### Validation of Breast Cancer Microarray Analysis Using Molecular Biology Techniques

#### **Thesis**

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## **LIST OF CONTENTS**

Title	Page
♦ List of Tables	I
♦ List of Figures	II
♦ List of Abbreviations	III
• Introduction	1
♦ Aim of the Work	3
• Review of the Literature:	
* Breast Cancer	4
■ Epidemiology of Breast Cancer	4
■ Risk factors of Breast cancer	6
1- Age	6
2-Sex	6
3-Hormones & Pregnancy	7
4-Previous Breast Neoplasm	8
5-Enviromental exposures	8
6-Breast density	8
7-Family history & Genetics	8
■ Molecular Biology of Breast Cancer	12
Histopathological Classification of Breast Cancer	15
■ The Biological Classification Of Breast Cancer	22
Staging of Breast Cancer	23

# LIST OF CONTENTS (CONT.)

Title Page
* Microarray24
■ Types of microarrays include24
■ DNA microarrays24
* Human growth factor receptor bound protein 7 (Grb7)
■ Structure Function of Grb731
■ Role of Grb7 in cell migration35
o Interaction of Grb7 with EGF36
o Interaction of Grb7 with FAK38
<ul> <li>Association of Grb7 with Phosphoinositides 41</li> </ul>
* Homo Sapiens Tweety Family44
♦ Patients and Methods46
<b>♦ Results</b>
<b>◆ Discussion</b>
<b>◆ Summary</b>
<b>♦ Conclusion</b>
◆ References
♦ Arabic summary

## **LIST OF TABLES**

Tab. No	Title	Page
Table (1):	Established and possible risk factors for breast cancer	11
Table (2):	Immunohistochemical characterization of molecular subtypes of breast cancer	
<b>Table (3):</b>	Breast cancer stage grouping	23
<b>Table (4):</b>	Sequence of Grb7 primers	51
<b>Table (5):</b>	Sequence of TTYH1 primers	52
<b>Table (6):</b>	Sequence of GAPDH primers	52
Table (7):	The different breast cancer risk factors among the studied group	62
Table (8):	Grb7 expression among the studied groups	63
Table (9):	The relation between Grb7 expression and the different risk factors in the breast cancer group	67
Table (10):	The Relation Between Grb7 and the different clinicopathological parameters in the breast cancer group	69
Table (11):	The relation between Grb7 expression and the hormonal receptor status in the breast cancer group	70
Table (12):	The relation between Grb7 expression and the molecular subsets in the breast cancer group	71
Table (13):	Sensitivity and specificity, predictive values and accuracy of RT-PCR of Grb7 in breast cancer	72

### **LIST OF FIGURES**

Fig. No	Title	Page
Figure (1):	The overall organization of Grb7 and its products	31
Figure (2):	The modular organization of Grb7 protein. Numbers indicate the residue number of the amino acids	32
Figure (3):	Grb7 as a mediator of several signalling pathways	34
Figure (4):	FAK structural features and interaction proteins	39
Figure (5):	Analytical gel electrophoresis for Grb7 in breast cancer tissue	63
Figure (6):	Analytical gel electrophoresis for Grb7 in normal breast tissue	64
Figure (7):	Analytical gel electrophoresis for GAPDH in breast tissue	65
Figure (8):	Analytical gel electrophoresis for TTYH1	66

### **LIST OF ABBREVIATIONS**

Abbrev. Full Term
<b>Ajcc</b> American joint committee on cancer
ArgArgenine
BPSBetween PH and SH2 domains
<b>BRCA-1</b> Breast Related Cancer Antigen- 1
<b>BRCA-2</b> Breast Related Cancer Antigen- 2
<b>CDKIs</b> Cyclin dependant kinase inhibitors
CDKs Cyclin dependant kinases
cDNA Complementary Deoxyribonucleic Acid
CIS Non-invasive carcinomas
CK:Cytokeratins
cRNA complementaryribonucleic Acid
DCIS Ductal carcinoma in situ
<b>DNA</b> Deoxyribonucleic Acid
<b>EDTA</b> Ethylene diamine tetraacetic acid
<b>EGRF</b> Epidermal growth factor receptor
<b>EphB1</b> Ephrin type-B receptor
<b>ER</b> Estrogen Receptors
<b>ErbB1</b> Avian erythroblastosis oncogene B-1
<b>ErbB2</b> Avian erythroblastosis oncogene B-2
<b>ErbB3</b> Avian erythroblastosis oncogene B-3
<b>ErbB4</b> Avian erythroblastosis oncogene B-4
ERK1/2 Extracellular signal-regulated kinase
FAK Focal adhesion kinase
FN Fibronectin

# LIST OF ABBREVIATIONS (CONT.)

Abbrev.	Full Term
GO phase	. Gap zero phase of the cell cycle
GAPDH	. Glyceraldehyde 3 phosphate dehydrogenase
<b>GM</b>	. Region for Grb and Mig
Grb10	. Human growth factor receptor bound protein 10
Grb14	. Human growth factor receptor bound protein 14
Grb7	. Human growth factor receptor bound protein 7
HER-2	. Human Epidermal growth factor Receptor 2
IHC	. Iimmunohistochemistry
JNK	. c-Jun N-terminal kinase
kDa	. kilodalton
KOR	. Kappa opioid receptor
LCIS	. Lobular carcinoma in situ
Lys	Lysine
M phase	. Mitosis phase of the cell cycle
MAPKs	. Mitogen-activated protein kinase
P16	. Gene codes for a 16 kilodalton protein
P27	. Gene codes for a 27 kilodalton protein
p38	. Gene codes for a 38 kilodalton protein
P53	. Gene codes for a 53 kilodalton protein
PBS	. Phosphate buffered saline
PCR	. Polymerase chain reaction
PH	. Pleckstrin homology domain

## LIST OF ABBREVIATIONS (CONT.)

Abbrev.	Full Term
Phe	. Phenylalanine
<b>PI3</b> -K	. Phosphatidylinositol 3-kinase
PR	. Progesterone Receptors
pRb	. Retinoblastoma protein
QC	. Quality control
<b>RA</b>	. Ras-associating domain
Ras	. Rat sarcoma
RT-PCR	. Reverse transcriptase - polymerase chain reaction
Rb	. Retinoblastoma gene
<b>RNA</b>	. Ribonucleic Acid
TBE	Trisma, Boric and EDTA
S phase	. DNAsynsesis phase of the cell cycle
SH2	. Src homology 2
SNP	. Single nucleutide polymorphism
Src family.	. Sarcoma virus
STAT3	. Signal transducer and activator of transcription-3
<b>TTYH1</b>	. Tweety homologue 1
<b>TTYH2</b>	. Tweety homologue 2
ТТҮНЗ	. Tweety homologue 3
<b>Tyr</b>	. Tyrosine

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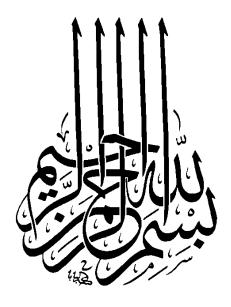
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Amal Said Mohammed Darweesh



(قَالُوا سُبْحَانَكَ لاَ عِلْمَ لَنَا إلاَّمَا عَلَّمْتَنَا إِنَّكَ أَنتَ الْعَلِيمُ الْحَكِيمَ

صدق الله العظيم سورة البقرة آية (32)

#### Introduction

Breast cancer is a major health burden worldwide. It is the most common cause of cancer among females in both developed and developing countries. It is responsible for over 1 million of the estimated 10 million neoplasms diagnosed worldwide each year in both sexes (*Bray et al.*, 2004).

Breast cancer is the second leading cause of cancer deaths in general after lung cancer and it is the most common cancer among women worldwide (*Laurance and Jeremy*, 2006).

In Egypt, breast cancer is the most common cancer among women, representing 18.9% of total cancer cases among the Egyptian National Cancer Institute (NCI) and represents 37.5% of all reported tumors in Egyptian females (*Salem et al.*, 2010).

In the past several years, a new technology, called microarray, has attracted great interests among biologists. This is because traditional methods generally work on a gene in one experimental basis, which means that the throughput is very limited. This technology promises to monitor the whole genome on a single chip so that the researchers can have a better picture of the interactions among thousands of genes simultaneously. They are useful when one wants to survey a large number of genes quickly or when the sample to be studied is small.

A previously done microarray data on breast cancer by *Hana et al.* (2009) showed that members of the growth factor receptor family overexpression have been of considerable interest in tumorigenesis (e.g. Grb7). While, it also highlighted some genes to be related to breast cancer for the first time. Among these was the gene called TTYH1 which was found to be significantly under expressed in Breast cancer.

Growth factor receptor-bound protein-7 (Grb-7) is a member of the Grb-7/-10/-14 family. It has been implicated in important cellular and physiological functions such as signal transduction, cell motility and tumor progression (*Cariou et al.*, 2004).

Tweety, belongs to a family which includes three members, designated as TTYH1 (Tweety homologue 1), TTYH2 and TTYH3. It recently identified Cl<sup>-</sup> channels predicted to be modified by N-glycosylation (*Yaowu et al.*, 2008).

## **Aim of the Work**

The aim of this study is to validate the results obtained from the previous microarray data analysis with respect to the above mentioned genes (Grb-7 & TTYH1). Also, we will study the relation between their expression and the development of the disease. Moreover, their relation with the different bad prognostic indicators will also be addressed.

### **Breast Cancer**

Breast cancer represents a serious health problem and is currently the most frequent malignancy in female population.

It is the most common cause of cancer related mortalities among women worldwide. The basic understanding of breast cancer initiation and progression is still incomplete.

In addition, there is a need to develop improved methods to stratify breast cancer patients into different risk groups more accurately than can be achieved with current clinicopathologic classification methods. Hence, low-risk patients can be spared unnecessary treatment, avoiding side effects and reducing the cost of treatment (*Li and Brattain*, 2006).

#### **Epidemiology**

According to the American Cancer Society, every three minutes a woman in the United States is diagnosed with breast cancer. This cancer incidence in women has increased from one in 20 in 1960 to one in eight nowadays. About 1.3 million women are expected to be diagnosed with this cancer annually worldwide and about 465,000 will die from the disease. Breast cancer death rates have been dropping steadily since 1990 because of earlier detection and better treatment (*Mehmet et al.*, 2012).

According to the National Cancer Institute, Cairo, Egypt, breast cancer is the most common cancer among women,

representing 18.9% of total cancer cases. Among the Egypt National Cancer Institute (NCI) series of 10,556 patients during the year 2001 (*Salem et al.*, 2010).

There is an international geographical variation in the incidence of Breast Cancer. Incidence rates are higher in the developed countries than in the developing countries. Incidence rates are also higher in urban areas than in the rural areas (*Vorobiof et al.*, 2001).

The mortality rates of breast cancer are declining in the developed world (Americas, Australia and Western Europe) as a result of early diagnosis, screening, and improved cancer treatment programs, the converse is true in the developing world (*Adesunkanmi et al.*, 2006).

The hallmarks of the disease in Africa are patients presenting at advanced stage, lack of adequate mammography screening programs, preponderance of younger pre-menopausal patients, and a high morbidity and mortality (*Parkin et al.*, 2005).