

ESMO SYMPOSIUM ON SIGNALLING PATHWAYS 2016

Signal Transduction of the ErbB RTK Family

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March 4, 2016

esmo.org

DISCLOSURE SLIDE

I have nothing to disclose

Overview of ErbB receptors

Mutations in human cancers

Activation mechanisms

Role of ErbB2

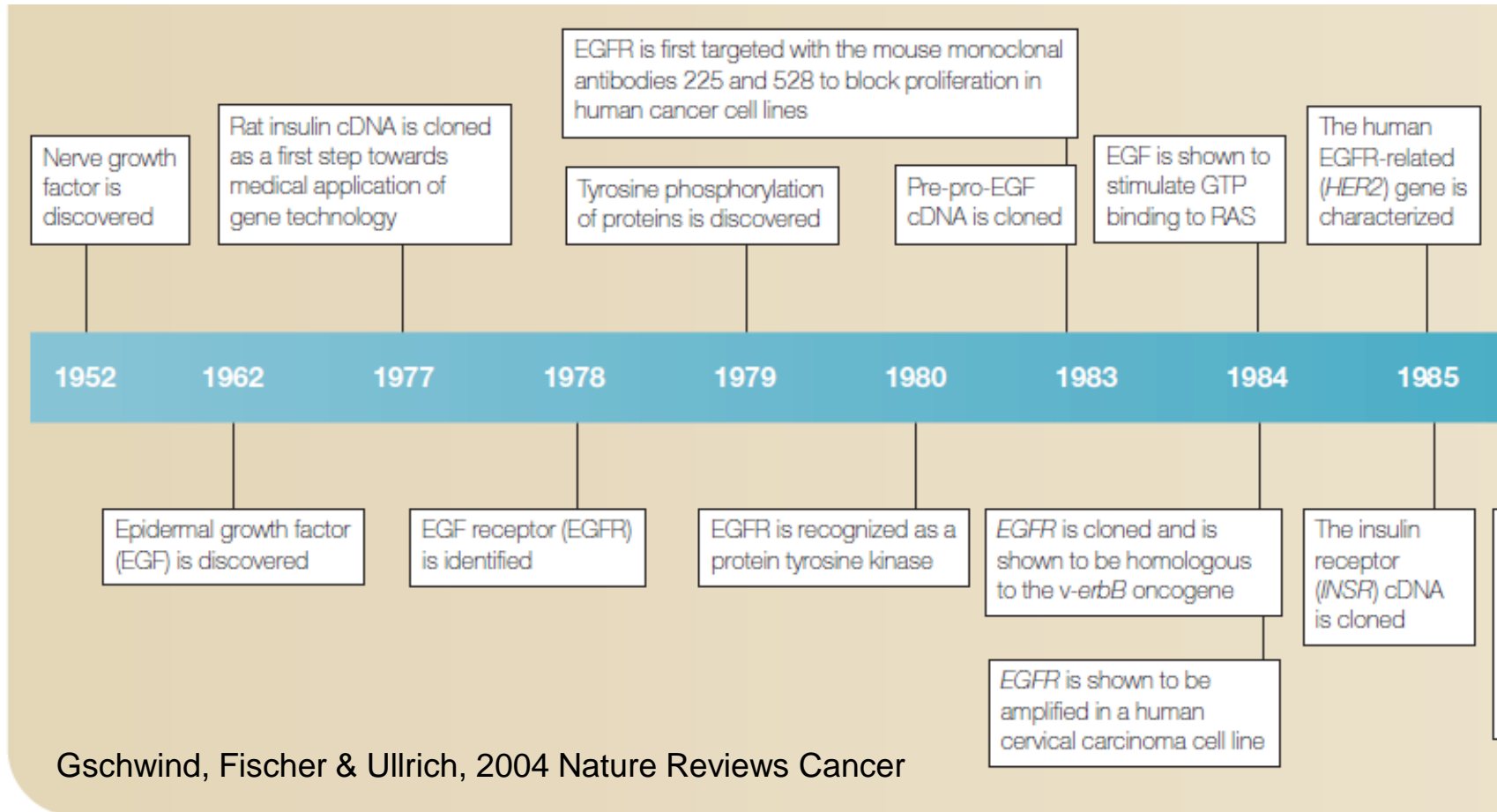
ErbB2/ErbB3 heterodimers

Novel downstream regulator of metastasis

RET receptor and breast cancer

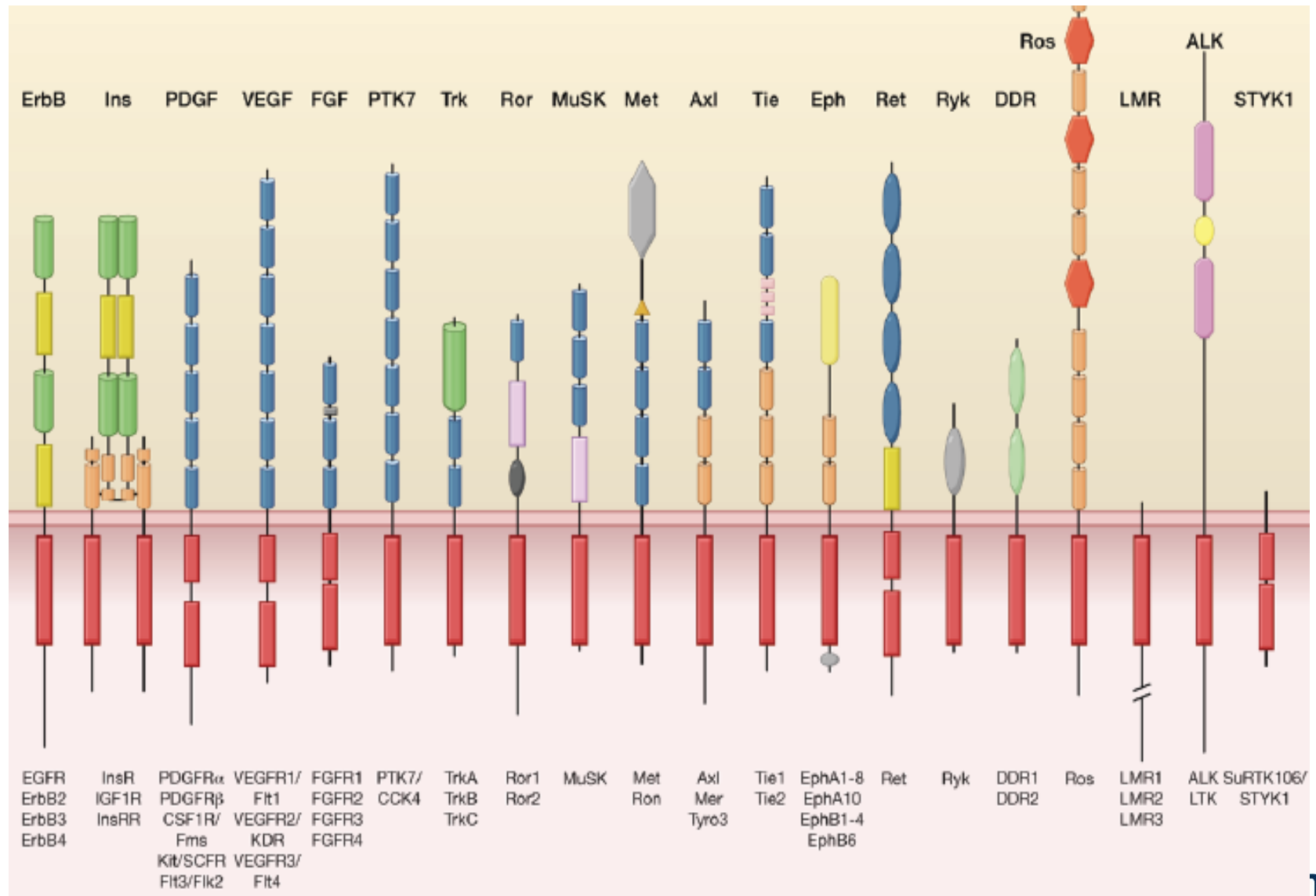
The ErbB/EGFR Receptor Tyrosine Kinase Family

the first sub-group of the RTK family

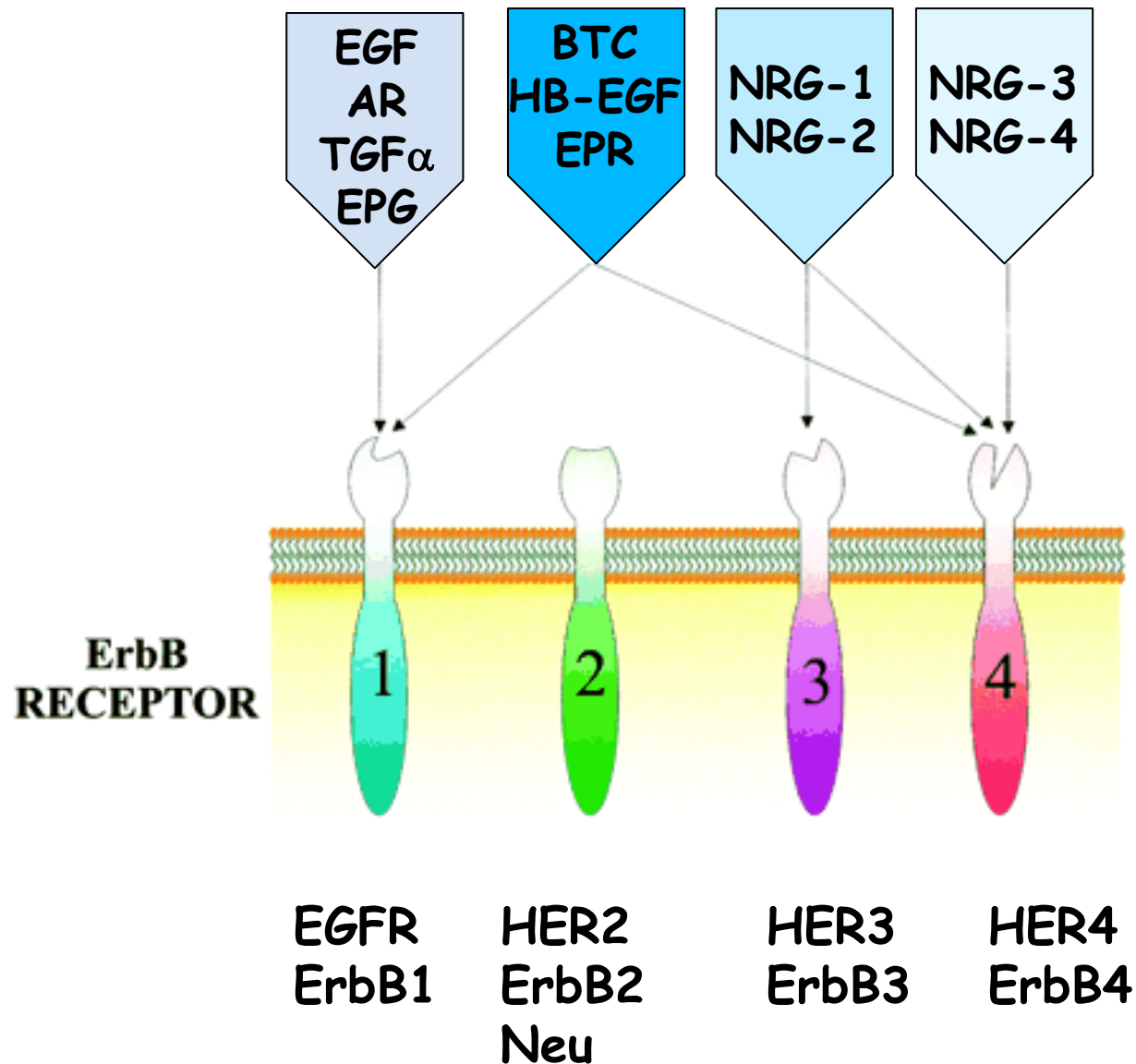


Receptor Tyrosine Kinases:

58 members in 20 structurally diverse families



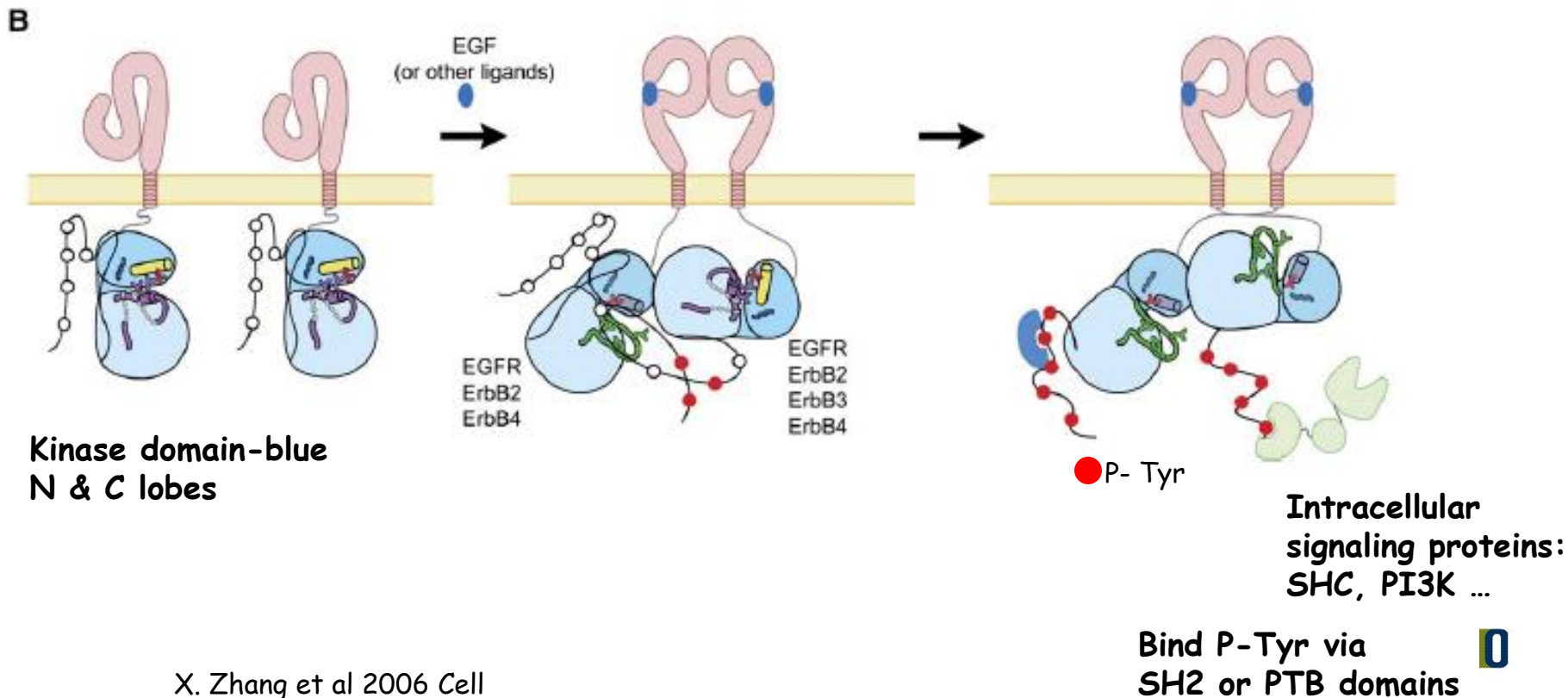
The ErbB Receptor Tyrosine Kinase / Ligand Network



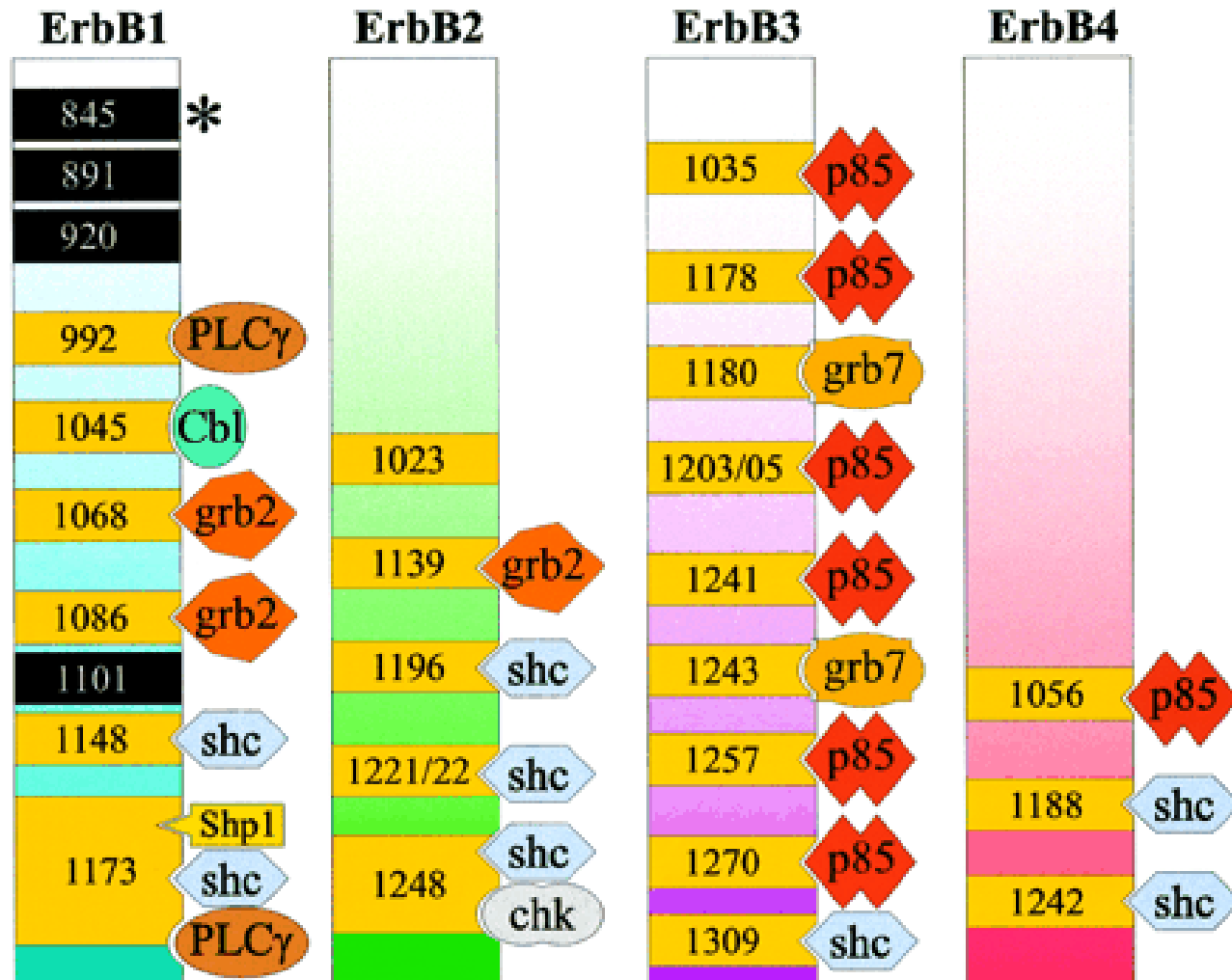
Activation of intracellular kinase domain

How does ligand-induced dimerization activate the intracellular tyrosine kinase domain?

- Each TKD is cis-autoinhibited by intra-molecular interactions
- Ligand induced dimerization releases the intra-molecular interactions leading to kinase activation.

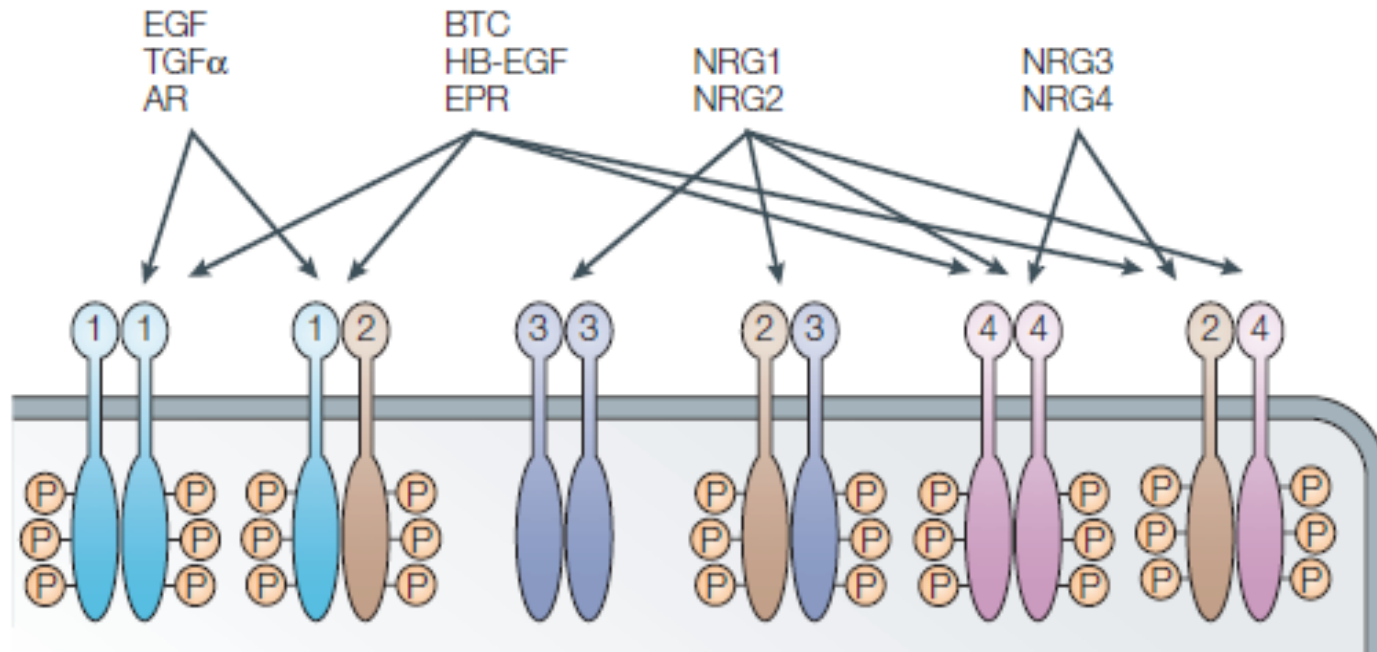


P-Tyr residues bind SH2 and PTB-domain containing proteins... that stimulate signaling pathways



- each receptor has a distinct pattern of binding proteins
- leads to signaling diversity

Ligand binding induces receptor homo and heterodimers



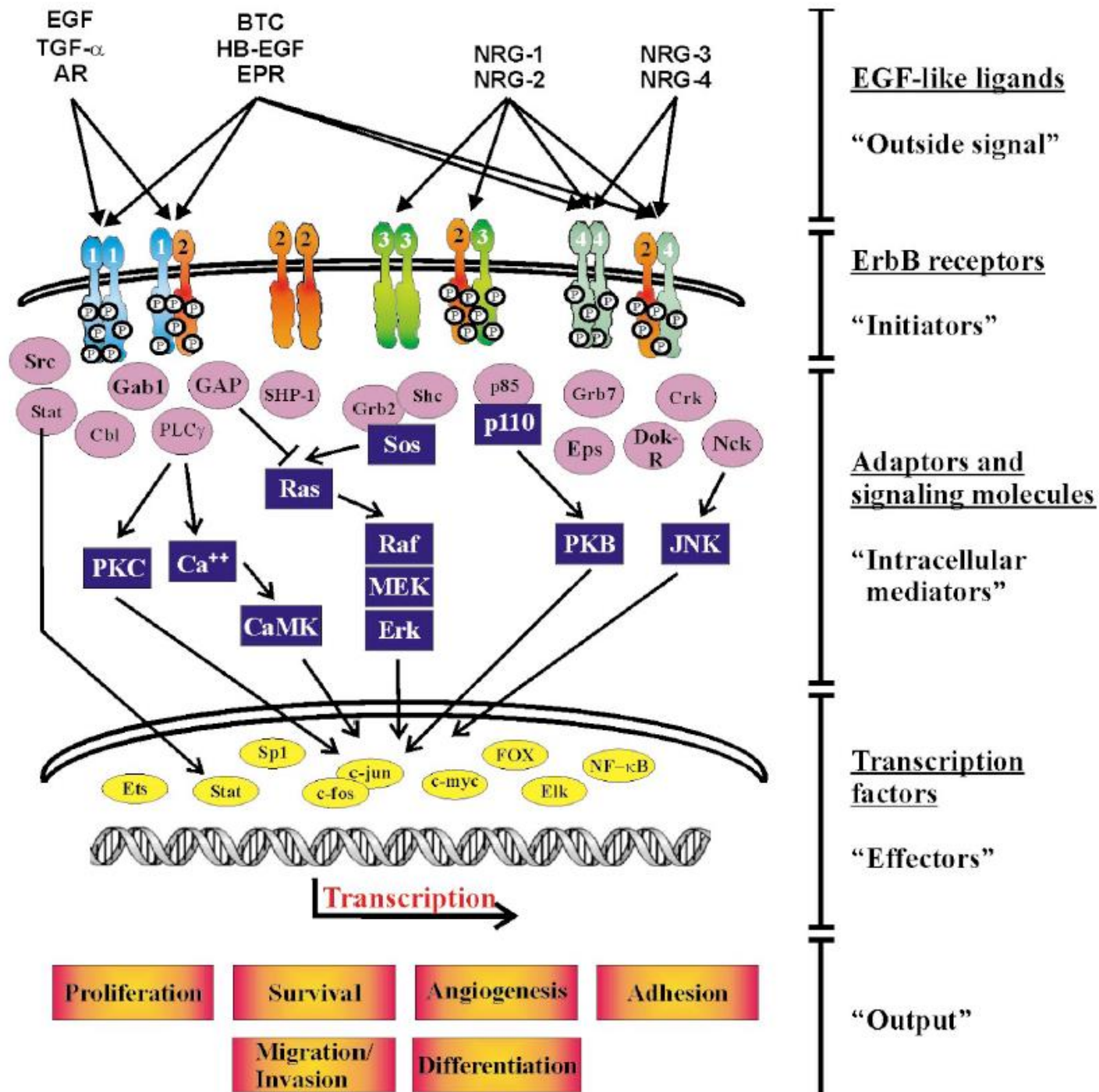
By examining cells engineered to express pairs of ErbB receptors, we found that heterodimers activate distinct signaling pathway;

....an additional mechanism to diversify signaling potential **ESMO**

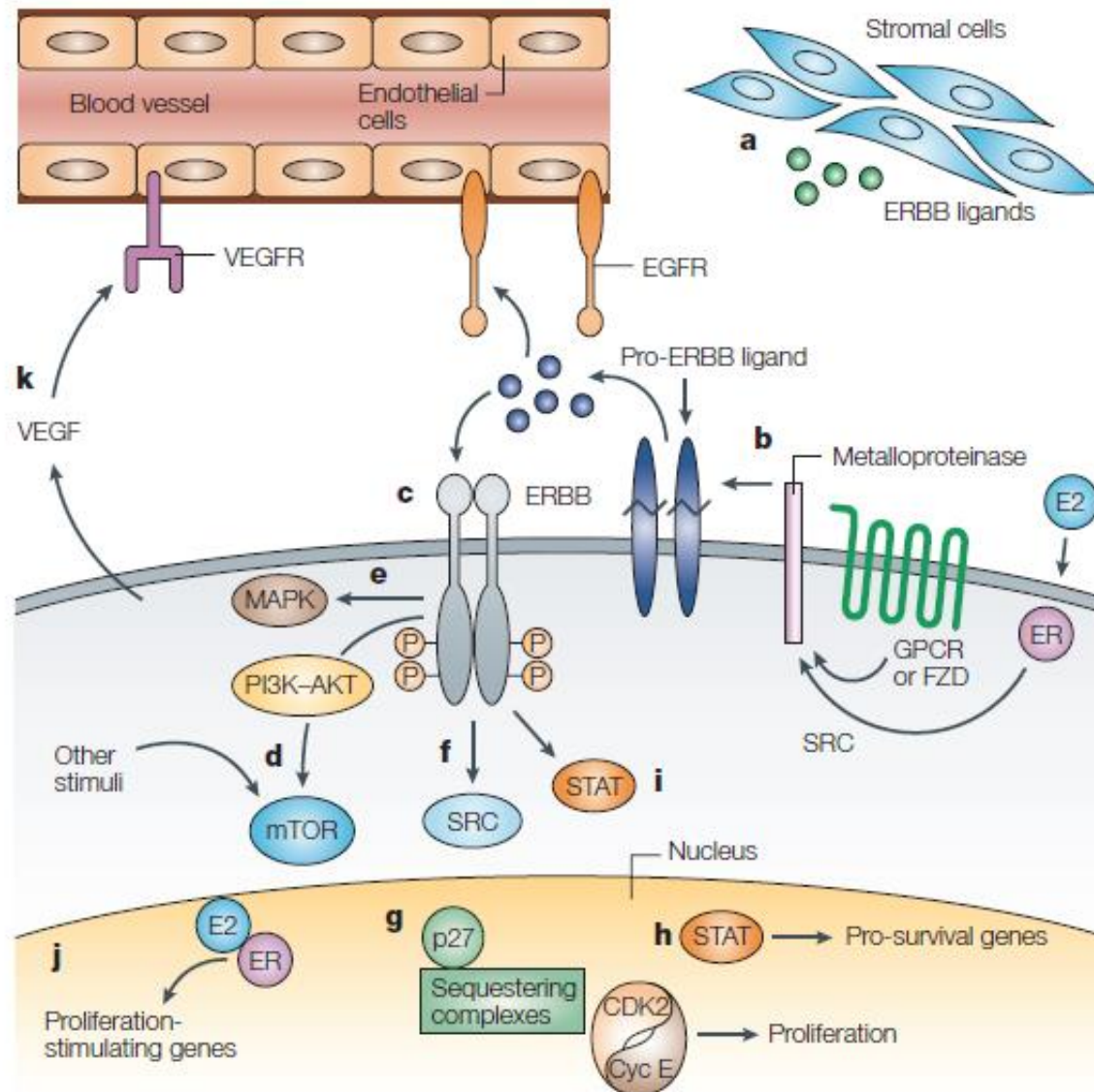
ERBB RECEPTORS: Directing Key Signaling Networks Throughout Life

Thomas Holbro and Nancy E. Hynes

Annu. Rev. Pharmacol. Toxicol. 2004. 44:195-217

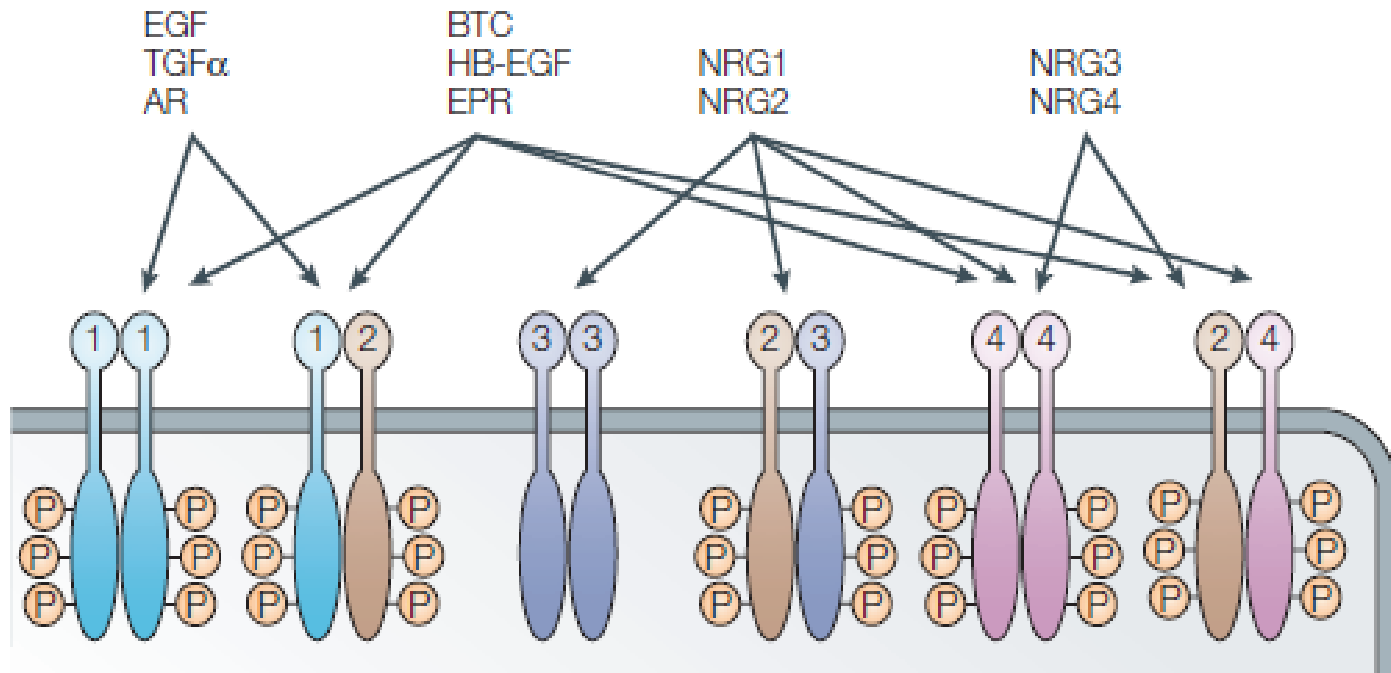


Signaling complexity increases in the context of the tumor and its environment



Hynes & Lane 2005 Nature Rev Cancer

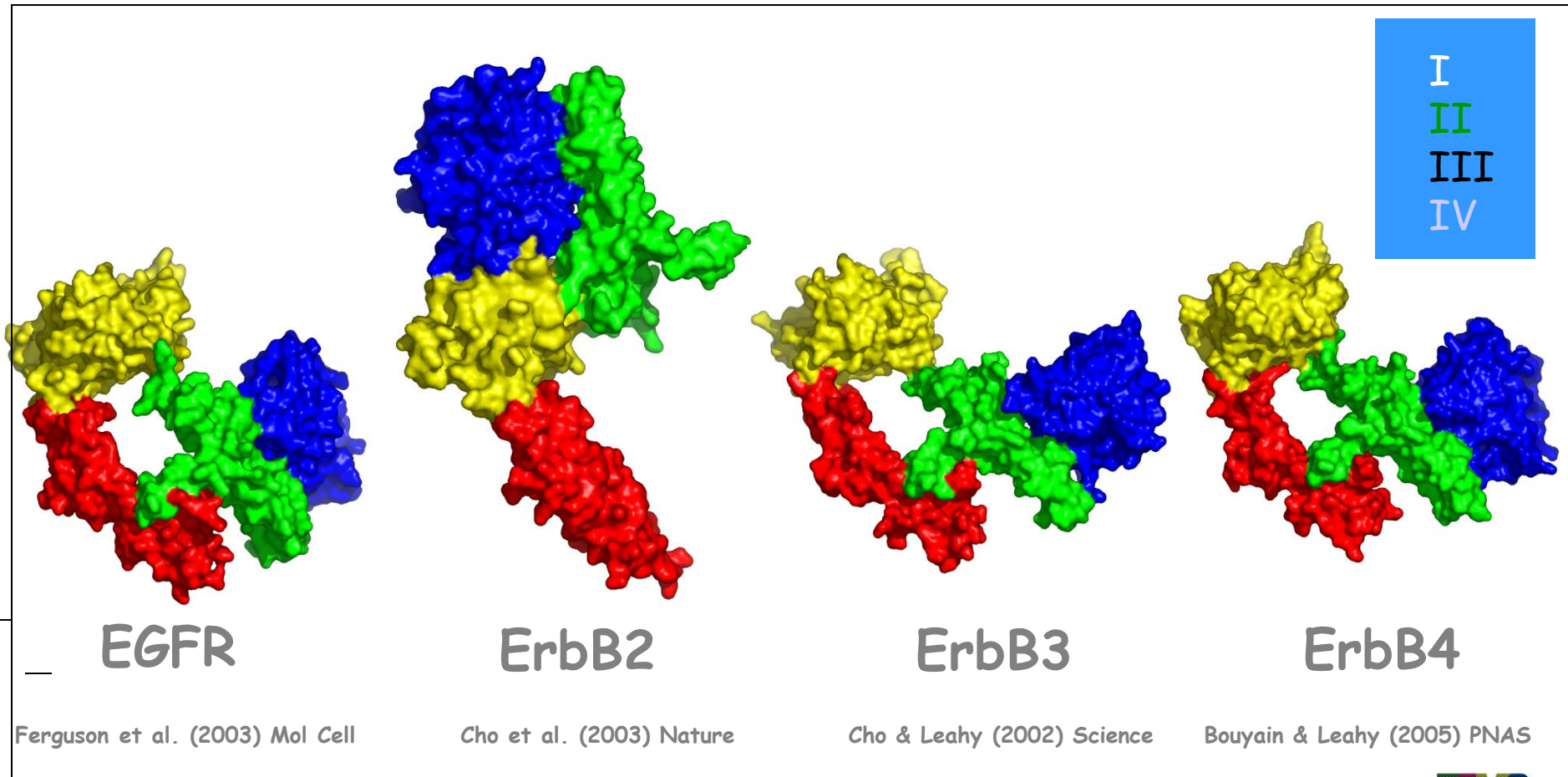
ErbB2 does not bind any of the EGF family ligands, but is activated as a heterodimer with the other ErbBs



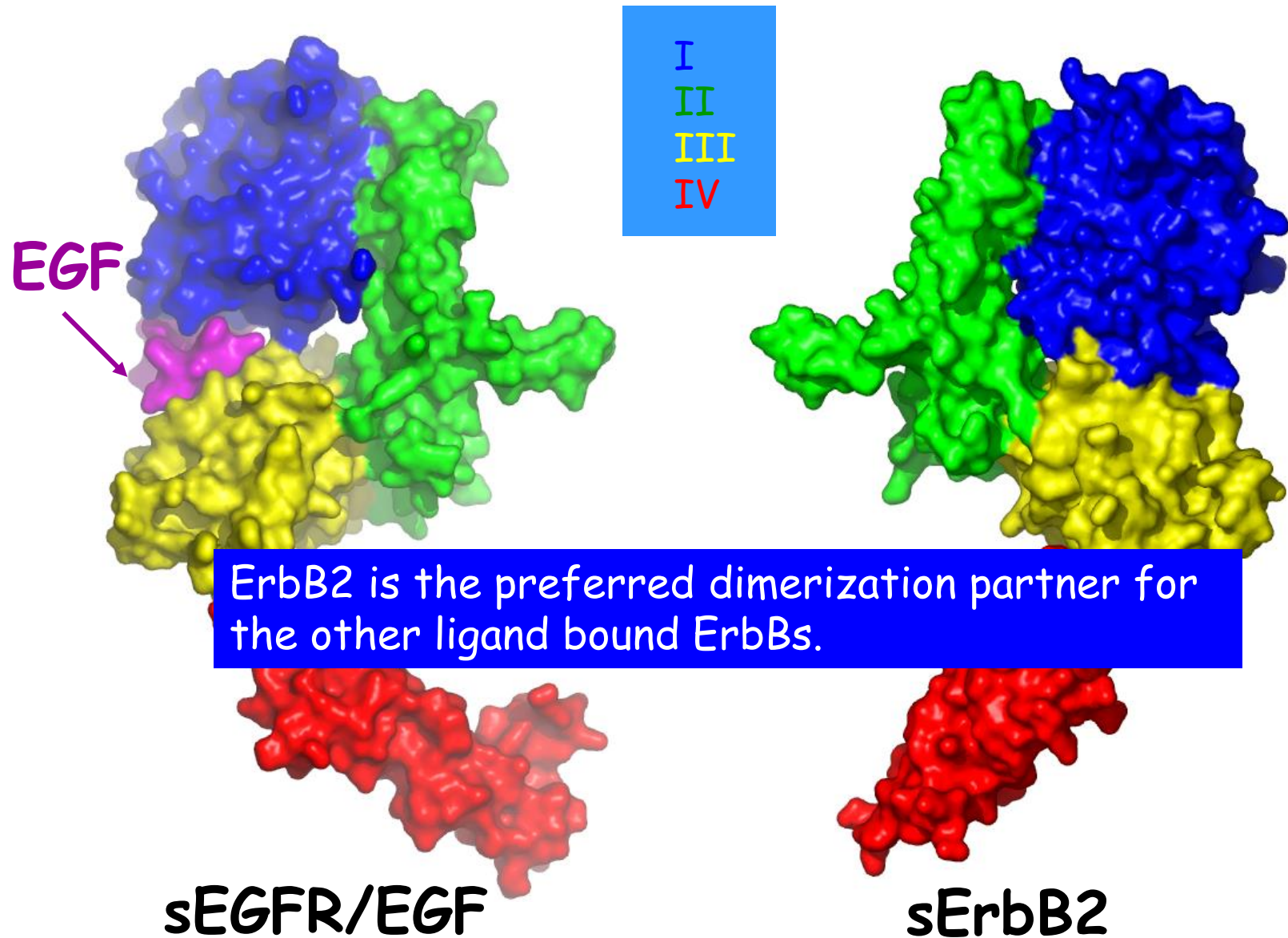
Hynes & Lane 2005 Nature Rev Cancer

Ectodomain structures of the ErbB receptors

- In the absence of ligands, ectodomains of EGFR, ErbB3 & ErbB4 are “closed”.
- ErbB2 has an extended structure.



ErbB2 structure is similar to ligand-bound EGFR

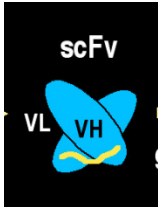


Intracellular Expression of Single Chain Antibodies Reverts ErbB-2 Transformation*

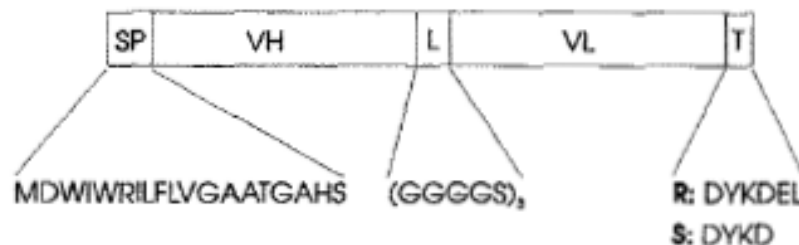
Roger R. Beerli, Winfried Wels[‡], and Nancy E. Hynes[§]

From the Friedrich Miescher-Institut, P. O. Box 2543, CH-4002 Basel, Switzerland

ErbB2 specific scFv expressed in cells & provided with an Endoplasmic reticulum retention signal

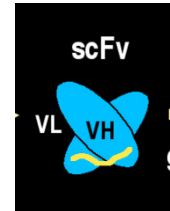


Captures ErbB2 in the ER preventing its localization to the plasma membrane.



KDEL - ER retention signal

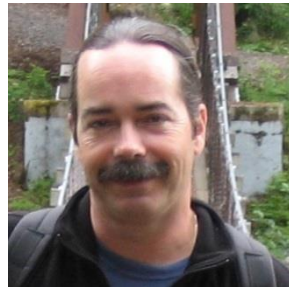
FIG. 1. Diagram of the secreted (S) and ER-retained (R) forms of scFvs FRP5 and FWP51. The N-terminal signal peptide (SP), the heavy chain variable domain (VH), the linker peptide (L), the light chain variable domain (VL), and the C-terminal tags (T) are indicated. *DYKD*: FLAG epitope; *DYKDEL*: FLAG epitope/ER retention signal.



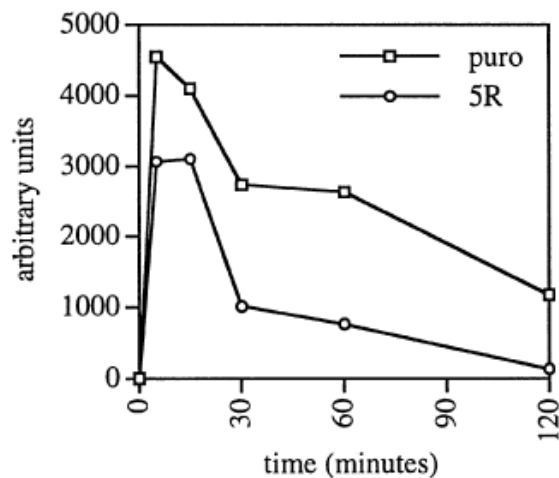
ErbB-2, the preferred heterodimerization partner of all ErbB receptors, is a mediator of lateral signaling

Diana Graus-Porta

Roger Beerli

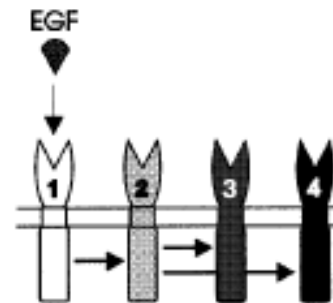


Expressed ErbB2 specific 5R-scFv to retain ErbB2 in the ER; tested for effects of ligands on signaling

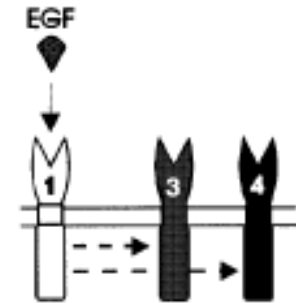


Kinetics of Erk signaling in response to an EGFR ligand

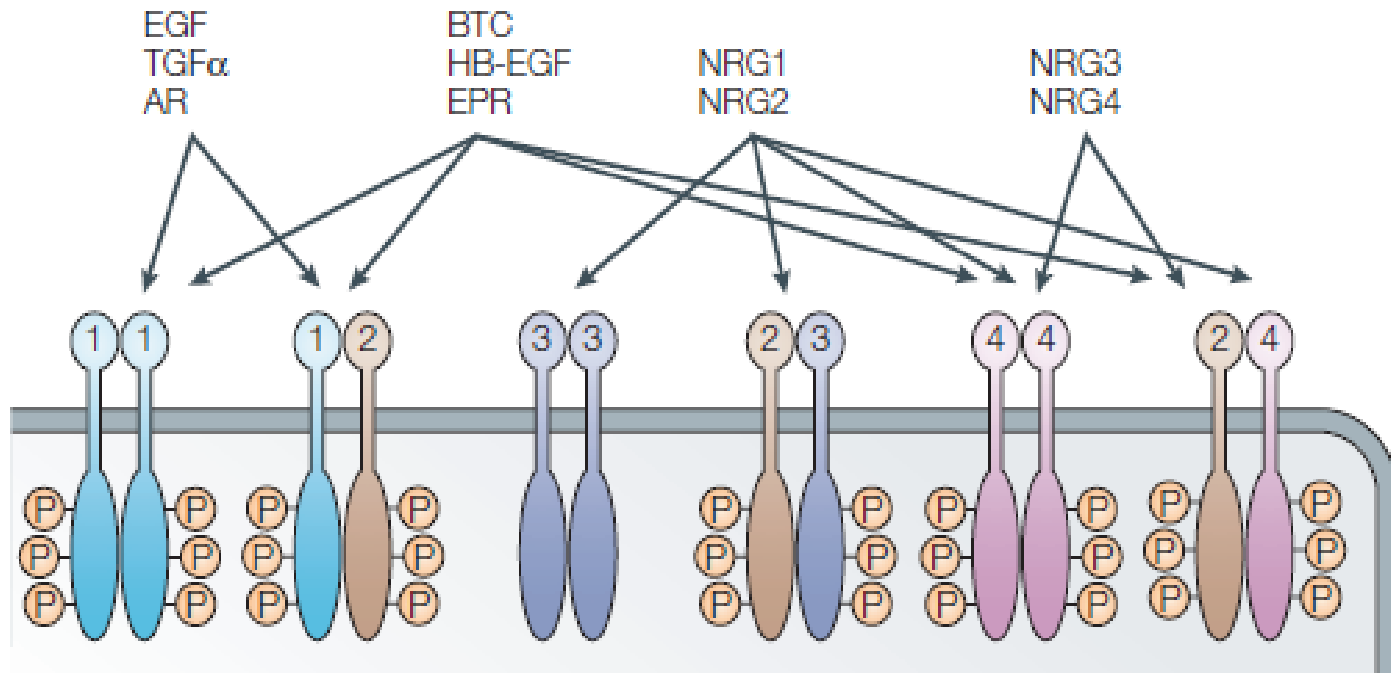
Control puro cells



scFv-5R



Ligand binding induces receptor dimerization

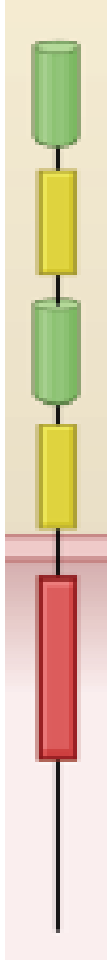


Hynes & Lane 2005 Nature Rev Cancer

ErbB2 is the preferred dimerization partner for the other ligand bound ErbBs.

ErbB2-containing heterodimers propagate strong & sustained signaling.

ErbB receptor activation in cancer



ErbBs

Receptor amplification/overexpression

ERBB2- amplification in breast, ovarian, gastric, endometrial, NSCLC, bladder, oropharyngeal, CRC....

EGFR- amplification in glioblastoma, SCCHN, esophageal, CRC...

ERBB3 - overexpression in many human tumors

Activating point mutations or deletions

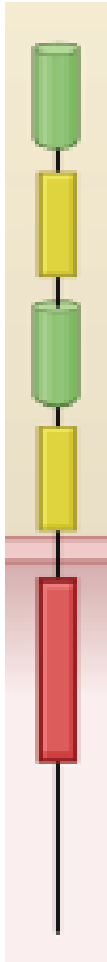
EGFR - glioblastoma, NSCLC, CRC....

ERBB2- breast, NSCLC, gastric, CRC...

ERBB3- gastric, CRC..

ERBB4 - CRC, melanoma ...

ErbB receptor activation in cancer



ErbBs

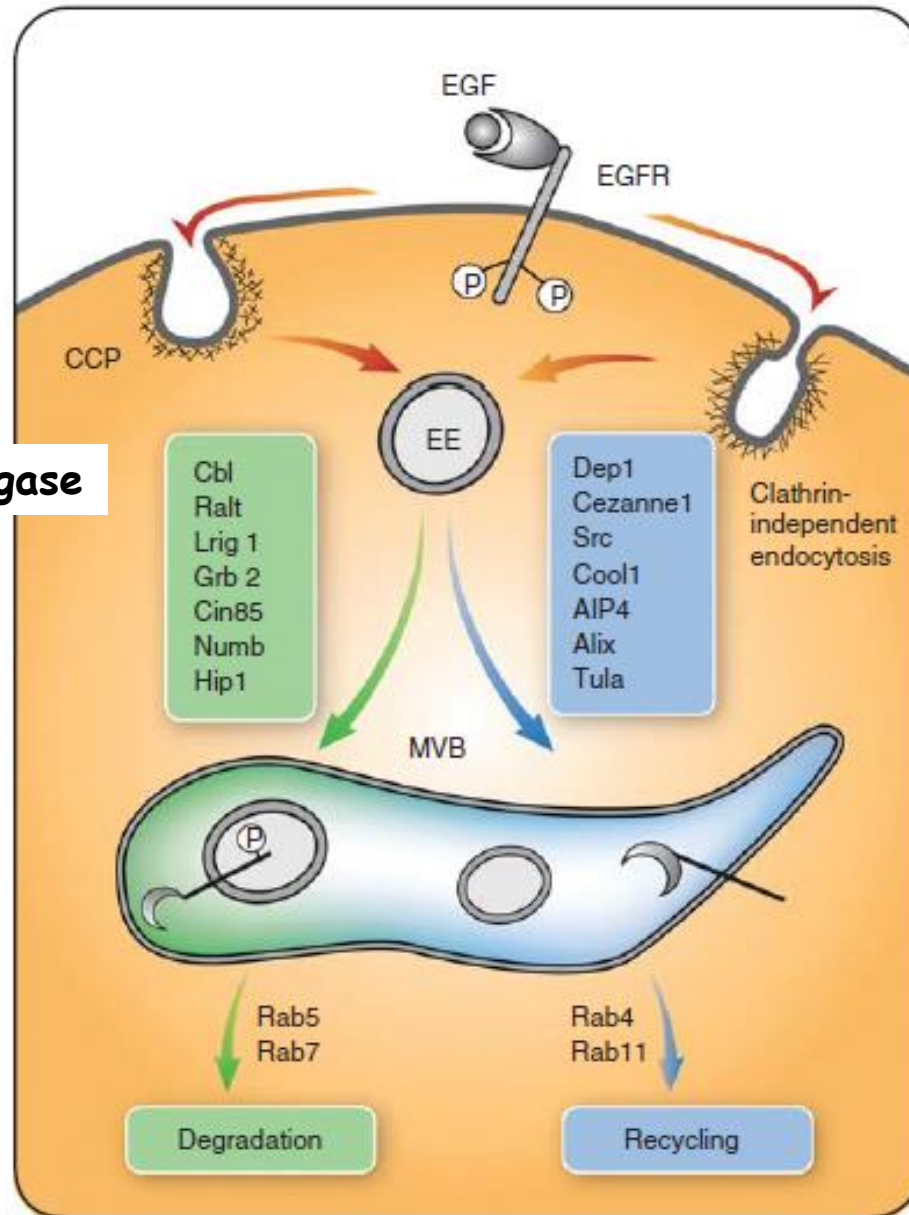
Mutant receptors have constitutive kinase activity leading to many alterations in tumor cells:

- altered patterns of receptor phosphorylation will cause changes in binding of signaling proteins & changes in pathway activity
- constitutive activation of downstream signaling
- evasion of negative regulators
- defects in receptor turnover/degradation
- etc...

Negative regulation of ErbB RTK signaling

Cbl- ubiquitin ligase

MIG6/RALT



ErbB2 & Breast Cancer

Breast cancer patients with the *ERBB2* amplicon have aggressive disease with poor clinical prognosis = metastasis.

Goal - uncover ErbB2 interacting proteins with roles in migration & metastasis

Ali Badache

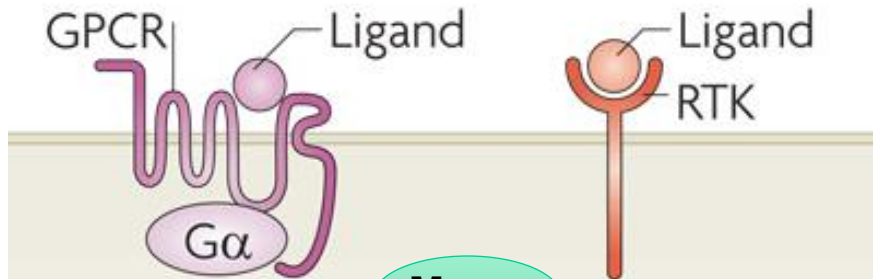


Susanne Lienhard



Romina Marone

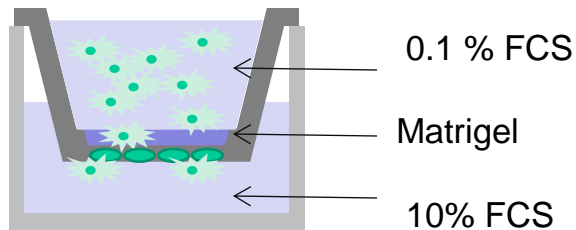
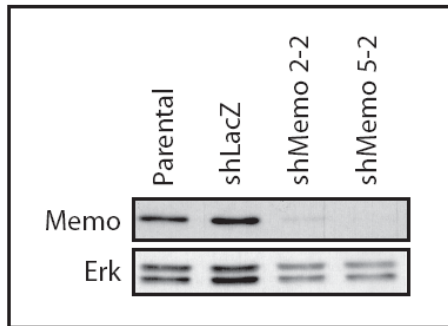
Memo - Summary



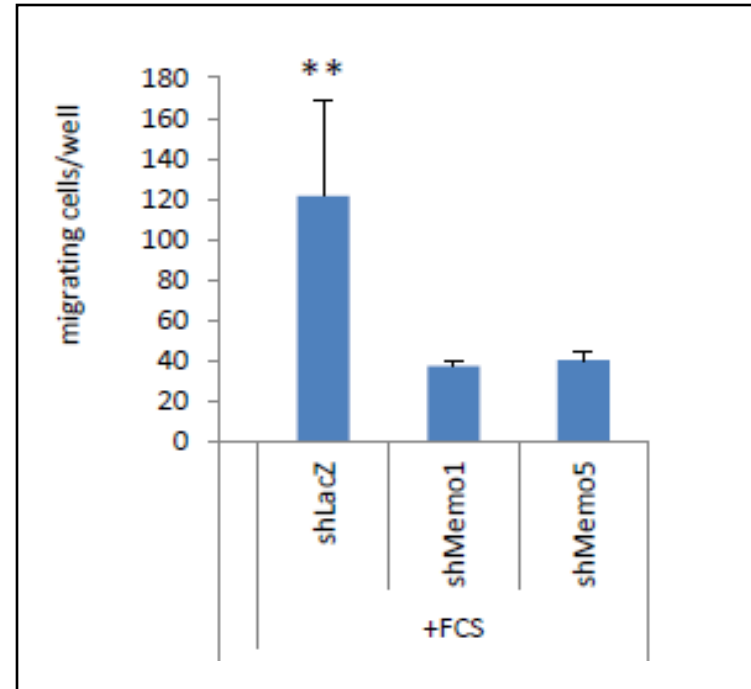
Memo

- The 32kDa *Memo* (mediator of motility) was identified in a screen for proteins associated with ligand-activated ErbB2.
- *Memo* is required for migration in response to extracellular stimuli that activate RTKs & GPCRs (HRG, EGF, FGF, serum....).
- *Memo* function? Is *Memo* required for metastasis? *Memo* & breast cancer?

Memo KD decreases invasion & migration of MDA-MB-231 breast tumor cells



Memo KD MDA-MB-231 cells



Gwen MacDonald

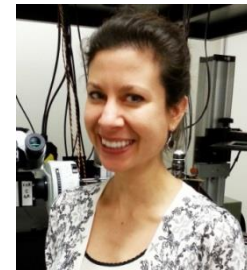
Is Memo required for metastasis?

MDA-MB231 human tumor cells:
aggressive metastatic breast cancer model

Stable Memo KD cell lines were
generated & tested in vivo for
their metastatic potential.



Gwen MacDonald



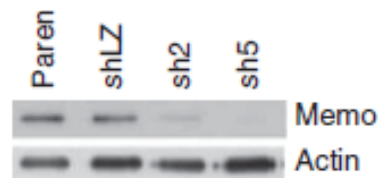
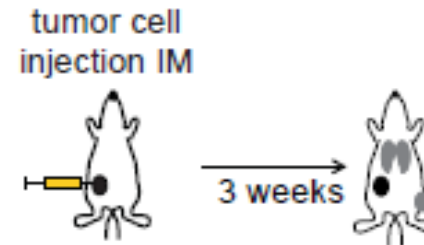
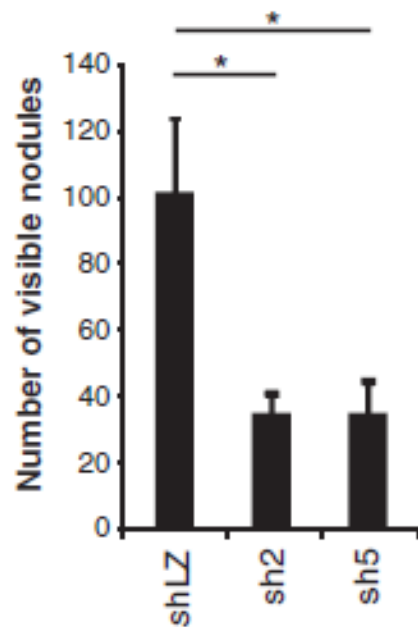
Tatiana Smirnova



Anna Frei

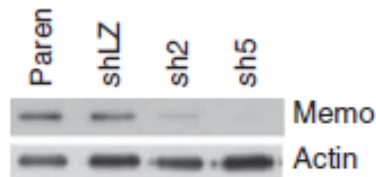
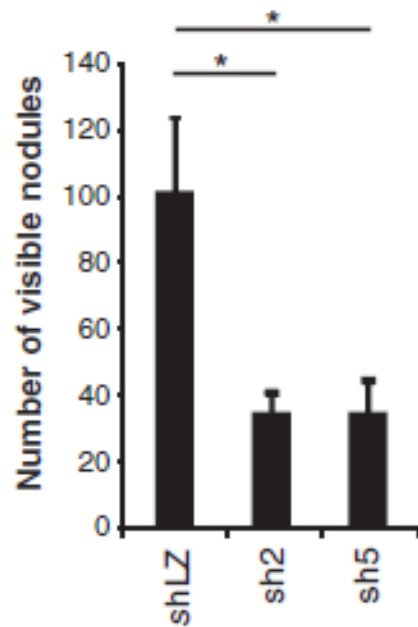
Memo is required for efficient metastatic dissemination from primary tumors to the lungs

number of lung metastases

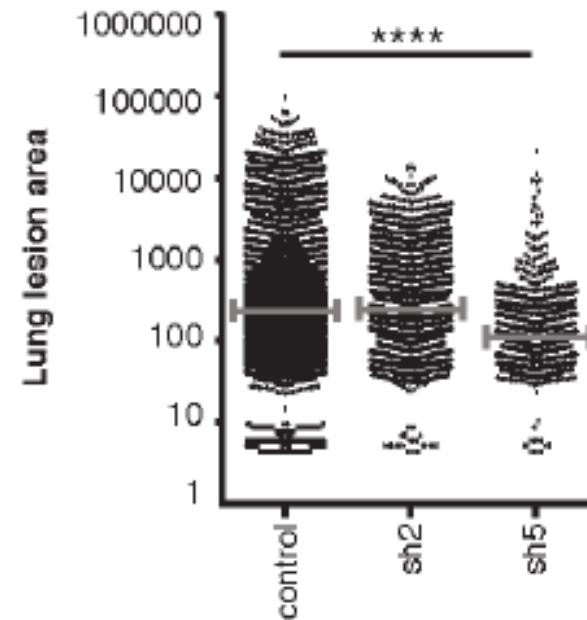


Memo KD lesions in the lungs are smaller; Memo loss effects proliferation in the metastatic site

number of lung metastases



lung lesion area



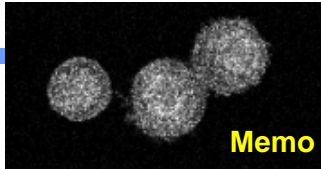
Memo is overexpressed in breast cancer

IHC analysis of >400 primary tumors

Memo levels are significantly increased in 43.7% primary breast tumors

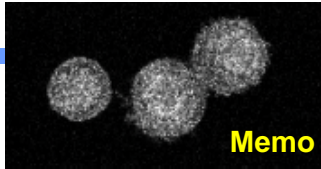
Tissue Type	Total Memo Expression		Total	p-value
	Low (≤ 1.0)	High (> 1.0)		
Normal breast	29 (90.6%)	3 (9.4%)	32	0.0001
Breast cancer	229 (56.3%)	178 (43.7%)	407	

Is Memo a prognostic factor in breast cancer?

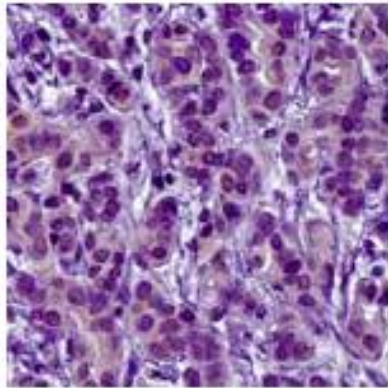


Memo is present in the cytoplasm & the nucleus of normal & cancer cells

Memo IHC- tumors scored for staining intensity and cellular localization

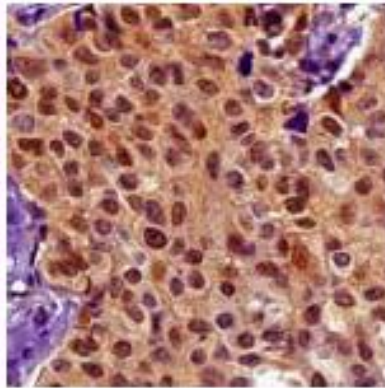


Low C-Memo
and N-Memo

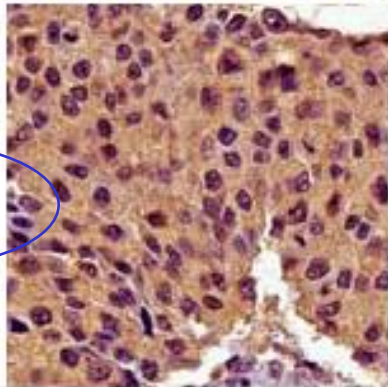


56.3%

High C-Memo
and N-Memo

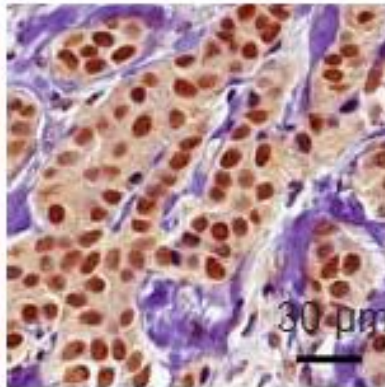


23.3%



6.6%

Predominantly
High C-Memo



13.8%

Predominantly
High N-Memo



Manuela Vecchi
Paolo Di Fiore **ESMO**
IFOM, Milan

High cytoplasmic-Memo correlates with poor prognostic factors & with aggressive breast cancer sub-types

Variable	C-Memo (*) High vs Low	
	OR	p
Grade		
2 vs 1	1.8	0.07
3 vs 1	2.93	0.007
ER/PgR - vs +	3.91	0.004
ErbB2 + vs -	3.36	0.028
Ki-67 $\geq 14\%$ vs $< 14\%$	2.17	0.005
p53 $\geq 16\%$ vs $< 16\%$	3.03	0.001
Subtype		
Lum B Ki67 High vs Lum A	1.69	0.07
Lum B ErbB2+ vs Lum A	5.51	0.012
ErbB2+ vs Lum A	4.55	0.139
TN vs Lum A	6.32	0.001

High nuclear grade
High ErbB2
ER/PgR negative
High Ki67 & p53
High Triple Negative

OR - overall survival

High nuclear Memo has an inverse relationship with these factors, i.e. it correlates with better prognosis.

High cytoplasmic-Memo predicts early relapse and death ($5 \leq$ years)

	Distant metastasis				Overall survival			
	C-Memo		N-Memo		C-Memo		N-Memo	
	High vs Low		High vs Low		High vs Low		High vs Low	
	HR (95% CI)	p	HR (95% CI)	p	HR (95% CI)	p	HR (95% CI)	p
≤ 5 years	3.89 (1.16;13.07)	0.028	0.44 (0.13;1.53)	0.2	8.36 (1.31;53.42)	0.025	0.38 (0.07;2.1)	0.27
> 5 years	0.44 (0.11;1.8)	0.25	0.57 (0.16;2.01)	0.38	1.05 (0.45;2.43)	0.92	0.54 (0.23;1.28)	0.16

Multivariable Cox proportional hazards model

TMA analysis on primary breast tumors:

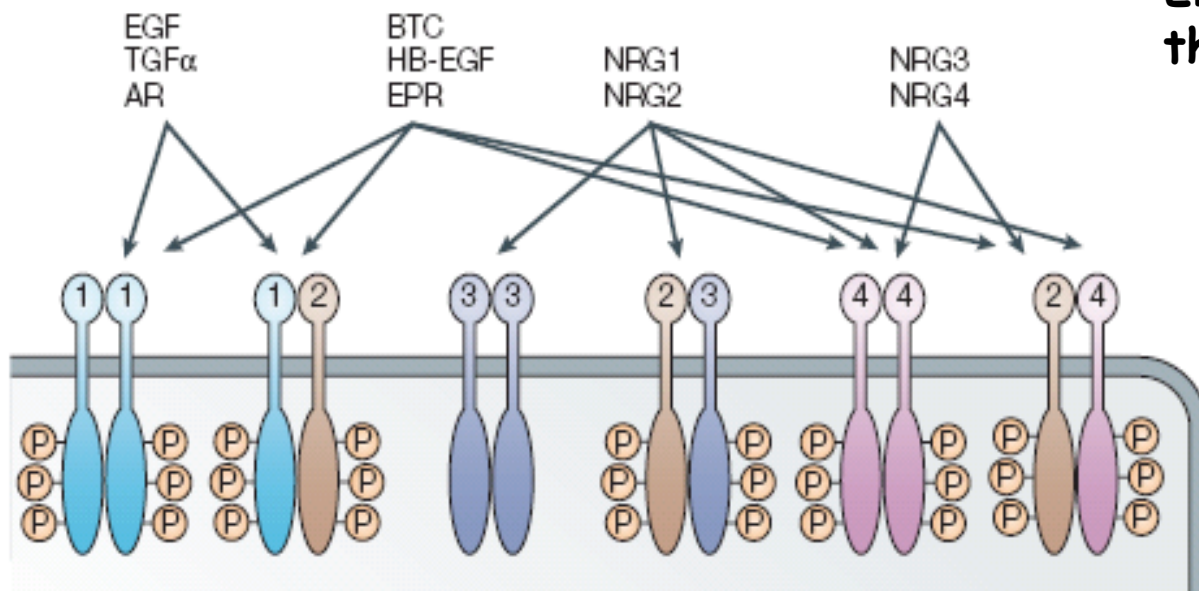
Memo might have distinct roles in the cytoplasm & the nucleus.

Cytoplasmic function regulates pathways that promote tumor metastasis, contributing to poor prognosis.

ErbB2/ErbB3 Heterodimer in Cancer

- ErbB3 has “impaired” kinase activity.
- ErbB2/ErbB3 heterodimer has potent transforming activity.

ErbB3 strongly activates the PI3K pathway



ERBB3

1035	— p85
1178	— p85
1180	— GRB7
1203/1205	— p85
1241	— p85
1243	— GRB7
1257	— p85
1270	— p85
1300	— SHC

The ErbB2/ErbB3 heterodimer functions as an oncogenic unit: ErbB2 requires ErbB3 to drive breast tumor cell proliferation

Thomas Holbro*, Roger R. Beerli^{†‡}, Francisca Maurer*, Magdalena Koziczak*, Carlos F. Barbas III[†], and Nancy E. Hynes^{*5}

*Friedrich Miescher Institute, P.O. Box 2543, 4002 Basel, Switzerland; and [†]The Skaggs Institute for Chemical Biology and Department of Molecular Biology, The Scripps Research Institute, La Jolla, CA 92037



Thomas Holbro

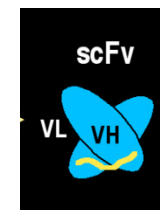
E3- Designer Transcription factor to block ErbB3 transcription

Carlos Barbas III (1965-2014)

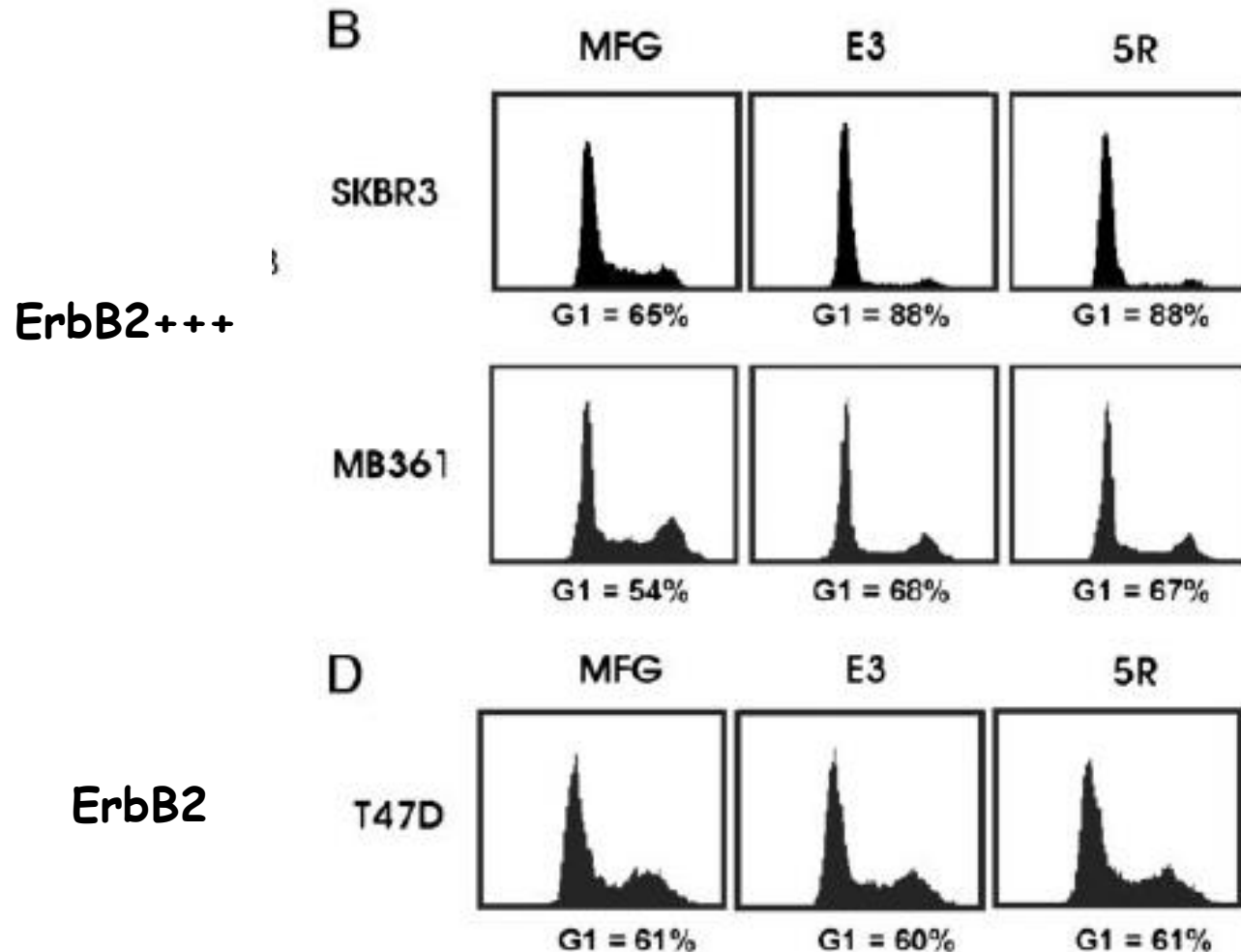
ED = Repressor Domain



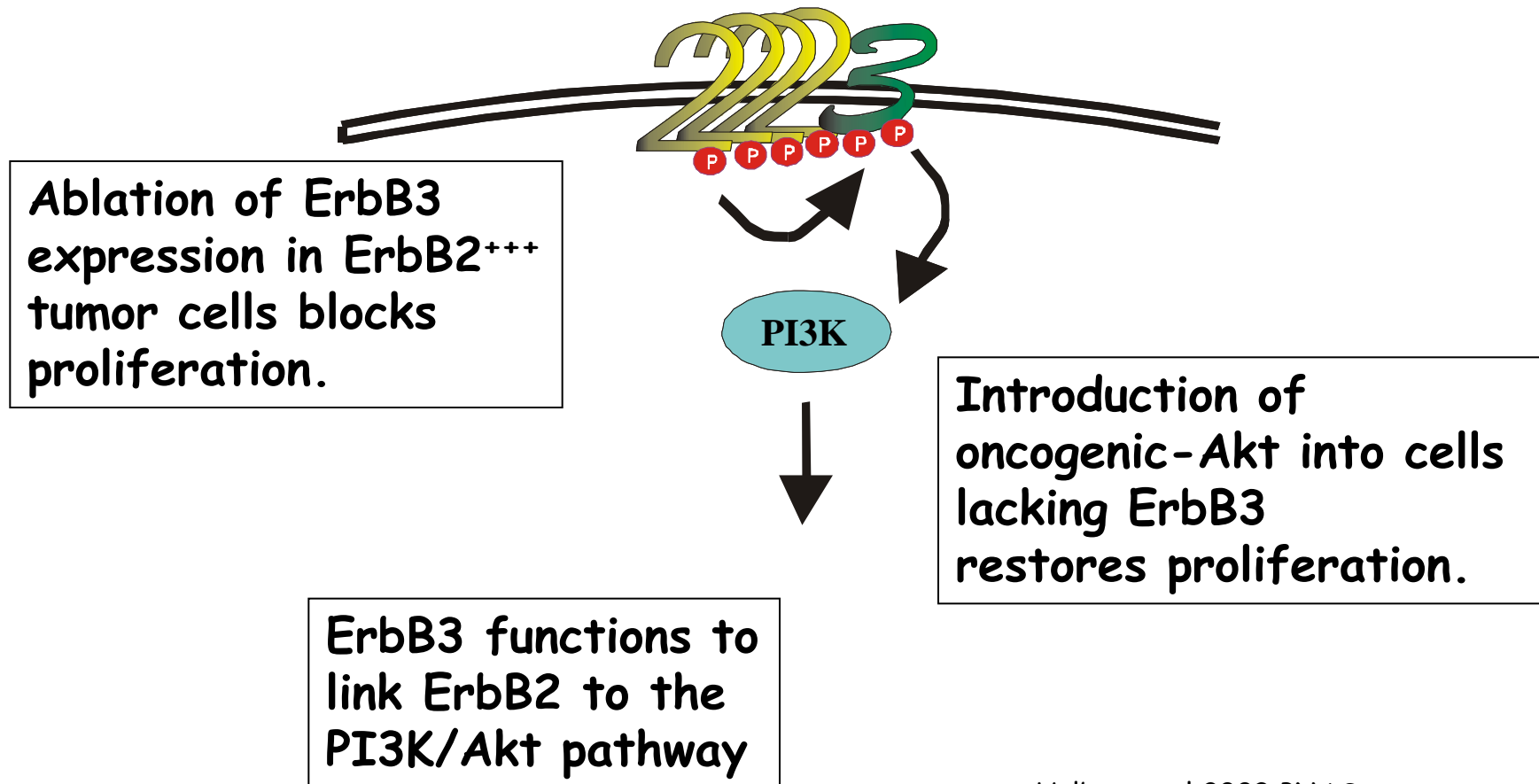
5R single chain Ab for ErbB2 ER retention



Loss of ErbB3 or ErbB2 blocks proliferation of ErbB2+++ tumor cells



ErbB2 requires ErbB3 to drive proliferation



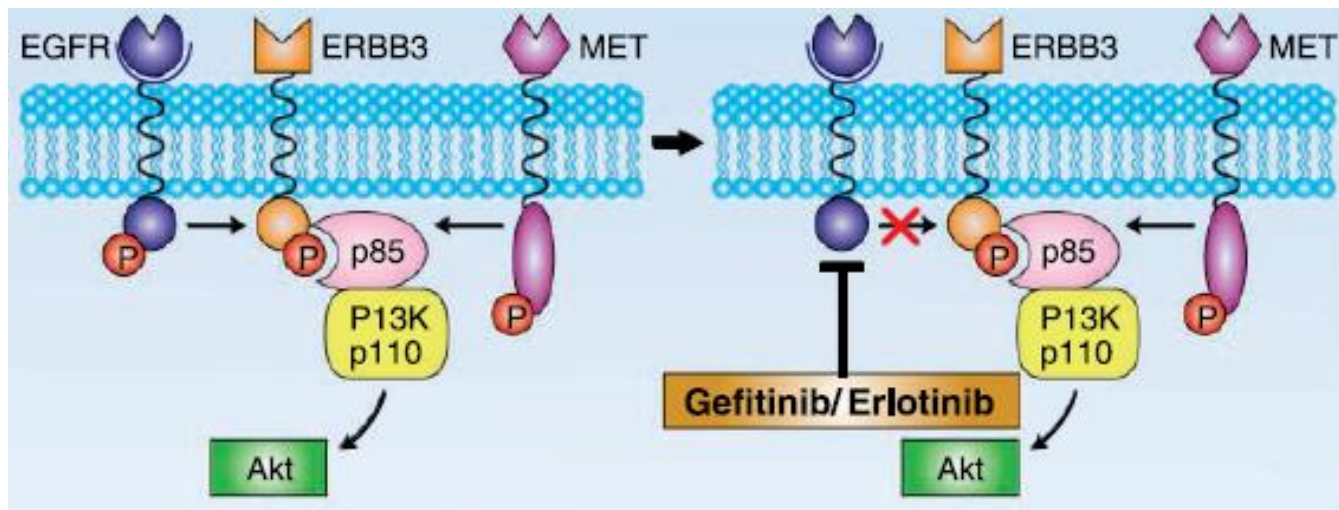
Holbro et al 2003 PNAS

Other RTKs use ErbB3 to escape targeted therapies

Mechanisms of Acquired Resistance to Epidermal Growth Factor Receptor Tyrosine Kinase Inhibitors in Non-Small Cell Lung Cancer

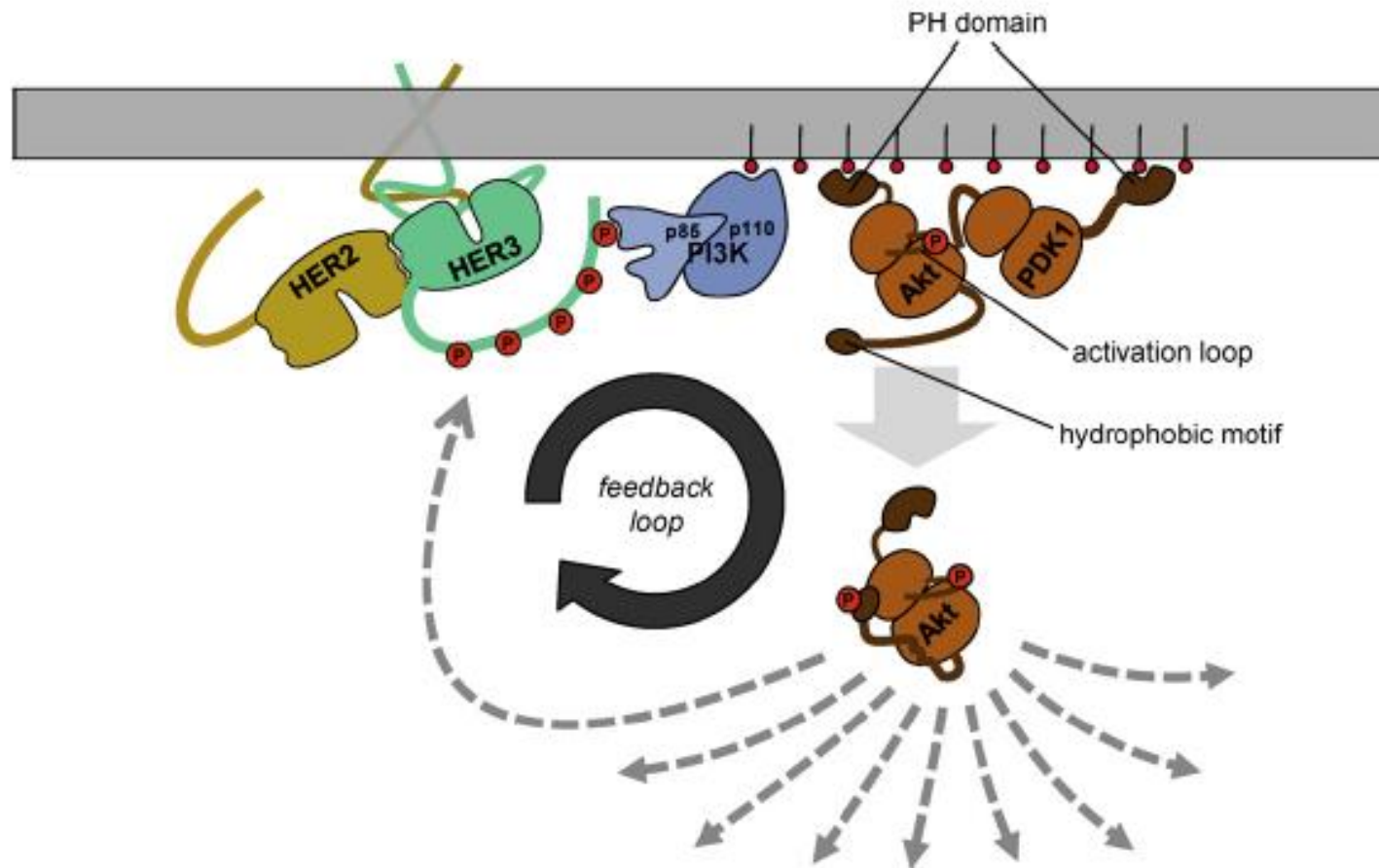
Jeffrey A. Engelman¹ and Pasi A. Jänne^{2,3}

Clin Cancer Res 2008;14(10) May 15, 2008



MET receptor in NSCLC

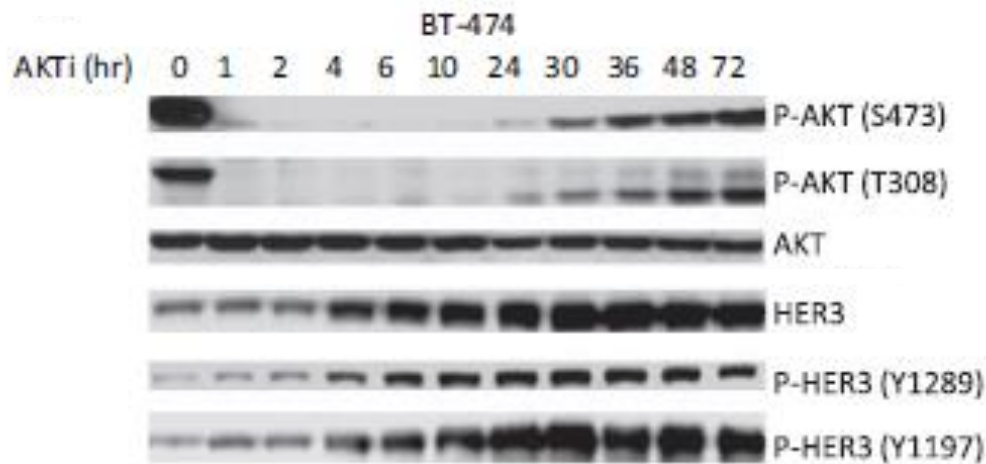
Moasser & colleagues showed in 2007 that high ErbB3 activity promoted escape from ErbB2 targeted therapeutics (Sergina et al 2007)



D. Amin et al 2010

Blockade of PI3K/AKT promotes ErbB3 expression & phosphorylation

AKT inhibitor



Chandarlapaty et al 2011

AKT dependent feed-back mechanisms in cancer cells

Constitutive feedback inhibition of signaling pathways is an important feature of tumors.... allowing them to escape stress-related processes that would cause cell death.

AKTi relieves negative feedback inhibition...

AKT dependent feed-back mechanisms in cancer cells

Constitutive feedback inhibition of signaling pathways is an important feature of tumors.... allowing them to escape stress-related processes that would cause cell death.

AKTi relieves negative feedback inhibition...

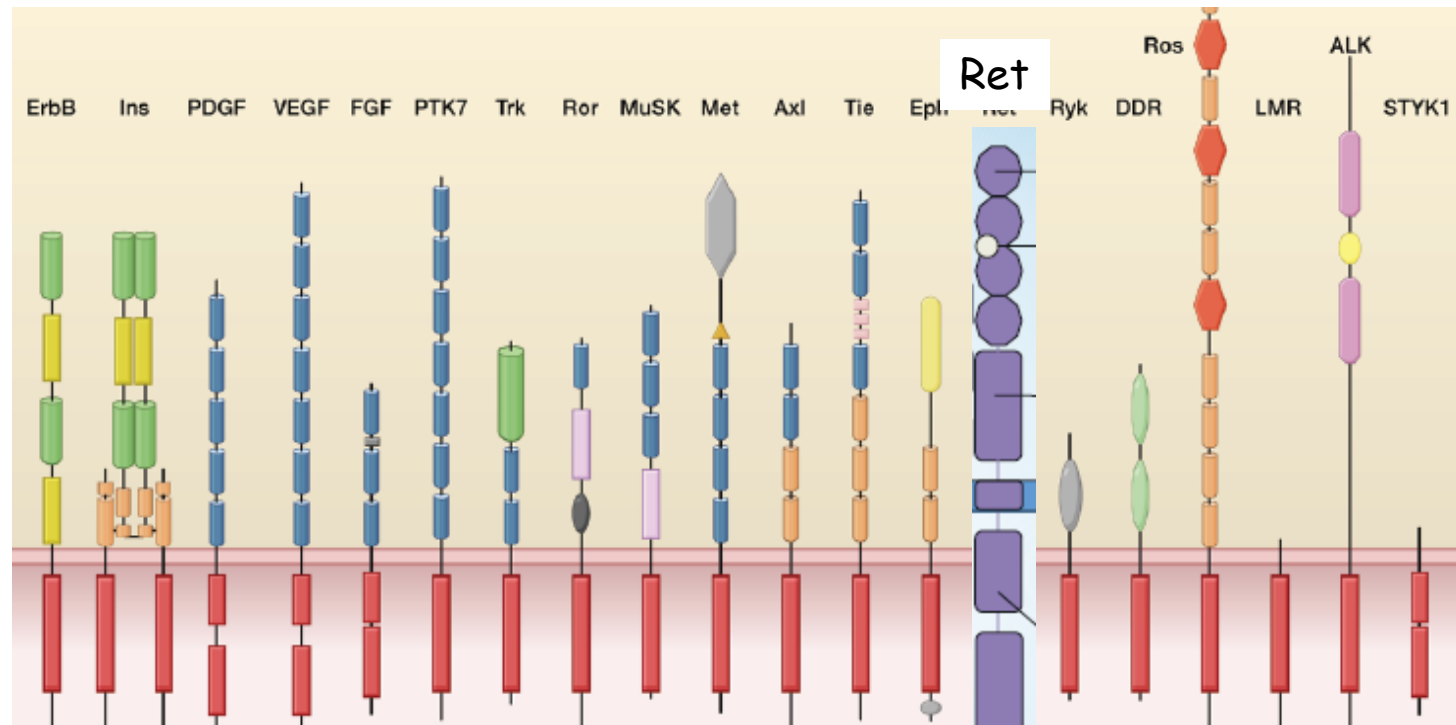
Phospho-RTK-Fold induced

P-RTK	mean induced	#cell lines
Insulin R	5.0	10/10
HER3	5.5	8/10
IGF-1R	4.8	8/10
EphA7	8.4	7/10
c-RET	5.5	5/10
HER4	3.3	5/10
EphA1	3.1	5/10
ROR1	3.1	4/10
C-MET	3.0	4/10

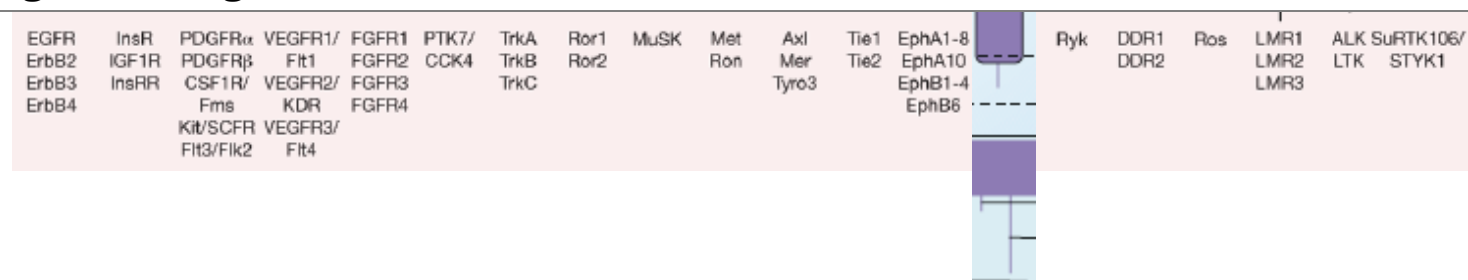
...leading to activation of multiple RTKs by different mechanisms.

ErbB3, INSR & IGF-1R are transcriptionally upregulated by FOXO.

RET receptor in breast cancer

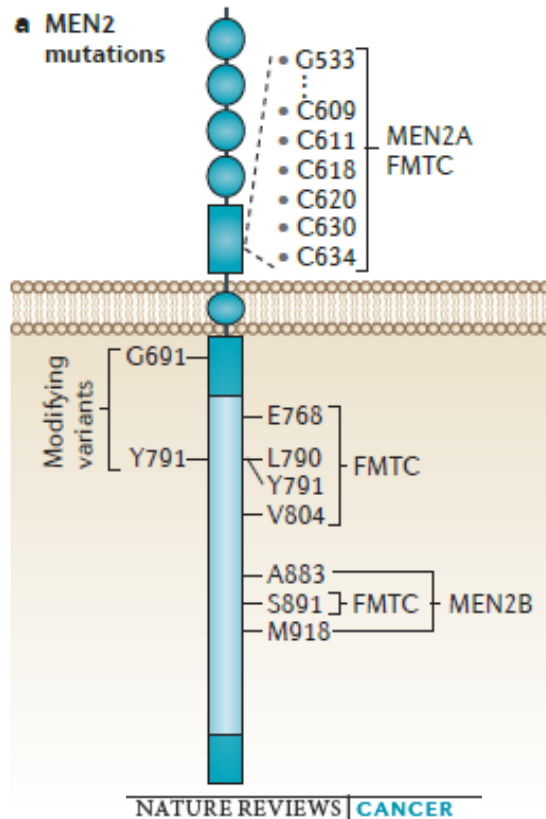


Single *RET* gene encodes three isoforms with different C-termini



Ret Receptor - Oncogenic mutations

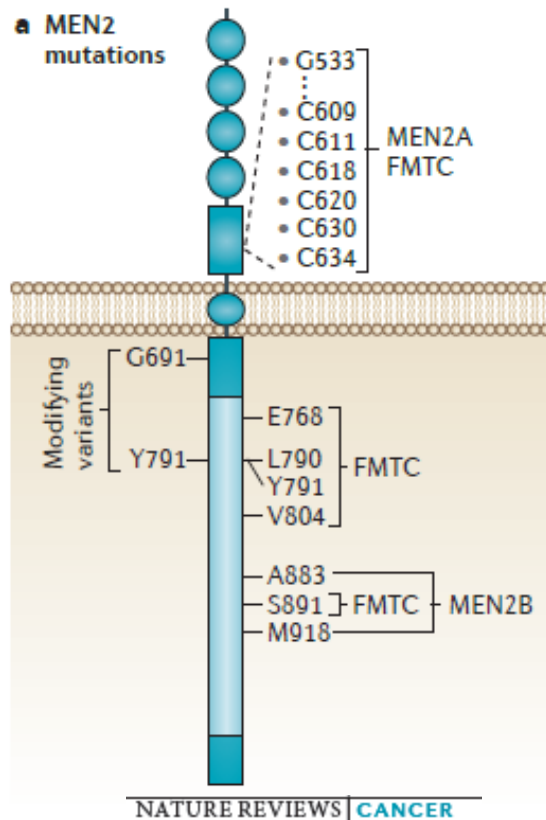
Heritable Ret mutations in MEN2
(Multiple endocrine neoplasia 2)



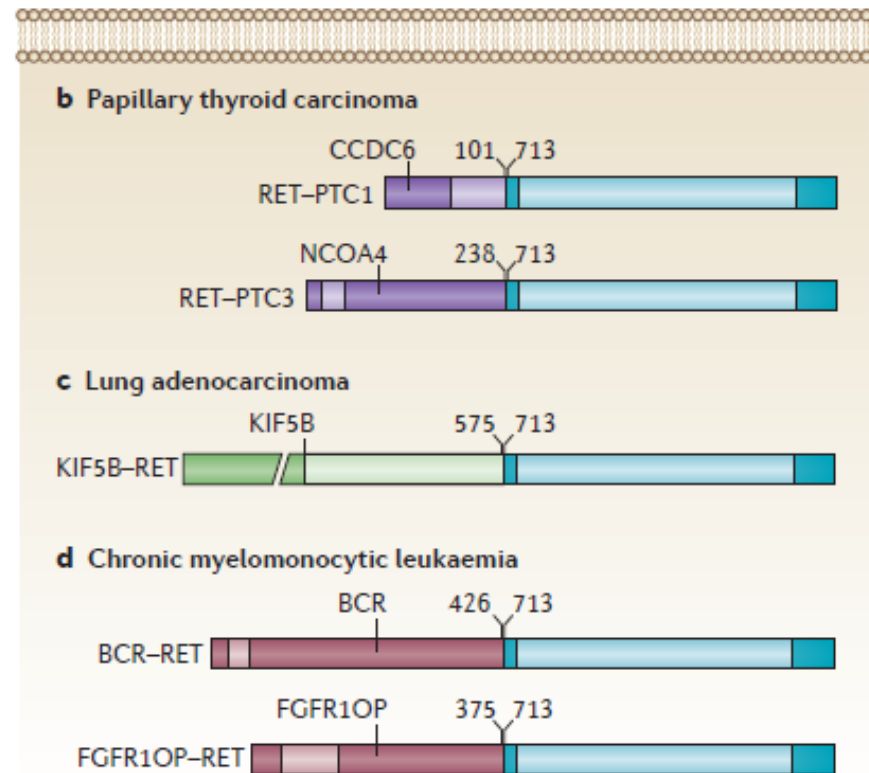
L Mulligan 2014

Ret Receptor - Oncogenic mutations

Heritable Ret mutations in MEN2
(Multiple endocrine neoplasia 2)



Somatic Ret mutations -fusion proteins



L Mulligan 2014

Ret receptor alterations in breast cancer

Breast Cancer

RET copy number changes - rare

RET rearrangements - a few reported

Ret activating mutations - none

Elevated Ret RNA & protein levels - common

Essighir et al Cancer Res 2007

Boulay et al Cancer Res 2008

Plaza-Menacho et al Oncogene 2010

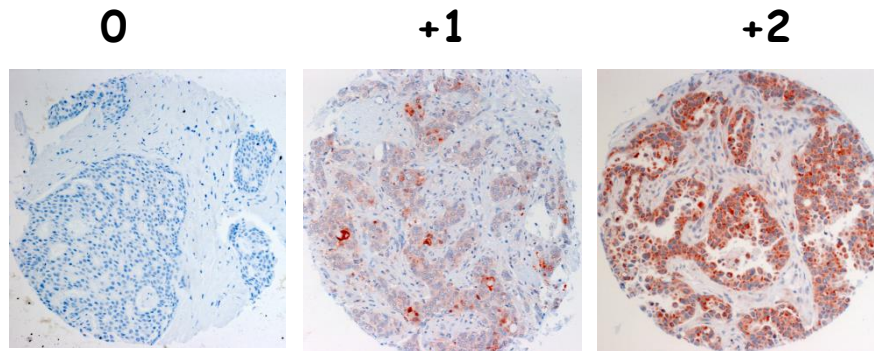
Kothari et al Cancer Dis 2013

Gattelli et al EMBO Mol Med 2013

Stransky et al Nature Comm 2014

IHC for Ret in a breast tumor TMA

Elevated Ret levels detected in
>60% of tumors (+1 and +2)



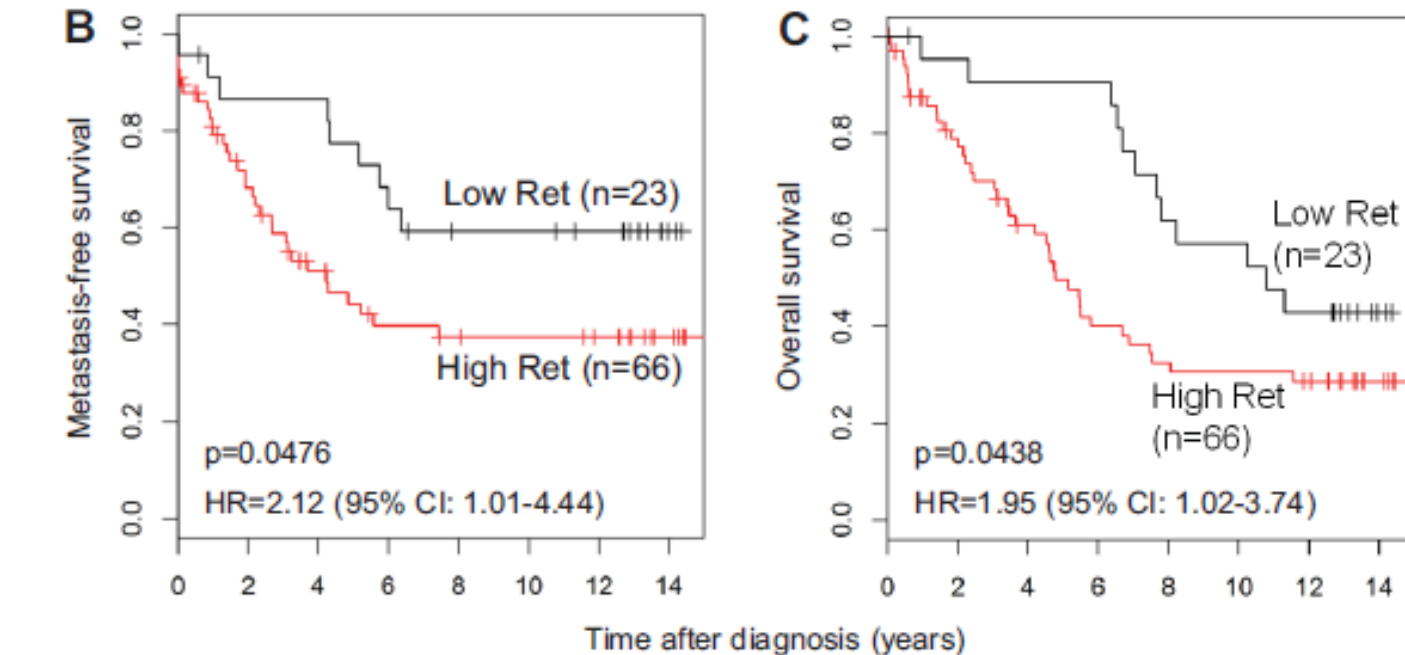
Breast Tumor Tissue Array (TMA) n=108

ER+ luminal tumors, ErbB2+++ and triple negative tumors show elevated Ret levels.

Gattelli et al 2013

Elevated Ret levels correlate with poor prognosis

Kaplan-Meier analyses of metastasis-free survival & overall survival



No. at risk

Low Ret	23	19	19	15	11	11	9	2
High Ret	66	37	24	17	15	14	12	5

No. at risk

Low Ret	23	20	19	19	13	12	9	2
High Ret	66	45	32	21	17	16	14	5

Conclusions & questions

WT Ret has oncogenic activity when constitutively expressed in the mammary gland.

Ret is a potential novel target in breast cancer.

Does Ret activity influence response to endocrine agents? (Morandi et al 2013 Can Res)

What are the signals that upregulate Ret levels? epigenetic, promoter mutations.....

Overview of ErbB receptors

Mutations in human cancers

Activation mechanisms

Role of ErbB2

ErbB2/ErbB3 heterodimers

Novel downstream regulator of metastasis

RET receptor and breast cancer