for a migration assay toward fibronectin. In three independent fields,  $130 \pm 7$  untransfected cells transmigrated. Relative migration activities were expressed as percentages for the migration of untransfected cells. The results shown are means  $\pm$  s.e. from three independent experiments.  $**P < 0.01$ . (c) DU145 cells transfected with *scrambled*, *Wnt5a*, *Wnt7a* or *Wnt4* siRNA were placed in noncoated (left panel) or Matrigel-coated (right panel) transwell chambers for migration and invasion assays. In three independent fields,  $189 \pm 11$  untransfected cells transmigrated and  $34 \pm 6$  untransfected cells invaded. Relative migration and invasion activities were expressed as percentages for the migration and invasion of untransfected cells.  $*P < 0.05$ ;  $**P < 0.01$ . (d) Left panel, PC3 cells transfected with pPGK empty vector (control), pPGK/wild-type Wnt5a (Wnt5a) or pPGK/Wnt5a<sup>C104A</sup> (Wnt5a CA) were placed in Matrigel-coated transwell chambers for an invasion assay. Right panel, in eight independent fields,  $22 \pm 12$  of PC3 cells transfected with empty vector invaded. Relative invasion activities were expressed as fold increases compared with the invasion of transfectants with empty vector.  $*P < 0.05$ . (e) Control or secreted Frizzled-related protein 2 (sFRP2) conditioned medium (CM) was added to DU145 cells and then the cells were wounded. The culture was further continued for 24 h. Bars, 200  $\mu$ m. Right graph, migration distances were measured and expressed as percentages of the migration in the presence of control CM.  $*P < 0.05$ . (f) DU145 cells incubated with anti-glutathione *S*-transferase (GST) or anti-Wnt5a antibody (10  $\mu$ g/ml) were wounded. The culture was continued for 18 h. Bars, 200  $\mu$ m. Right graph, migration distances were measured and expressed as percentages of the migration in the presence of anti-GST antibody.  $**P < 0.01$ .

important factor in the aggressiveness of PCa and bone marrow metastasis (Hart *et al.*, 2002). This study showed that knockdown of MMP-1 indeed suppressed Wnt5a-dependent invasion of PC3 cells *in vitro*.

Although how MMP-1 is overexpressed in PCa is not clear, one report showed that a pathway involving FAK, PI3K and PKC $\delta$  activated by engagement of integrin  $\alpha 5 \beta 1$  with fibronectin regulates the expression of MMP-1 in DU145 cells (Zeng *et al.*, 2006). It was also shown

previously that Wnt5a induces the expression of MMP-1 in endothelial cells although the mechanism was not known (Masckauchan *et al.*, 2006). This study found that Wnt5a induces the phosphorylation of PKD/PKC $\mu$ , which is a direct target of novel PKCs (PKC $\delta$ , PKC $\epsilon$ , PKC $\eta$  and PKC $\theta$ ), and activates JNK. Furthermore, it was shown that Wnt5a signaling recruits JunD to the AP-1 site of the *MMP-1* promoter region. These results were consistent with the previous observations



**Figure 4** Wnt5a stimulates cell migration and invasion by activating protein kinase C (PKC). (a) DU145 cells transfected with *scrambled*, *Fz2*, *Fz6*, *Fz7* or *Ror2* siRNA were placed in Matrigel-coated transwell chambers for an invasion assay. In three independent fields,  $37 \pm 7$  transfectants with *scrambled* siRNA invaded. Relative invasion activities were expressed as fold increases compared with the transfectants with *scrambled* siRNA. The results shown are means  $\pm$  s.e. from three independent experiments.  $**P < 0.01$ . (b) Top panel, DU145 cells were stimulated with 300 ng/ml Wnt5a for 30 min, then the cell lysates were probed with anti-phospho protein kinase D (PKD)/PKC $\mu$  antibody. Middle panel, after DU145 cells were treated with 1.25 nM staurosporine or 100 nM Gö6976 for 2 h, the cells were subjected to the transwell migration assay in the presence or absence of 200 ng/ml Wnt5a. Relative migration activities were expressed as fold increases compared with that of cells in the absence of Wnt5a and without staurosporine. Bottom panel, after DU145 cells were treated with 2.5 nM staurosporine or 100 nM Gö6976 for 2 h, the cells were subjected to the Matrigel invasion assay in the presence or absence of 600 ng/ml Wnt5a.  $*P < 0.05$ . (c) DU145 cells were treated with 50 ng/ml Wnt5a for 1 h, and then cells were lysed and probed with anti-Rac1 antibody. The same lysates were incubated with glutathione *S*-transferase (GST)-Cdc42/Rac-interacting binding domain (CRIB) immobilized on glutathione-sepharose to examine the activation of Rac. The total lysates and precipitates were probed with anti-Rac1 antibody. The results shown are representative of three independent experiments.

that the AP-1 site in the promoter region of the *MMP-1* gene is critical for its transcriptional regulation (Angel *et al.*, 1987) and that c-Jun and JunD bind to the AP-1 site (Doyle *et al.*, 1997; Wu *et al.*, 2006). In addition, knockdown of *Fz2* and *Ror2* reduced Wnt5a-dependent invasion and increment in *MMP-1* mRNA. From these results, it is suggested that the binding of Wnt5a to *Fz2* and/or *Ror2* stimulates the expression of *MMP-1* by the recruitment of JunD to the AP-1 binding site of the promoter region of the *MMP-1* gene through the activation of PKC and JNK.

As shown in other cells (Kurayoshi *et al.*, 2006, 2007), Wnt5a activated Rac, which stimulates cell migration, in DU145 cells. However, the Wnt5a-Rac pathway was not involved in the expression of *MMP-1*. Therefore, it is also possible that Wnt5a activates Rac to stimulate cell migration independently of transcription and that this

pathway cooperates with the Wnt5a/PKC pathway to stimulate cell invasion.

Although evidence has been accumulated that Wnt5a is expressed in various cancers (Weeraratna *et al.*, 2002; Veeman *et al.*, 2003; Huang *et al.*, 2005; Kurayoshi *et al.*, 2006; Pukrop *et al.*, 2006; Kikuchi and Yamamoto, 2008; Yamamoto *et al.*, 2009), how Wnt5a is upregulated in cancer cells has not been determined. It has been shown that Wnt5a is upregulated at the transcriptional level in PCa by hypomethylation in the 5'-untranslated region and that three CpG sites were consistently methylated in normal tissues but not in primary PCa (Wang *et al.*, 2007). It was also reported that membrane type 1-MMP is upregulated in PCa species and that membrane type 1-MMP-induced phenotypic changes are dependent on the expression of Wnt5a (Cao *et al.*, 2008). It is intriguing to speculate

that Wnt5a induced by membrane type 1-MMP upregulates MMP-1 and these three molecules work cooperatively to stimulate cell migration and invasion in PCa cells. Various alterations, including gene amplification, genetic mutations, transcriptional activation and epigenetic alterations, could upregulate Wnt5a expression in PCa. Further studies will be necessary to understand the functions of Wnt5a and the pathological significance of the abnormal expression of Wnt5a in cancer cells.

## Materials and methods

### Materials and chemicals

The *MMP-1* promoter-*luciferase* constructs and pGEX- $\alpha$ PAK-CRIB were provided by Dr I Clark (University of East Anglia, Norwich, UK) (Hall *et al.*, 2003) and Dr K Kaibuchi (Nagoya University, Nagoya, Japan), respectively. DU145, LNCap and PC3 cells were obtained from American Type Culture Collection (Manassas, VA, USA) and were grown in RPMI-1640 medium supplemented with 10% fetal bovine serum. PC3 cells stably expressing mouse Wnt5a were generated by selection with 200  $\mu$ g/ml G418. Wnt5a was purified to homogeneity, and an anti-Wnt5a antibody was generated as described previously (Kurayoshi *et al.*, 2006, 2007). sFRP2 CM was prepared from culture medium of HEK293T cells stably expressing sFRP2 as described previously (Kurayoshi *et al.*, 2006). Control CM and Wnt5a CM were prepared as described previously (Kurayoshi *et al.*, 2007).

### Immunohistochemistry

Formalin-fixed and paraffin-embedded samples were sectioned, deparaffinized and stained with hematoxylin and eosin to ensure that the sectioned block contained tumor cells. Adjacent sections were then stained immunohistochemically. For immunostaining of Wnt5a, a Dako CSA Kit (Dako, Carpinteria, CA, USA) was used according to the manufacturer's recommendation. Sections were pretreated in a microwave oven in citrate buffer for 30 min to retrieve antigenicity. After peroxidase activity was blocked with 3% H<sub>2</sub>O<sub>2</sub>-methanol for 10 min, the sections were incubated with normal goat serum (Dako) for 20 min to block nonspecific antibody binding sites. The anti-Wnt5a antibody was incubated with tissue samples for 15 min at room temperature and detected by incubating for 15 min with biotinylated goat anti-rabbit immunoglobulins, and the signal was amplified and visualized using the substrate-chromogen solution. The sections were counterstained with 0.1% hematoxylin. The specificity of the anti-Wnt5a antibody has been characterized previously (Kurayoshi *et al.*, 2006, 2007).

For immunostaining of  $\beta$ -catenin, a Dako LSAB Kit (Dako) was used in accordance with the manufacturer's recommendations. After blocking nonspecific antibody binding sites, the samples were incubated with mouse monoclonal anti- $\beta$ -catenin (1:20; BD Bioscience, San Jose, CA, USA), and followed by incubation with biotinylated anti-mouse IgG and peroxidase-labeled streptavidin for 10 min each. Staining was completed with a 10-min incubation with the substrate-chromogen solution. The sections were counterstained with 0.1% hematoxylin. The staining of Wnt5a and cytosomal or nuclear  $\beta$ -catenin was classified according to the percentage of stained cancer cells in the tumor region. When more than 50% of cancer cells were stained, the immunostaining was considered positive.

### Tissue samples

Ninety-eight primary tumors were collected from patients diagnosed with PCa who underwent surgery during the period 2000 through 2002 at the Department of Urology, Hiroshima University Hospital (Hiroshima, Japan). Identifying information for all samples was removed before analysis for strict privacy protection. This procedure was in accordance with the Ethical Guidelines for Human Genome/Gene Research of the Japanese Government, and the study was approved by the Ethical Committee for Human Genome Research of Hiroshima University (Hiroshima, Japan).

All patients were treated by radical prostatectomy and bilateral lymphadenectomy for clinically localized PCa and were confirmed to be node negative by pathological examination. None of the patients were treated preoperatively with hormonal or radiation therapy, and none had secondary cancer. All 98 specimens were archival, formalin-fixed and paraffin-embedded tissues. Tumor staging was performed according to the TNM classification system (Sobin and Wittekind, 2002). After prostatectomy, the serum PSA level was measured by E-test Tosoh II Assay (Tosoh, Tokyo, Japan). Patients were followed up by PSA measurement monthly during the first 6 months after prostatectomy and then every 3 months thereafter. Biochemical relapse was defined as a PSA level of 0.2 ng/ml or greater.

### Statistical methods

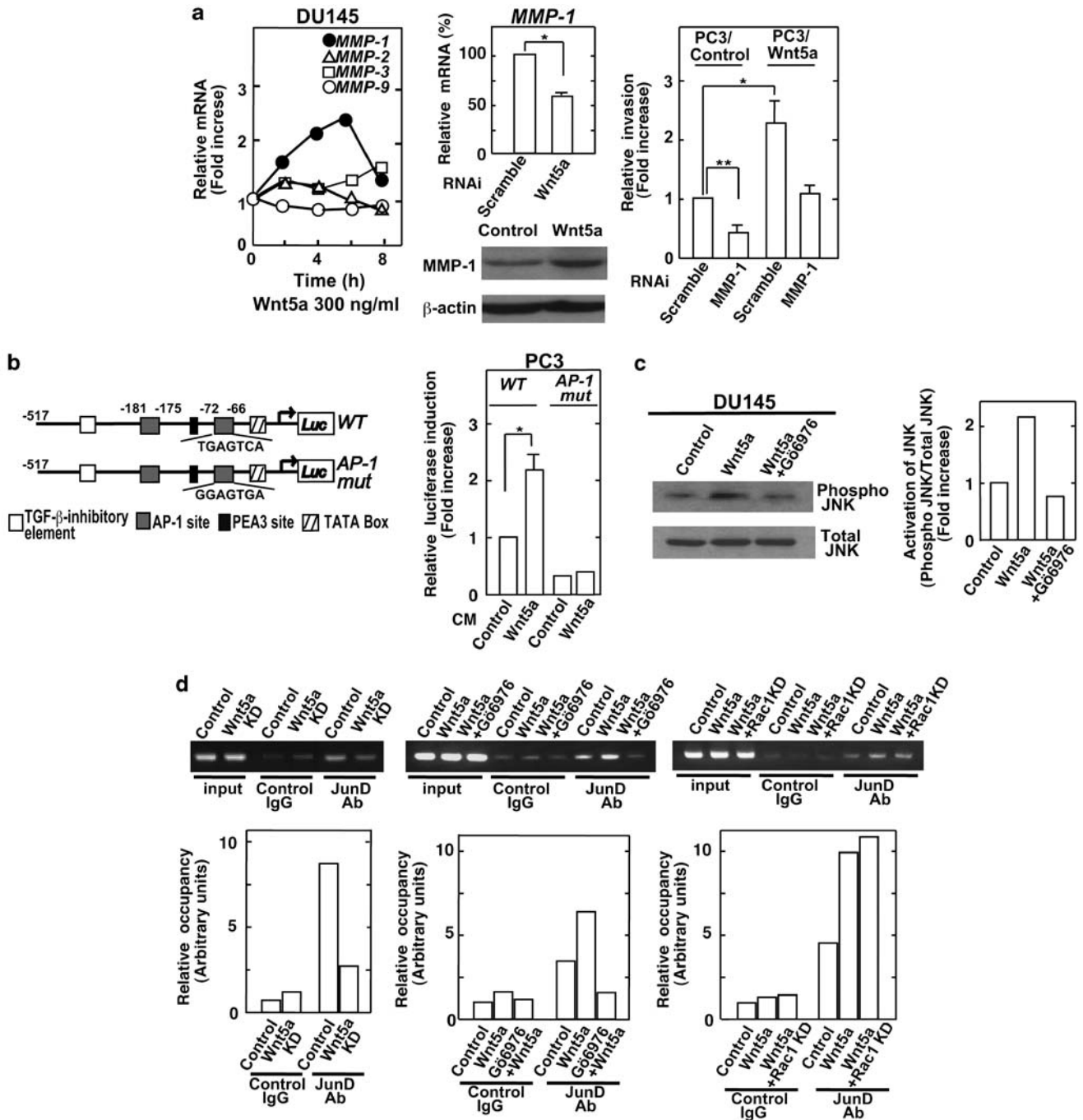
Correlations between clinicopathological parameters and Wnt5a or  $\beta$ -catenin positivity were analyzed by Fisher's exact test. Kaplan–Meier curves were constructed, and differences between relapse-free survival curves were tested for statistical significance by log-rank test (Mantel, 1966). Cox proportional hazards multivariate model was used to examine the association of clinical and pathological factors and the expression of Wnt5a or  $\beta$ -catenin with relapse-free survival. Statistical analyses for Figures 3–5 were carried out using Student's *t*-test. A *P*-value of less than 0.05 was considered statistically significant.

### Cell migration and invasion assays

To measure the cell migration activity, we performed transwell assays using a modified Boyden chamber (tissue culture treated, 6.5-mm-diameter, 10- $\mu$ m-thickness, 8- $\mu$ m-pores; Transwell, Costar, Cambridge, MA, USA) as described previously (Kobayashi *et al.*, 2006). The lower surface of the filters was coated with 10  $\mu$ g/ml fibronectin for LNCap cells and 10  $\mu$ g/ml type I collagen for DU145 cells. DU145 and LNCap cells ( $2.5 \times 10^4$  cells in 100  $\mu$ l) suspended in serum-free RPMI-1640 medium containing 0.1% bovine serum albumin were applied to the upper chamber. The same medium was added to the lower chamber. After the cells were incubated at 37 °C for 4–8 h, the number of cells that migrated to the lower side of the upper chamber was counted. Relative cell migration was expressed as a percentage of migrated cells with siRNA treatment compared to those without treatment. The invasive potentials of DU145 and PC3 cells were analyzed using a Matrigel-coated modified Boyden chamber (Becton, Dickinson and Company, Bedford, MA, USA). RPMI-1640 medium containing 10% fetal bovine serum was added to the lower chamber. The incubations of DU145 and PC3 cells were continued for 24 and 4 h, respectively.

To carry out the wound-healing assay, we plated the cells onto fibronectin-coated coverslips. The monolayer of DU145 cells was then scratched manually with a plastic pipette tip, and after being washed with PBS, the wounded monolayers of





cells were allowed to heal for 18–24 h in RPMI-1640 medium containing 10% fetal bovine serum. The length of the wounds was measured and expressed as a percentage of the initial length at zero time (Kobayashi *et al.*, 2006). When necessary, the anti-Wnt5a antibody (10 µg/ml) or CM containing sFRP2 was added to the medium.

*Chromatin immunoprecipitation assay*

Cells (2 × 10<sup>6</sup>) were cross-linked with 1% formaldehyde for 10 min at room temperature. The cell pellets were lysed with SDS lysis buffer and sonicated to shear DNA to a size range

between 200 and 1000 bp. Sheared chromatin samples were diluted in chromatin immunoprecipitation buffer and incubated for 12 h at 4 °C with 6 µg of anti-JunD antibody (sc-74; Santa Cruz Biotechnology, Santa Cruz, CA, USA) or negative control IgG (Diagenode, Liège, Belgium). Immunocomplexes were collected, and the DNA fragments were purified using DNA purifying slurry (Diagenode). After incubation at 55 °C for 30 min to reverse protein/DNA cross-links, the purified DNA was used as a template for PCR. Forward and reverse primers were as follows: fragment containing AP-1 sites of *MMP-1* promoter, 5'-TGTCTCCTTCGCACACATCT-3' and 5'-TGCATACTGGCCTTTGTCTT-3'.

**Figure 5** Wnt5a induces the expression of matrix metalloproteinase-1 (MMP-1). (a) Left panel, DU145 cells were treated with 300 ng/ml Wnt5a for the indicated periods of time, and then *MMP-1*, *MMP-2*, *MMP-3* and *MMP-9* mRNA levels were quantified. Middle upper panel, *MMP-1* mRNA levels in DU145 cells transfected with *scrambled* or *Wnt5a* siRNA were quantified. The results shown are means  $\pm$  s.e. from three independent experiments. \* $P < 0.05$ . Middle lower panel, DU145 cells were stimulated with 300 ng/ml Wnt5a for 10 h, then the cell lysates were probed with anti-MMP-1 antibody.  $\beta$ -Actin is a loading control. Right panel, PC3/control and PC3/Wnt5a cells were transfected transiently with *scrambled* or *MMP-1* siRNA, and these cells were subjected to the Matrigel invasion assay. Relative invasion activities were expressed as fold increases compared with the invaded cell numbers in PC3/control cells transfected with *scrambled* siRNA. The results shown are means  $\pm$  s.e. from three independent experiments. \* $P < 0.05$ ; \*\* $P < 0.01$ . (b) Left panel, the *MMP-1-luciferase* constructs used in this study. Right panel, after PC3 cells were transfected with pGL3/*MMP-1* -517/+60-*Luc* with or without mutations in the proximal activator protein-1 (AP-1) site (*AP-1 mut* or *WT*, respectively), the cells were stimulated with control or Wnt5a conditioned medium (CM) for 10 h. Luciferase activities were expressed as fold increases compared with that of *WT* transfectants treated with control CM. The results shown are means  $\pm$  s.e. from three independent experiments. \* $P < 0.05$ . WT, wild type. (c) After the treatment of G66976 for 2 h, DU145 cells were stimulated with 450 ng/ml Wnt5a for 1 h. The cell lysates were probed with anti-phospho-c-jun N-terminal kinase (JNK) antibody. Right panel, the activity of JNK was calculated by dividing the band intensity of phosphorylated JNK by that of total JNK and expressed as fold increases compared with control DU145 cells. The results shown are representative of three independent experiments. (d) Left panel, chromatin from DU145/control and DU145/Wnt5aKD cells were immunoprecipitated with anti-JunD antibody or control IgG. KD, knockdown. Middle panel, after DU145 cells were stimulated with 450 ng/ml Wnt5a for 1 h in the presence or absence of 100 nM G66976, chromatin was collected and was immunoprecipitated with anti-JunD antibody or control IgG. Right panel, after DU145 cells were transfected with *scrambled* or *Rac1* siRNA, the cells were stimulated with 450 ng/ml Wnt5a for 1 h. Chromatin from each cell were immunoprecipitated with anti-JunD antibody or control IgG. The immunoprecipitated samples were analyzed by real-time PCR for the *MMP-1* promoter region containing two AP-1 sites. The relative amounts of DNA fragments containing AP-1 sites immunoprecipitated with anti-JunD antibody were expressed as arbitrary units compared with that with control IgG in control DU145 cells. The results shown are representative of three independent experiments.

#### Reporter gene assay

PC3 cells were transfected with pGL3/*MMP-1* -517/+60-*Luc* and pME18S/*LacZ*. At 24 h after transfection, the cells were cultured in serum-free medium for 24 h and stimulated with Wnt5a CM for further 10 h, and then the luciferase activities were measured with PicaGene reagent (Toyo Ink, Tokyo, Japan).  $\beta$ -Galactosidase activities were determined to normalize the transfection efficiency.

#### Others

Rac activity was assayed using glutathione *S*-transferase fusion Cdc42/Rac-interacting binding domain as described previously (Kurayoshi *et al.*, 2006).

#### Conflict of interest

The authors declare no conflict of interest.

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