# Cancer Spheroid Proliferation Is Suppressed by a Novel Low-toxicity Compound, Pyra-Metho-Carnil, in a Context-independent Manner 

KAZUMASA YOSHIDA ${ }^{1,2}$, KENSUKE NISHI $^{3}$, SHUHEI ISHIKURA ${ }^{1,2}$, KAZUHIKO NAKABAYASHI ${ }^{4}$, RYO YAZAKI ${ }^{5}$, TAKASHI OHSHIMA ${ }^{5}$, MASAHIKO SUENAGA ${ }^{6}$, SENJI SHIRASAWA ${ }^{1,2}$ and TOSHIYUKI TSUNODA ${ }^{1,2}$<br>${ }^{1}$ Department of Cell Biology, Faculty of Medicine, and<br>${ }^{2}$ Central Research Institute for Advanced Molecular Medicine, Fukuoka University, Fukuoka, Japan;<br>${ }^{3}$ Section of Otolaryngology, Department of Medicine, Fukuoka Dental College, Fukuoka, Japan;<br>${ }^{4}$ Department of Maternal-Fetal Biology, National Center for Child Health and Development, Tokyo, Japan;<br>${ }^{5}$ Graduate School of Pharmaceutical Sciences, and<br>${ }^{6}$ Department of Chemistry, Graduate School of Science, Kyushu University, Fukuoka, Japan


#### Abstract

Background/Aim: In a screen of compounds to selectively suppress the growth of cancer spheroids, which contained mutant ( $m t$ ) KRAS, NPD10621 was discovered and associated derivatives were investigated. Materials and Methods: Spheroid areas from HCT116-derived HKe3 spheroids expressing wild type (wt) KRAS (HKe3-wtKRAS) and mtKRAS (HKe3-mtKRAS) were treated with 12 NPD10621 derivatives and measured in three-dimensional floating (3DF) cultures. Several cancers were treated with NPD1018 (pyra-metho-carnil: PMC) in 3DF cultures. In a nude mouse assay, $50 \%$ cell growth inhibition $\left(G I_{50}\right)$ values were determined. Results: From these 12 derivatives, PMC was the most effective inhibitor of HKe3-mtKRAS spheroid growth with the least toxicity. Furthermore, PMC-mediated growth suppression was observed in all tested cancer cell lines, independent of tissue context, driver gene mutations, and drug resistance, suggesting that the PMC target(s) was crucial for cancer growth in a context-independent manner. The $\mathrm{GI}_{50}$ value of PMC in nude mice assay was $7.7 \mathrm{mg} / \mathrm{kg}$


[^0]Key Words: Cancer spheroid, KRAS, 3D floating culture, low-toxic, context-independent.

and nude mice that were administered $40 \mathrm{mg} / \mathrm{kg}$ PMC for 7 days did not show any abnormal blood cell count values. Conclusion: PMC is a low-toxicity compound that inhibits the growth of different tumor cell types.

The human gene encoding KRAS GTPase is among the most frequently mutated cancer drivers (1). Mutant KRAS (mtKRAS), with activating missense mutations, constitutively activates numerous signaling pathways implicated in cell proliferation and survival, and therefore promotes cancer development, metastasis, and therapy resistance $(2,3)$. Oncogenic $K R A S$ mutations are frequently identified in hard-to-treat cancers such as pancreatic cancers ( $86 \%-96 \%$ with oncogenic $K R A S$ mutations) (4), colorectal cancers (CRCs) ( $40 \%$-54\%), and non-small cell lung cancers ( $15 \%-20 \%$ ) $(5,6)$. Hence, considerable efforts have been focused on developing drugs targeting the activated KRAS or KRAS-related tumor-promoting pathways.

Recently, AMG510 (sotorasib), which directly targets the KRAS G12C mutation, was developed (7) and approved by the United States Food and Drug Administration. However, the G12C mutation accounts for approximately $10 \%$ of mutations in oncogenic mtKRAS (5, 7-12); therefore, oncogenic mtKRAS remains an "undruggable" target. In addition, while molecular-targeted drugs against KRASrelated signaling factors (such as BRAF and EGFR) are clinically approved and effective, intrinsic or acquired drug resistance is an important unsolved issue in the present cancer treatment. Therefore, novel agents, which overcome KRAStargeted therapy limitations, are highly anticipated.

Different natural compounds have served as important discovery sources for effective anticancer agents, while canonical anticancer agents from natural products, such as

Table I. Efficacy of growth suppression by PMC on several types of cancer spheroids.

| Tissue | Cell line | Type of RAS mutation | Other mutations of hub genes | Effect of PMC | KRAS gene effect |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Lung (meta) | Calu-6 | KRAS(Q61K) | TP53 | Positive | -1,924979 |
| Colorectal | HCT 116 | KRAS(G13D) | CDKN2A PIK3CA CTNNB1 | Positive | -1,577539 |
| Pancreas | MiaPaka 2 | KRAS(G12C) | TP53 CDKN2A | Positive (high conc.) | -1,553559 |
| Colorectal | SW 837 | KRAS(G12C) | APC TP53 | Positive (high conc.) | -1,550585 |
| Colorectal (meta) | SW 620 | KRAS(G12V) | APC TP53 | Positive | -1,452649 |
| Lung | A-427 | KRAS (G12V, G12D) | CDKN2A CTNNB1 | Positive | -1,299873 |
| Pancreas (meta) | Hs 766T | KRAS(Q61H) | TP53 CDKN2A CTNNB1 | Positive (high conc.) | -1,21037 |
| Colorectal | DLD-1 | KRAS(G13D) | APC TP53 PIK3CA | Positive (high conc.) | -1,12538 |
| Colorectal | LS 180 | KRAS(G12D) | APC CTNNB1 PTEN PIK3CA BRAF | Positive | -1,070264 |
| Endometrium | HEC-1-B | KRAS(G12D) | APC TP53 PIK3CA BRAF | Positive (high conc.) | -0,9731834 |
| Lung | A549 | KRAS(G12S) | CDKN2A | Positive (high conc.) | -0,958262 |
| Breast (meta) | MDA-MB-231 | KRAS(G13D) | TP53 BRAF (G464V) CDKN2A | Positive (high conc.) | -0,9540346 |
| Colorectal (meta) | LoVo | KRAS(G13D) | APC CDKN2A CTNNB1 | Positive | -0,8052327 |
| Gastric (meta) | Hs 746T | WT | APC TP53 | Positive | -0,6759476 |
| Colorectal | HCT-15 | KRAS(G13D) | APC DCC TP53 PIK3CA | Positive (high conc.) | -0,5670731 |
| Breast (meta) | MCF-7 | WT | PIK3CA CDKN2A | Positive (high conc.) | -0,5231921 |
| Colorectal (meta) | COLO 201 | WT | APC CTNNB 1 BRAF (V600E) | Positive | -0,4896021 |
| Cervix | SiHa | WT |  | Positive | -0,4693851 |
| Colorectal (meta) | CCK-81 | WT | APC TP53 CTNNB1 PIK3CA BRAF | Positive | -0,4509773 |
| Liver | Hep G2 | NRAS(Q61L) | CTNNB1 | Positive | -0,4485559 |
| Prostate (meta) | DU145 | WT | TP53 CDKN2A CTNNB1RB1 | Positive (high conc.) | -0,4242528 |
| Colorectal | COLO 205 | WT | APC TP53 BRAF (V600E) | Positive | -0,4100692 |
| Breast | HCC1937 | WT | TP53 BRCA1 PTEN | Positive | -0,3932961 |
| Breast | Hs 578T | HRAS(G12D) | TP53 | Positive (high conc.) | -0,3919313 |
| Colorectal | SW 48 | WT | APC DCC CTNNB1 TP53 PIK3CA | Positive | -0,3740498 |
| Cervix | C-33A | WT DCC | TP53 PTEN PIK3CA CTNNB1BRAF RB | B1 Positive | -0,347293 |
| Breast (meta) | MDA-MB-468 | WT | RB1 TP53 SMAD4 PTEN | Positive | -0,3325101 |
| Prostate (meta) | LNCaP | WT | APC CTNBB1 PTEN | Positive | -0,3270123 |
| Breast | BT549 | WT | RB1 TP53 PTEN | Positive (high conc.) | -0,2206648 |
| Ovarian | Caov-3 | WT | TP53 PTEN | Positive (high conc.) | -0,050929 |
| Colorectal | HKe3-mtKRAS | KRAS(G13D) | CDKN2A PIK3CA CTNNB1 | Positive | unknown |
| Pancreas (meta) | Hs 700T | KRAS(G12C) | TP53 | Positive | unknown |
| Endometrium | AN3 CA | KRAS(G12D) | TP53 PTEN | Positive | unknown |
| Colorectal | WiDr | WT | BRAF(V600E) | Positive | unknown |
| Skin | SK-MEL-28 | WT | TP53 BRAF(V600E) | Positive | unknown |
| Kidney | A-498 | WT | APC CDKN2A | Positive | unknown |
| Bladder | J82 | WT | APC TP53 PIK3CA PTEN RB1 | Positive (high conc.) | unknown |
| Breast | BT-20 | WT | TP53 PI3CA RB1 | Positive | unknown |
| Cervix | HeLa | WT | DCC | Positive | unknown |

camptothecin (topoisomerase I inhibitor) and paclitaxel (mitotic inhibitor), are highly toxic and cause severe side effects (13). We previously developed a novel drugscreening system using three-dimensional (3D) floating (3DF) cultures to identify low-toxicity inhibitors of the mtKRAS-mediated oncogenic pathway. In this system, two HKe3-derived cell lines were used to examine if the compounds could selectively suppress cancer cell spheroid growth (14): one expressing wt KRAS (HKe3-wtKRAS; normal cell model) and another expressing KRAS G13D mutant (HKe3-mtKRAS; cancer cell model) with the same genetic backgrounds other than KRAS mutation. Using this system and natural product libraries, we previously identified several new compounds displaying selective
growth-suppressive effects in cancer cells harboring mtKRAS but not in normal cells $(15,16)$. We also used this system to validate the anti-tumor effects of MK615 (Japanese apricot extract), apremilast (PDE4 inhibitor), and UHA6052 (resveratrol-derivative) against human CRC cells harboring mtKRAS (17-19).

In this study, we report the identification of NPD1018 (pyra-metho-carnil: PMC), from natural product libraries, as an effective low-toxicity inhibitor of HKe3-mtKRAS tumor growth in 3DF cultures and a nude mouse xenograft model. PMC has the potential to become a useful anticancer agent, as it exhibits strong efficacy toward many cancer cell types independent of tissue context, driver gene mutations, and drug resistance.

Table II. List of NPD10621 derivatives.
Name

## Materials and Methods

Compounds. A natural product compound library was provided by RIKEN NPDepo (Saitama, Japan). Chemical distances were determined using the Jaccard similarity index $(16,20)$. PMC (IUPAC Name: 1-\{3-[(3,5-dimethylpyrazol-1-yl)methyl]-4-methoxyphenyl]-2,3,4,9-tetrahydro-1H-pyrido[3,4-b]indole) was synthesized by Kyushu-University, Graduate School of Pharmaceutical Sciences and Namiki Shoji Co., Ltd. (Tokyo, Japan).

Cell culture. HKe3, HKe3-wtKRAS, and HKe3-mtKRAS cultures were established and maintained as previously described $(14,16,21)$. Other cells (Table I), including HCT116 cells were purchased from the American Type Culture Collection (Manassas, VA, USA). Human bladder cancer KK47 cells, cisplatin-resistant KK47 cells (KK47/DDP20), patient-derived melanoma cells, and a vemurafenibresistant subline were obtained and maintained as previously described $(22,23)$.


Figure 1. NPD10621 derivatives inhibit HKe3-mutant (mt) KRAS spheroid growth. The relative spheroid area of HKe3-mt KRAS (A and B) and HKe3-wild type (wt) KRAS (C and D) cells treated with NPD10621 derivatives on day 3 and 6 compared with HKe3-wt KRAS treated with dimethyl sulfoxide (DMSO control) on day 3. The NPD10621 derivative concentration was $16.6 \mu M$ ( $A$ and $C$ ) and $50 \mu M$ ( $B$ and $D$ ).
$3 D F$ cell culture. Cells were seeded in 96-well plates with roundbottoms and ultralow attachment surfaces (product number 7007; Corning Inc., Corning, NY, USA) and treated with derivatives at day 0 as described previously (14-16).

Spheroid area measurements. Photomicrographs of the cells were taken and analyzed using an IN Cell Analyzer 1000 (GE Healthcare, Little Chalfont, UK) and an IN Cell Developer Toolbox (GE Healthcare). Relative growth rates were calculated by comparing control spheroid areas on day 3 .

Tumorigenicity assays. Four-week-old female SCID Hairless Outbred (SHO) mice (Crlj:SHO-Prkdc ${ }^{s c i d} \mathrm{Hr}^{h r}$ ) were purchased from Charles River Laboratories (Yokohama, Japan). For implantation, HCT116 cells were trypsinized and re-suspended in a 1:1 mixture of phosphate-buffered saline and Matrigel (BD Bioscience, Bedford, MA, USA). Further, a $100 \mu \mathrm{l}$ aliquot containing $1.5 \times 10^{6} \mathrm{HCT} 116$ cells was subcutaneously injected into the flank of mice as previously described (17).

Gene effect scores. The DepMap portal was used to determine $K R A S$ gene effect scores, which was calculated using Chronos algorisms (24).

Data presentation. All the experiments were performed in triplicate and data are presented as mean $\pm$ standard deviation.

## Results

NPD10621 derivatives inhibit HKe3-mtKRAS growth in $3 D F$ cultures. During the first screening of compounds from natural products, NPD10621 was identified as a candidate
drug that specifically inhibited HKe3-mtKRAS spheroid growth but not that of HKe3-wtKRAS spheroids (data not shown). Using the chemical distances, 12 NPD10621 derivatives were selected from RIKEN natural product libraries (20) (Table II). Further, cells grown in 3DF cultures were treated with $16.6 \mu \mathrm{M}$ and $50.0 \mu \mathrm{M}$ derivatives (\#103\#114) to examine their effects on cell proliferation. While the HKe3-mtKRAS spheroid areas treated with dimethyl sulfoxide (DMSO) were 2.53 -fold larger than control HKe3wtKRAS spheroids treated with DMSO on day 3, HKe3mtKRAS spheroid areas treated with $16.6 \mu \mathrm{M} \mathrm{\# 107}$ and \#113 were 1.69- and 1.85 -fold larger on day 6 , respectively, when compared with control spheroids on day 3 (Figure 1A). This suggested that these derivatives suppressed cancer cell growth.

The areas of HKe3-mtKRAS spheroid treated with 50.0 $\mu \mathrm{M} \# 103, \# 105, \# 107, \# 109, \# 111, \# 112$, and \#113 were 0.19 , $0.09-$, 0.17-, 0.54-, 1.71-, 1.91-, and 1.63 -fold larger on day 6 , respectively, when compared with those of HKe3-wtKRAS spheroids treated with DMSO on day 3 (Figure 1B).

The areas of HKe3-wtKRAS spheroids treated with 16.6 $\mu \mathrm{M} \# 107, \# 109, \# 110, \# 111, \# 112$, and \#114 were on day 6 1.63-, 2.36-, 1.96-, 2.19-, 2.13-, and 2.30-fold larger, respectively, when compared with those of HKe3-wtKRAS spheroids treated with DMSO on day 3 (Figure 1C). The areas of HKe3-wtKRAS spheroid treated with $50.0 \mu \mathrm{M}$ \#106, \#109, \#110, \#111, \#113, and \#114 were on day 31.59 , 2.17-, 3.33-, 2.40-, 1.64-, and 1.91-fold larger, respectively, when compared with those of HKe3-wtKRAS spheroids
Table III. Scoring method.

| Chemical No. (NPD No.) | A | B | C | D | $\mathrm{E}=\mathrm{A}+\mathrm{B}+\mathrm{C}+\mathrm{D}$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | The area of HKe3-mtKRAS spheroids with $16.6 \mu \mathrm{M}$ drugs at day 6 is $0 \sim 2$-fold increased: 3 p, 2~3-fold increased:2p, 3~4-fold increased: 1 p , over 4-fold increased:0p, compared to that of HKe3-wtKRAS spheroids with DMSO control at day3. | The area of HKe3-mtKRAS spheroids with $50.0 \mu \mathrm{M}$ drugs at day 6 is $0 \sim 2$-fold increased:3p, 2~3-fold increased:2p, 3~4-fold increased:1p, over 4-fold increased:0p, compared to that of HKe3-wtKRAS spheroids with DMSO control at day3. | The area of HKe3-wtKRAS spheroids with $16.6 \mu \mathrm{M}$ drugs at day6 is over 1.5 -fold increased: $2 \mathrm{p}, 1.1 \sim 1.5$-fold increased: 1p, 0~1.1-fold increased:0p, compared to that of HKe3-wtKRAS spheroids with DMSO control at day3. | The area of HKe3-wtKRAS spheroids with $50.0 \mu \mathrm{M}$ drugs at day 6 is over 1.5 -fold increased: $2 \mathrm{p}, 1.1 \sim 1.5$-fold increased:1p, $0 \sim 1.1$-fold increased:0p, compared to that of HKe3-wtKRAS spheroids with DMSO control at day3. | Total:10p |
| \#102 (NPD10261) | 0 | 2 | 0 | 0 | 2 |
| \#103 (NPD10259) | 2 | 3 | 1 | 0 | 6 |
| \#104 (NPD9443) | 0 | 0 | 0 | 0 | 0 |
| \#105 (NPD71) | 2 | 3 | 0 | 0 | 5 |
| \#106 (NPD9444) | 2 | 1 | 1 | 2 | 6 |
| \#107 (NP980) | 3 | 3 | 2 | 0 | 8 |
| \#109 (NPD1022) | 1 | 3 | 2 | 2 | 8 |
| \#110 (NPD10254) | 2 | 1 | 2 | 2 | 7 |
| \#111 (NPD981) | 2 | 3 | 2 | 2 | 9 |
| \#112 (NPD51) | 2 | 3 | 2 | 1 | 8 |
| \#113 (NPD1018) | 3 | 3 | 1 | 2 | 9 |
| \#114 (NPD10256) | 1 | 2 | 2 | 2 | 7 |

treated with DMSO alone on day 3 (Figure 1D). These observations suggested that the toxicity of these derivatives was low in normal cells. To select the best compounds from these derivatives, we scored toxicity in the normal model (HKe3-wtKRAS) and growth suppression efficacy in the cancer model (HKe3-mtKRAS) at low or high doses (Table III). When combined, these results indicated that \#113 (NPD1018) had the highest score suggesting that it is a good candidate for further analyses. We renamed NPD1018 as PMC from its three functional groups: pyrazole, methoxyphenyl, and $\beta$-carboline.

PMC suppress growth of several cancer spheroids with or without KRAS mutations. The parental HKe3 cells were derived from HCT116 cells by disrupting the KRAS G13D mutation by homologous recombination. PMC selectively suppressed HCT116 spheroid growth in a dose-dependent manner (Figure 2A). To examine PMC efficacy against other cell lines, 3DF cultures were treated with 5, 15, 45, and $90 \mu \mathrm{M}$ (high concentration) PMC (Figure 2B and Table I). Notably, PMC suppressed not only cells with KRAS mutations, such as Calu-6 (colon) and SW620 (colon) cells, but also cells without KRAS mutations (Figure 2B). These cells had other driver mutations, such as BRAF [WiDr (colon) and SK-MEL28 (skin) cells] or PTEN [MDA-MB468 (breast) and LNCaP (prostate) cells], suggesting that PMC could effectively inhibit the growth of cancer cells with different driver mutations. Indeed, PMC suppressed growth of all examined cell lines, independent of tissue or gene mutations (Table I). Furthermore, PMC suppressed the growth of cisplatin-resistant bladder cancer KK47 spheroids and patient-derived melanoma spheroids with vemurafenib resistance (Figure 2C) $(22,23)$. The effect of PMC on growth suppression was also independent of KRAS dependency (high KRAS dependency: KRAS gene effect $<-0.5$ ) (Table I). These results suggested that the PMC target(s) was independent of tissue context and driver gene mutations and was not closely associated with KRAS dependency.

The effects of PMC on in vivo human colorectal cancer cell (HCT116) tumorigenicity. HCT116 cells were subcutaneously injected into flanks of nude mice to examine the effects of PMC on HCT116 cell tumorigenicity. PMC was administered from day 0 . In control mice, tumor volume was $2,362 \mathrm{~mm}^{3}$ on day 7 . In contrast, in mice treated with $10 \mathrm{mg} / \mathrm{kg}, 40 \mathrm{mg} / \mathrm{kg}$, and $80 \mathrm{mg} / \mathrm{kg}$ PMC, tumor volumes were $829 \mathrm{~mm}^{3}, 525 \mathrm{~mm}^{3}$, and $201 \mathrm{~mm}^{3}$, respectively, on day 7 (Figure 3A). The $50 \%$ cell growth inhibition $\left(\mathrm{GI}_{50}\right)$ value was $7.7 \mathrm{mg} / \mathrm{kg}$. Furthermore, mice that administered 40 $\mathrm{mg} / \mathrm{kg}$ PMC for 7 days showed no abnormal blood cell count values (Figure 3B), suggesting that PMC inhibited in vivo tumor growth with low toxicity.


Figure 2. Pyra-metho-carnil (PMC) inhibits cancer cell growth in three-dimensional floating (3DF) cultures. A: HCT116 or HKe3 cells were grown in 3DF cultures and treated with dimethyl sulfoxide (DMSO) or PMC $(5,15$, and $45 \mu M)$ on day 0 . Spheroid images of four replicates on day 6 are shown (upper panel). Relative spheroid areas on day 3 and 6 compared with HKe3 spheroid areas treated with DMSO on day 3 are shown (lower panel). B and C: Spheroid images of the indicated cancer cells treated with DMSO (control) or PMC ( $45 \mu M$ ) on day 6 in $3 D F$ cultures.

## Discussion

In this study, we identified PMC as a potent drug for the treatment of several cancers. Furthermore, PMC showed low toxicity and suppressed mtKRAS CRC growth in vivo. The

PMC structure consists of $\beta$-carboline with methoxyphenyl and pyrazole at the C 1 position. $\beta$-carbolines such as harmine are often identified in medicinal plants and exert antiproliferative effects toward several cancers (25, 26). In addition, $\beta$-carboline hybrids with pyrazole at the C 3 position


Figure 3. The effects of pyra-metho-carnil (PMC) on human colorectal cancer (HCT116) cell tumorigenicity in vivo. A: HCT116 cells were subcutaneously injected into the flanks of nude mice. Relative tumor volumes are shown for mice treated with and without PMC. Derivatives were administered each day from day 0. B: Mice were administered DMSO (control) or $40 \mathrm{mg} / \mathrm{kg}$ PMC each day for 7 days. Blood biochemistry parameters were unchanged. WBC: White blood cell; RBC: red blood cell; HGB: hemoglobin; HCT: hematocrit; MCV: mean corpuscular volume; MCH: mean corpuscular hemoglobin; MCHC: mean corpuscular hemoglobin concentration; PLT: platelets.
exhibit similar anticancer properties toward A549 (lung), DU145 (prostate), MCF-7 (breast), and Hela (cervix) cells through targeting topoisomerase I (27). PMC was effective in several in vitro cancer cell lines regardless of driver gene mutations (Figure 2 and Table I), suggesting that the direct PMC target(s) is not associated with hub genes that are canonically associated with mtKRAS-related signals. Moreover, PMC was effective in cell lines with wt KRAS and low KRAS dependency (KRAS gene effect >-0.5) (Table I).

Furthermore, PMC was similarly effective toward parental and drug-resistant cells, suggesting the PMC target(s) was not involved in drug-resistance mechanisms (Figure 2C). PMC was also effective in vivo with low toxicity (Figure 3), suggesting that PMC was different for canonical anticancer drugs targeting cell proliferation with cytotoxicity. The identification of PMC targets will be crucial for the identification of the Achilles' heel of cancers. We are currently performing pull-down assays to determine PMC targets.

## Conflicts of Interest

The Authors declare no conflicts of interest in relation to this study.

## Authors' Contributions

K.Y., Kensuke N, and T.T. performed experiments, analyzed the data, and wrote the first manuscript draft. S.I., Kazuhiko N., R.Y., and M.S. participated in study design, data collection, and analysis. T.O. and S.S. conceived the idea, designed the study, interpreted the data, provided important intellectual content, and obtained final approval for manuscript submission.

## Acknowledgements

The Authors thank Yuriko Isoyama and Yumiko Hirose for technical assistance. This work was supported by Grant-in-Aid for Scientific Research (C) (KAKENHI, Grant Number 15K06847, 18K07215, 21 K 07161 , 22 K 07221 ) from the Ministry of Education, Culture, Sports, Science, and Technology (MEXT) of Japan and the Fukuoka Foundation for Sound Health Cancer Research Fund.

## References

1 Colicelli J: Human RAS superfamily proteins and related GTPases. Sci STKE 2004(250): RE13, 2004. PMID: 15367757. DOI: 10.1126/stke.2502004re13
2 Kerk SA, Papagiannakopoulos T, Shah YM and Lyssiotis CA: Metabolic networks in mutant KRAS-driven tumours: tissue specificities and the microenvironment. Nat Rev Cancer 21(8): 510-525, 2021. PMID: 34244683. DOI: 10.1038/s41568-021-00375-9
3 Moore AR, Rosenberg SC, McCormick F and Malek S: RAStargeted therapies: is the undruggable drugged? Nat Rev Drug Discov 19(8): 533-552, 2020. PMID: 32528145. DOI: 10.1038/ s41573-020-0068-6
4 Biankin AV, Waddell N, Kassahn KS, Gingras MC, Muthuswamy LB, Johns AL, Miller DK, Wilson PJ, Patch AM, Wu J, Chang DK, Cowley MJ, Gardiner BB, Song S, Harliwong I, Idrisoglu S, Nourse C, Nourbakhsh E, Manning S, Wani S, Gongora M, Pajic M, Scarlett CJ, Gill AJ, Pinho AV, Rooman I, Anderson M, Holmes O, Leonard C, Taylor D, Wood S, Xu Q, Nones K, Fink JL, Christ A, Bruxner T, Cloonan N, Kolle G, Newell F, Pinese M, Mead RS, Humphris JL, Kaplan W, Jones MD, Colvin EK, Nagrial AM, Humphrey ES, Chou A, Chin VT, Chantrill LA, Mawson A, Samra JS, Kench JG, Lovell JA, Daly RJ, Merrett ND, Toon C, Epari K, Nguyen NQ, Barbour A, Zeps N, Australian Pancreatic Cancer Genome Initiative, Kakkar N, Zhao F, Wu YQ, Wang M, Muzny DM, Fisher WE, Brunicardi FC, Hodges SE, Reid JG, Drummond J, Chang K, Han Y, Lewis LR, Dinh H, Buhay CJ, Beck T, Timms L, Sam M, Begley K, Brown A, Pai D, Panchal A, Buchner N, De Borja R, Denroche RE, Yung CK, Serra S, Onetto N, Mukhopadhyay D, Tsao MS, Shaw PA, Petersen GM, Gallinger S, Hruban RH, Maitra A, IacobuzioDonahue CA, Schulick RD, Wolfgang CL, Morgan RA, Lawlor RT, Capelli P, Corbo V, Scardoni M, Tortora G, Tempero MA, Mann KM, Jenkins NA, Perez-Mancera PA, Adams DJ, Largaespada DA, Wessels LF, Rust AG, Stein LD, Tuveson DA, Copeland NG, Musgrove EA, Scarpa A, Eshleman JR, Hudson

TJ, Sutherland RL, Wheeler DA, Pearson JV, McPherson JD, Gibbs RA and Grimmond SM: Pancreatic cancer genomes reveal aberrations in axon guidance pathway genes. Nature 491(7424): 399-405, 2012. PMID: 23103869. DOI: 10.1038/nature11547
5 Neumann J, Zeindl-Eberhart E, Kirchner T and Jung A: Frequency and type of KRAS mutations in routine diagnostic analysis of metastatic colorectal cancer. Pathol Res Pract 205(12): 858-862, 2009. PMID: 19679400. DOI: 10.1016/j.prp.2009.07.010

6 Cancer Genome Atlas Research Network: Comprehensive molecular profiling of lung adenocarcinoma. Nature 511(7511): 543-550, 2014. PMID: 25079552. DOI: 10.1038/nature13385
7 Canon J, Rex K, Saiki AY, Mohr C, Cooke K, Bagal D, Gaida K, Holt T, Knutson CG, Koppada N, Lanman BA, Werner J, Rapaport AS, San Miguel T, Ortiz R, Osgood T, Sun JR, Zhu X, McCarter JD, Volak LP, Houk BE, Fakih MG, O'Neil BH, Price TJ, Falchook GS, Desai J, Kuo J, Govindan R, Hong DS, Ouyang W, Henary H, Arvedson T, Cee VJ and Lipford JR: The clinical KRAS(G12C) inhibitor AMG 510 drives anti-tumour immunity. Nature 575(7781): 217-223, 2019. PMID: 31666701. DOI: 10.1038/s41586-019-1694-1
8 Biernacka A, Tsongalis PD, Peterson JD, de Abreu FB, Black CC, Gutmann EJ, Liu X, Tafe LJ, Amos CI and Tsongalis GJ: The potential utility of re-mining results of somatic mutation testing: KRAS status in lung adenocarcinoma. Cancer Genet 209(5): 195-198, 2016. PMID: 27068338. DOI: 10.1016/ j.cancergen.2016.03.001

9 Stephen AG, Esposito D, Bagni RK and McCormick F: Dragging ras back in the ring. Cancer Cell 25(3): 272-281, 2014. PMID: 24651010. DOI: 10.1016/j.ccr.2014.02.017
10 Jones RP, Sutton PA, Evans JP, Clifford R, McAvoy A, Lewis J, Rousseau A, Mountford R, McWhirter D and Malik HZ: Specific mutations in KRAS codon 12 are associated with worse overall survival in patients with advanced and recurrent colorectal cancer. Br J Cancer 116(7): 923-929, 2017. PMID: 28208157. DOI: 10.1038/bjc. 2017.37

11 Wiesweg M, Kasper S, Worm K, Herold T, Reis H, Sara L, Metzenmacher M , Abendroth A , Darwiche K , Aigner C , Wedemeyer HH, Helfritz FA, Stuschke M, Schumacher B, Markus P, Paul A, Rahmann S, Schmid KW and Schuler M: Impact of RAS mutation subtype on clinical outcome-a crossentity comparison of patients with advanced non-small cell lung cancer and colorectal cancer. Oncogene 38(16): 2953-2966, 2019. PMID: 30568222. DOI: 10.1038/s41388-018-0634-0

12 Zhou L, Baba Y, Kitano Y, Miyake K, Zhang X, Yamamura K, Kosumi K, Kaida T, Arima K, Taki K, Higashi T, Imai K, Hashimoto D, Yamashita Y, Chikamoto A, Beppu T, Tan X and Baba H: KRAS, BRAF, and PIK3CA mutations, and patient prognosis in 126 pancreatic cancers: pyrosequencing technology and literature review. Med Oncol 33(4): 32, 2016. PMID: 26927447. DOI: 10.1007/s12032-016-0745-9

13 Huang M, Lu JJ and Ding J: Natural products in cancer therapy: Past, present and future. Nat Prod Bioprospect 11(1): 5-13, 2021. PMID: 33389713. DOI: 10.1007/s13659-020-00293-7
14 Tsunoda T, Ishikura S, Doi K, Iwaihara Y, Hidesima H, Luo H, Hirose Y and Shirasawa S: Establishment of a three-dimensional floating cell culture system for screening drugs targeting KRASmediated signaling molecules. Anticancer Res 35(8): 4453-4459, 2015. PMID: 26168486.

15 Luo H, Nishi K, Ishikura S, Swain A, Morishige N, Yazaki R, Ohshima T, Shirasawa S and Tsunoda T: Growth suppression of
human colorectal cancer cells with mutated KRAS by 3-Deazacytarabine in 3D floating culture. Anticancer Res 38(7): 42474256, 2018. PMID: 29970558. DOI: 10.21873/anticanres. 12721
16 Hashimoto S, Nagai M, Nishi K, Ishikura S, Nakabayashi K, Yazaki R, Ohshima T, Suenaga M, Shirasawa S and Tsunoda T: Growth suppression of cancer spheroids with mutated KRAS by low-toxicity compounds from natural products. Anticancer Res 41(8): 4061-4070, 2021. PMID: 34281875. DOI: 10.21873/ anticanres. 15207
17 Nishi K, Luo H, Ishikura S, Doi K, Iwaihara Y, Wills L, Baillie GS, Sakata T, Shirasawa S and Tsunoda T: Apremilast induces apoptosis of human colorectal cancer cells with mutant $K R A S$. Anticancer Res 37(7): 3833-3839, 2017. PMID: 28668883. DOI: 10.21873/anticanres. 11762

18 Nishi K, Tsunoda T, Uchida Y, Sueta T, Sawatsubashi M, Yamano T, Hashiguchi Y, Swain A, Shirasawa S and Sakata T: MK615 suppresses hypoxia tolerance by up-regulation of Ecadherin in colorectal cancer cells with mutant KRAS. Anticancer Res 40(8): 4687-4694, 2020. PMID: 32727793. DOI: 10.21873/anticanres. 14468

19 Okamoto H, Matsukawa T, Doi S, Tsunoda T, Sawata Y, Naemura M, Ohnuki K, Shirasawa S and Kotake Y: A novel resveratrol derivative selectively inhibits the proliferation of colorectal cancer cells with KRAS mutation. Mol Cell Biochem 442(1-2): 39-45, 2018. PMID: 28936721. DOI: 10.1007/s11010-017-3191-x
20 Levandowsky M and Winter D: Distance between Sets. Nature 234(5323): 34-35, 2021. DOI: 10.1038/234034a0
21 Shirasawa S, Furuse M, Yokoyama N and Sasazuki T: Altered growth of human colon cancer cell lines disrupted at activated Ki-ras. Science 260(5104): 85-88, 1993. PMID: 8465203. DOI: 10.1126/science. 8465203

22 Shiota M, Tsunoda T, Song Y, Yokomizo A, Tada Y, Oda Y and Naito S: Enhanced S100 calcium-binding protein P expression sensitizes human bladder cancer cells to cisplatin. BJU Int 107(7): 1148-1153, 2011. PMID: 20726978. DOI: 10.1111/ j.1464-410X.2010.09535.x

23 Luo H, Umebayashi M, Doi K, Morisaki T, Shirasawa S and Tsunoda T : Resveratrol overcomes cellular resistance to vemurafenib through dephosphorylation of AKT in BRAFmutated melanoma cells. Anticancer Res 36(7): 3585-3589, 2016. PMID: 27354627.

24 Tsherniak A, Vazquez F, Montgomery PG, Weir BA, Kryukov G, Cowley GS, Gill S, Harrington WF, Pantel S, Krill-Burger JM, Meyers RM, Ali L, Goodale A, Lee Y, Jiang G, Hsiao J, Gerath WFJ, Howell S, Merkel E, Ghandi M, Garraway LA, Root DE, Golub TR, Boehm JS and Hahn WC: Defining a cancer dependency map. Cell 170(3): 564-576.e16, 2017. PMID: 28753430. DOI: 10.1016/j.cell.2017.06.010

25 Ruan S, Jia F and Li J: Potential antitumor effect of harmine in the treatment of thyroid cancer. Evid Based Complement Alternat Med 2017: 9402615, 2017. PMID: 28270853. DOI: 10.1155/2017/9402615

26 Wu LW, Zhang JK, Rao M, Zhang ZY, Zhu HJ and Zhang C: Harmine suppresses the proliferation of pancreatic cancer cells and sensitizes pancreatic cancer to gemcitabine treatment. Onco Targets Ther 12: 4585-4593, 2019. PMID: 31354292. DOI: 10.2147/OTT.S205097

27 Kamal A, Srinivasulu V, Nayak VL, Sathish M, Shankaraiah N, Bagul C, Reddy NV, Rangaraj N and Nagesh N: Design and synthesis of C3-pyrazole/chalcone-linked beta-carboline hybrids: antitopoisomerase I, DNA-interactive, and apoptosis-inducing anticancer agents. ChemMedChem 9(9): 2084-2098, 2014. PMID: 24470122. DOI: 10.1002/cmdc. 201300406

Received May 20, 2022
Revised June 6, 2022
Accepted June 7, 2022


[^0]:    Correspondence to: Toshiyuki Tsunoda, MD, Ph.D., Department of Cell Biology, Faculty of Medicine Fukuoka University, 7-45-1 Nanakuma, Jonan-ku, Fukuoka 814-0180, Japan. Tel: +81 928011011, Fax: +81 928643865, e-mail: tsunoda@fukuoka-u.ac.jp

