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# A NEW INSIGHT OF GSK3B REGULATION: IMPLICATIONS IN CANCER THERAPY

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#### Abstract

Glycogen synthase kinase (GSK)-3 has emerged as one of the most attractive therapeutic targets for the treatment of multiple neurological diseases, including Alzheimer's, stroke and bipolar disorders, as well as noninsulin-dependent diabetes mellitus and inflammation. Recent studies have revealed that GSK3ß is a key regulator of numerous signaling pathways and is involved in a wide range of cellular processes, ranging from glycogen metabolism to cell cycle regulation, proliferation and tumorigenesis. The prominent role of GSK3 $\beta$  in the adenomatous polyposis coli (APC)-\beta-catenin destruction complex indicates that inhibition of GSK3ß could possibly lead to tumor promotion through the activation of β-catenin. Inhibition of PI3K/AKT pathway activates GSK3β leading to G1 cell cycle arrest and apoptosis in human colon carcinoma HT29 cells. Also, GSK3ß is a critical regulator of nuclear factor NF-kB nuclear activity, suggesting that inhibition of GSK3ß could be effective in the treatment of a wide variety of tumors with constitutively active NF-κB. However, GSK3β also mediates drug sensitivity/resistance in cancer chemotherapy. Several other recent studies have shown the activity of GSK3ß in cancer that provides new insight of the molecular mechanisms, through which it regulates tumor cell proliferation and survival of multiple human malignancies. This review addresses the molecular mechanism of its regulation through different signaling pathways.

### Introduction

Glycogen synthase kinase  $3\beta$  (GSK $3\beta$ ) is a serine/threonine kinase. Initially it was identified as a critical mediator in glycogen metabolism and insulin signaling. It is now known that GSK $3\beta$  is a multifunctional kinase; it regulates more than 40 proteins depending on the cellular pathway and according to the need of cellular metabolism, including transcription factors, cell cycle/survival regulators and oncogenic/protooncogenic proteins (Doble *et al.*, 2003; Jope *et al.*, 2004). There are two mammalian GSK3 isoforms GSK $3\alpha$  and GSK $3\beta$  encoded by distinct genes which share 85% identity

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(Doble *et al.*, 2003). The two genes map to human chromosomes 19q13.2 (GSK3 $\alpha$ ) and 3q13.3 (GSK3β). Despite a high degree of similarity and sequence overlap, these isoforms are not functionally identical and redundant. The signaling pathway and protein function of GSK3 $\beta$  are extensively investigated (Plytes *et al.*, 1992). Due to its diverse cellular functions, GSK3β acts as a key regulator of many pathways. Its deregulation has been implicated in the development of a number of human diseases such as diabetes, cardiovascular disease, some neurodegenerative diseases and bipolar disorder (Doble et al., 2003; Grimes et al., 2001; Beurel et al., 2006). However, the deregulation of GSK3β has also been implicated in tumorigenesis and cancer progression (Billadeau et al., 2007; Manoukian et al., 2002; Ougolkov et al., 2006; Seldin et al., 2005). Unlike most protein kinases, GSK3ß is constitutively active in resting cells and undergoes a rapid and transient inhibition in response to a number of external signals (Doble et al., 2003; Grimes et al., 2001) and its activity is regulated by site-specific phosphorylation. The phosphorylation at tyrosine (Tyr-216) activated GSK3β and conversely, phosphorylation at serine (Ser-9) inhibits its activity. GSK3ß is subjected to multiple regulatory mechanisms and phosphorylation at Ser-9 is probably the most important regulatory mechanism. Additionally, GSK3ß regulates many proto-oncogenes or tumor suppressing transcription and translation factors. Tumor suppressor transcription factor p53 is a target of GSK3β and it regulates the level as well as intracellular localization of p53 (Beurel et al., 2006) and forms a complex with nuclear p53 to promote p53-induced apoptosis. GSK3ß directly modulates the activity of transcription factors, activator protein 1 (AP-1) and nuclear factor-kB (NF-kB) (Grimes et al., 2001; Manoukian et al., 2002; Ougolkov et al., 2006). Both of these transcription factors play a critical role in neoplastic transformation and tumor development. However, the underlying mechanism(s) of GSK3ß regulation in neoplastic transformation and tumor development are unclear. It remains controversial whether GSK3ß is a "tumor suppressor" or an "oncogene". In the following sections we will discuss our current understanding about the role of GSK3 $\beta$  in cancer progression and the molecular mechanism of its regulation with an implication to targeted therapy for the cancer treatment.

# PI3K/AKT and Wnt Signaling pathway mediated regulation of GSK3β in carcinogenesis

The PI3K/AKT pathway is involved in GSK3 $\beta$  inactivation in many cell types (Ougolkov *et al.*, 2006). Moreover, the phosphatidylinositol 3-kinase (PI3K)/AKT signaling pathway is a crucial regulator of many normal cellular processes such as cell growth, proliferation, motility, survival and apoptosis. It is deregulated in a wide range of human cancers by gain or loss of function of several components of this pathway including PIK3CA, AKT and PTEN (Cully *et al.*, 2006; Vogelstein *et al.*, 2004; Vivanco *et al.*, 2002). In response to various growth factors, PI3K phosphorylates and activates protein kinase B (PKB)/AKT. AKT1 is activated through phosphorylation at Ser-473 and Thr-308, which in turn phosphorylates GSK3 $\beta$  at serine residues in the N-terminus (Ser-9 and Ser-21) and inhibiting the GSK3 $\beta$  activity (Cros *et al.*, 1995). Several studies have demonstrated the role of GSK3 $\beta$  in cell proliferation and apoptosis induction (Ougolkov *et al.*, 2006).

In addition to PI3K/AKT signaling dependent regulation of GSK3 $\beta$ , it has also been seen that GSK3 $\beta$  is involved in the regulation of  $\beta$ -catenin signaling. It participates in the formation of a multi-component destruction complex that promotes the phosphorylation at regulatory domain of  $\beta$ -catenin and subsequent degradation of  $\beta$ -catenin suggesting an important role in regulating cell proliferation during progression in prostate cancer (Mulholland *et al.*, 2006). Over activation of  $\beta$ -catenin signaling is involved in many forms of human cancer. This classical mode of GSK3 $\beta$  action should qualify it as a "tumor suppressor" since GSK3 $\beta$  is a critical, negative regulator both of PI3K and Wnt cell signaling (Ding *et al.*, 2000). However, two recent studies have implicated that GSK3 $\beta$  may play a pro-tumor role in pancreatic and colorectal cancers (Ougolkov *et al.*, 2005; Shakoori *et al.*, 2005). The ovarian tumors often exhibit increased expression of GSK3 $\beta$ , indicating the critical role of GSK3 $\beta$  in ovarian cancer cells (Cao *et al.*, 2006).

GSK3 $\beta$  has strikingly different behavior than other protein kinases and has a high basal activity within the cell, through insulin mediated pathway and Wnt stimulation lead to a decrease in its kinase activity. This allows unphosphorylated  $\beta$ -catenin to accumulate in the cytoplasm and nucleus. By binding to TCF family transcription factors, nuclear  $\beta$ -catenin regulates transcription of target genes such as c-myc and cyclin D1. Mutations that perturb the function of the Axin-APC complex, such as truncation of APC or deletion of the GSK3 $\beta$  interacting sites of  $\beta$ -catenin, are present in 90% of colon cancers (Polakis *et al.*, 2000). Sequestration of GSK3 $\beta$  within the axin complex does not appear to be sufficient to prevent cross-talk with components of the insulin pathway. AKT/PKB phosphorylation, however, does not elicit the Wnt response (Ding *et al.*, 2000) since the effects of insulin and Wnt are different, even in cells responsive to both signals. So how GSK3 $\beta$  is regulated and how is cross-talk between the Wnt and insulin pathways prevented?

# GSK3 β is involved in the regulation of cell cycle and apoptosis

GSK3ß regulates variety of genes that participate in cell cycle regulation and apoptosis. Moreover, GSK3ß is also phosphorylated at Ser-9 by activated AKT1, in response to various cellular growth factors observed in multiple cancers. The stability of cyclin D1 is regulated by GSK3<sup>β</sup> which phosphorylates cyclin D1 at Thr286, triggring the ubiquitination and proteolytic degradation of cyclin D1 by the ubiquitin-proteasome system (Matsushime et al., 1994). Cyclin D1 plays a critical role in G1 progression via phosphorylation of retinoblastoma (Rb), which regulates the transcription of the genes required for G1/S transition (Alao et al., 2006). It has also been found that an anticancer alkaloid (Tetrandrine) treated HT-29 a human cancer cells showed down-regulation of AKT and up-regulation of GSK3β, indicating that tetrandrine led to inhibition of AKT and activation of GSK3 $\beta$  and up-regulation of p27<sup>kip1</sup>. Also, increased phosphorylation of cyclin D1 (Thr286) catalyzed by GSK3ß after tetrandrine treatment results in its degradation. Additionally, tetrandrine activates caspase 3, and PARP cleavage to its characteristic 85 kDa fragment, suggesting that tetrandrine induced apoptosis (Chen et al., 2008). This indicates that GSK3 $\beta$  activation via inhibiton of AKT was involved in tetrandrine-mediated of G1 arrest and apoptosis regulatory proteins.

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GSK3β is a cytosolic protein which is translocated into the nucleus when activated and acts as transcription factors (Cohen *et al.*, 2001; Harwood *et al.*, 2001). In HT-29 a human cancer cells, the level of  $p27^{kip1}$  a cell cycle regulatory protein, was significantly increased after tetrandrine treatment in a concentration-dependent manner (Chen *et al.*, 2008). A similar increase in  $p27^{kip1}$  protein was observed following treatment with PI3K/AKT inhibitor wortamannin and LY294002. Conversely, GSK3β inhibitors LiCl and SB216763 blocked up-regulation of  $p27^{kip1}$ . These results suggest that GSK3β activation via AKT inhibition plays a crucial role in G1 arrest and apoptosis, which is consistent with previous studies that AKT inhibition and GSK3β activation promote G1 arrest and apoptosis in cancer cells (Arico *et al.*, 2002; Krystal *et al.*, 2002; Ha *et al.*, 2007). However, a specific GSK3β inhibitor (LY2119301) promotes a genotoxic agent adriamycin-induced apoptosis in human colorectal cancer cells (HCT116) in a p53-dependent manner (Tan *et al.*, 2005).

## The role of GSK3β in cancer initiation and progression

Since GSK3 $\beta$  negatively regulates many proto-oncoproteins and cell cycle regulators, one would predict that GSK3β may suppress carcinogenesis. Several lines of evidence support that GSK3<sup>β</sup> functions as a "tumor suppressor" and represses cellular neoplastic transformation and tumor development. In contrast to its tumor suppressive role, a few studies also suggest that GSK3B may promote carcinogenesis and cancer progression. GSK3 $\beta$  protein over expression has been found in human ovarian, colon and pancreatic carcinomas (Ougolkov *et al.*, 2006). Higher levels of GSK3 $\beta$  are also observed in liver tumors than in normal liver tissues in a mouse model of hepatic carcinogenesis (Gotoh et al., 2003). Consistent with its high expression in ovarian tumors, GSK3 $\beta$  is reported to positively regulate the proliferation and survival of human ovarian cancer cells both in vitro and in vivo (Cao *et al.*, 2006). GSK3 $\beta$  also inhibits  $\beta$ -catenin by sequestration and promotion of  $\beta$ -catenin degradation. In contrast, the GSK3 $\beta$  inactivation (pGSK-3 $\beta$ ) through the Wnt pathway allows  $\beta$ -catenin to accumulate within the nucleus, thus upregulating cyclin D1 as well as other genes including c-myc, c-Jun, and fos (Diehl et al., 1998). Cyclin D1 as a proto-oncogene can facilitate cell cycle progression and proliferation of thyrocytes but may also modulate several different transcription factors during neoplastic transformation (Diehl et al., 2002). However, the Cyclin D1 regulation in the cell cycle is mediated through GSK3 $\beta$  signaling protein via phosphatidylinositol-3kinase/Akt (PI3K/Akt) and the Wnt canonical pathways (Jung at al., 2010; Diehl et al., 1998; Takahashi-Yanaga et al., 2008).

GSK3β is a direct regulator of AP-1. AP-1 is a hetero-dimeric transcription factor complex composed of a jun family member and a FOS family member that binds the TRE DNA sequence (50-TGAGTCA-30). It is involved in a variety of cellular processes, including growth, survival and tumorigenesis (Eferl *et al.*, 2003). GSK3β induced c-Jun phosphorylation inhibits DNA binding activity and suppresses AP-1 activity (Grimes *et al.*, 2001). AP-1 activation is required for the transformation of epidermal cells and skin carcinogenesis (Saez *et al.*, 1995; Yong *et al.*, 1999). The GSK3β is also capable to induce the activity of nuclear factor kappa B (NF-κB), a key transcription factor for pro-inflammatory immune responses (Cohen *et al.*, 2001) and homozygous deletion of the GSK3 $\beta$  gene in mice is embryonically lethal due to extensive liver degeneration caused by a defect in NF- $\kappa$ B activity (Hoeflich *et al.*, 2000). Thus, the activity of GSK3 $\beta$ is tightly controlled primarily by phosphorylation of regulatory serine residues (Ser9 in GSK3 $\beta$ ) leading to its inhibition, but also by protein complex-formation and subcellular localization (Jope *et al.*, 2004).

# GSK3ß a target for cancer chemotherapy could open new avenue

GSK3β regulates several cellular processes including cancer progression. However, GSK3<sup>β</sup> also regulates cellular sensitivity/resistance to cancer chemotherapy. Increased expression of pGSK3 $\beta$  (Ser9) is observed in cisplatin-resistant ovarian cancer cell line (CP70) compared to its cisplatin-sensitive counterpart A2780 cells (Cai et al., 2007). High pGSK3β (Ser9) levels in CP70 cells suggest that suppressed GSK3β activity may account for their resistance to cisplatin. Inhibition of GSK3B by treatment with lithium significantly reduces cisplatin-induced apoptosis and raises the IC50 of cisplatin for ovarian cancer cells. GSK3ß reactivation by exogenous expression of S9A GSK3ß mutant or treatment with LY294002 sensitizes hepatoma cells to etoposide and camptothecin induced apoptosis (Beurel et al., 2005). It has also shown that pharmacological or siRNA mediated inhibition of GSK3β reduce NF-κB mediated gene transcription and inhibit the growth of cancers that show high NF- $\kappa$ B activity including pancreatic cancer (Ougolgov et al., 2005; 2006; 2007), since aberrant NF-kB activation has been linked to drug resistance in pancreatic cancer. Furthermore, Rapamycin is known to activate GSK3<sub>β</sub>; it enhances a chemotherapy drug paclitaxel-induced apoptosis in GSK3  $\beta$  wild-type, but not in GSK3 $\beta$  null breast cancer cells (Dong *et al.*, 2005), indicating that GSK3ß mediates rapamycin-induced chemosensitivity. A similar report indicates that GSK3ß activation sensitizes human breast cancer cells to chemo-therapy drugs, 5-fluorouracil, cisplatin, taxol or prodigiosin-induced apoptosis (Ding et al., 2007; Soto-Cerrato et al., 2007). Since, The GSK3ß regulated differential responses to chemotherapy among tumor cell types, it behaves either as tumor suppressor or "oncogene". Further investigation is required to understand the mechanisms of this differential effect, and the potential for rational combination of GSK3ß inhibitors with other targeted agents for the treatment of cancer. Moreover, Glycogen synthase kinase 3ß (GSK3B) has become one of the most attractive therapeutic targets for the cancer treatment and could open a new avenue in cancer therapy as a potential agent.

## Conclusion

GSK-3 is a constitutively active serine-threonine kinase that can phosphorylate and inactivate a broad range of substrates including glycogen synthase, cyclin D1, p27, cmyc, c-jun, and  $\beta$ -catenin. Although GSK3 $\beta$  is a distinct serine/threonine kinase present in the mammalian genome, this enzyme has attracted attention for its role in a diverse range of cellular processes and its regulation through several signaling pathways that are important in cancer and other human diseases. Recently, GSK3 $\beta$  has been viewed as a potent target in the treatment of several human cancers due to its involvement in tumor

development and chemo-resistance. The available evidence indicates that the direct pharmacological GSK3 $\beta$  inhibitors like LiCl and SB216763 and indirect PI3K/AKT inhibitor LY294002, wortamannin and siRNA mediated knockdown may provide an effective therapeutic avenue for the treatment of tumors. Although the mechanisms underlying the differential effects of GSK3 $\beta$  remains to be elucidated being a putative tumor-suppressor, before introducing any GSK3 $\beta$  based target therapy for the cancer .

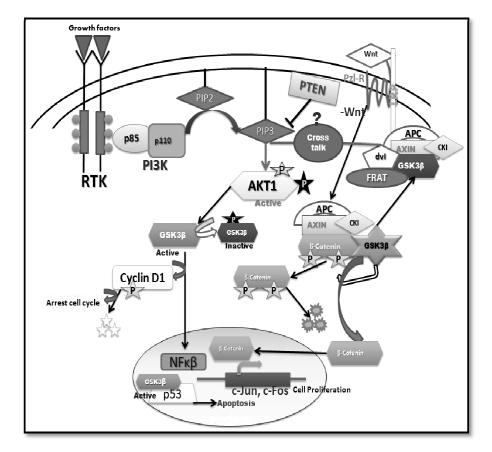
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**Figure 1:** Interactions of glycogen synthase kinase- $3\beta$  (GSK $3\beta$ ) with PI3K/AKT signaling and Wnt signaling pathway. Note the interaction of different protein complexes that interact with GSK $3\beta$  to regulate and direct its actions. The sequential activation of phosphoinositide 3-kinase (PI3K), and Akt inactivates GSK $3\beta$  by phosphorylating on Ser9. In the absence of the wnt ligand, GSK $3\beta$  is bound to axin in a complex with  $\beta$ -catenin ( $\beta$ -cat), casein kinase I (CKI) and adenomatous polyposis coli protein (APC). CKI phosphorylates  $\beta$ -catenin to prime it for phosphorylation by GSK $3\beta$ , resulting in proteosomal degradation of  $\beta$ -catenin. Stimulation of the two associated receptors, frizzled receptor (Fzl-R) and the low-density lipoprotein (LDL)-related protein 5/6 (LRP5/6) receptor by wnt results in the recruitment of FRAT (frequently arranged inT cell lymphomas) and disheveled (dvl) into the GSK $3\beta$  complex. This prevents the phosphorylation of  $\beta$ -catenin by GSK $3\beta$ , enabling  $\beta$ -catenin to accumulate and translocate to the nucleus where it is a co-transcriptional activator of T cell factor/lymphocyte-enhancer-binding factor (TCF/LEF), facilitating gene expression and promoting cell proliferation.