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# <sup>1</sup> ?-Catenin Role and Expression in Oral Squamous Cell Carcinoma

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### 6 Abstract

7 This study aimed to reveal the role and altered immunohistochemical expression of ?- catenin

 $_{\circ}$  in oral squamous cell carcinoma progression in its three histopathological differentiations.

<sup>9</sup> Immunohistochemical method was used to stain 81 biopsy taken from 81 patients and 15

 $_{10}$   $\,$  control sample from normal oral mucosa. ?-catenin was detected with homogenous strong

11 staining in 56.6

12

13 Index terms— oral squamous cell carcinoma, ?-catenin, immunohistochemical expression.

## <sup>14</sup> 1 I. Introduction

atenin present as ?-catenin (102 kDa), ?-catenin (88 kDa), and ?-catenin (80 kDa) are anchoring proteins present
in cytoplasm and verry essential in maintaining the normal functions of E-cadherin protein in the cross-linkage
action between actin filament and the intracellular membranous proteins, Na+/K+ adenosine triphosphatase
and E-cadherin [1].

?-catenin or alpha-1-catenin (also called alpha-E-catenin) binding protein, is effectively coordinating the 19 cortical actin networks of adjacent cells [2], Roles for ?cat are best understood at cell junctions, where it is essential 20 for cell cohesion and tissue organization [3][4][5]. As homodimer, ?-cat directly interacts with filamentous (F) 21 actin [6] but ?-cat can also indirectly associate with the cytoskeleton through other actin-binding proteins, such 22 as epithelial protein lostin neoplasm (EPLIN) (figure 1) [7][8], vinculin [9], afadin [10], ?-actinin [11], and zonula 23 occludens-1 (ZO-1) [12]. In addition, ?-cat can impact F-actin remodeling by directly inhibiting Arp2/3-mediated 24 25 actin polymerization in vitro [13], lamellipodial dynamics in cells [14], and by promoting Factin bundling in vitro 26 [15].

27 ?-Catenin might serve as an invasion suppressor molecule, and reduced expression of ?catenin has been related
28 to poor differentiation of tumours, infiltrative growth, and lymph node metastasis [16][17][18].

Furthermore, the disappearance of membranous ?-catenin is predictive of an unfavourable outcome in prostate, 29 ovarian, and colorectal cancer [19][20][21]. many studies have shown that ?-catenin represses the transcriptional 30 activities by segregating the YAP1/TAZ transcriptional coactivator in inactive complexes within the cytoplasm 31 [22] According to World Health Organization, carcinoma of oral cavity in males in developing countries, is the 32 sixth commonest cancer after lung, prostrate, colorectal, stomach and bladder cancer, while in females, it is 33 the tenth commonest site of cancer after breast, colorectal, lung, stomach, uterus, cervix, ovary, bladder and 34 liver [23]. More than 90% of all oral cancers are squamous cell carcinomas (SCC) [1] and this type of cancers 35 composes About 95% of oral cancers in India [24]. This malignancy constitute a major health problem in developing 36 countries, representing a leading cause of death. The survival index continues to be small (50%), as compared 37 to the progress in diagnosis and treatment of other malignant tumors [25]. 38 This study aimed to show the relation between altered expression of ?-catenin and the histopathological 39

# 40 differentiations of oral squamous cell carcinoma.

## <sup>41</sup> 2 II. Materials and Methods

42 81 Formalin-fixed, paraffin embedded representative tissue sections 3?m in thickness of 30 well Sections were 43. downwed, rehydrated in graded alcohols, and immunoctained using a standard strentavidin highin immuno

43 dewaxed, rehydrated in graded alcohols, and immunostained using a standard streptavidin-biotin immuno 44 peroxidase method. Monoclonal antibodies against ?-Catenin (RB-089-P, 1:5 dilution, Neomarkers, USA) were
 45 used.

1

#### IV. DISCUSSION 7

Normal oral epithelium was used as a positive control and sections incubated with a negative control serum 46 (Dako, Denmark) were used as negative controls. Immunostaining was evaluated according to the intensity 47

(slight/ strong) and the distribution of staining pattern (homogenous-membranous; heterogenouscytoplasmic 48 49 and/or membranous).

Immunostaining pattern was scored as follows: 0 = nostaining, +1 = heterogenous slight staining, +2 =50 homogenous strong staining with respect to the control positive tissue. The intensity and the staining pattern in 51 normal oral squamous epithelium were regarded as +2 homogenous strong staining. 52

#### 3 a) Statistical analysis 53

The chi-square test was used to assess the statistical significance of ? -Catenin expression in relation to 54 histopathological grade. 55

#### **III.** Results 4 56

#### a) Normal epethelium $\mathbf{5}$ 57

?-catenin staining was cytoplasmic with a clearly strong intensity and showed homogenous strong membranous 58 staining in basal, parabasal and intermediate layers of squamous epithelium of the normal tissues (figure ?? ). 59

#### 6 b) study sample 60

homogenous strong positivity appeared in 56.6% of the WDOSCC sections in the epithelium and the tumoral 61 islands, 40% revealed +1 and in one section we noticed that there was no staining (figure ??). MDOSCCC 62 revealed 40%(+2) immunostaining, 52%(+1) and two showed no staining (figure ??). PDOSCC had only 4 63 (15%) strong immunostaining (figure 5) (p=0.0001). Aberrant nuclear staining of ?-catenin was observed in a 64

few cells of PDOSCC. (table 1) (figure ??) 65

#### 7 **IV.** Discussion 66

Loss of cell adhesion molecules or altered expression of these molecules plays an essential role in tumor progression 67 in epithelial tissues [26]. E-cadherin and its associated cytoplasmic protein ?-catenin are of the main parts of cell 68 adhesion complex in squamous epithelial tissues [27]. 69

We investigated the expression ?-catenin in oral squamous cell carcinoma progression from the well differen-70 tiated stage to the poorly differentiated. 71

Though we revealed ?-catenin expression loss in the progression of squamous cell carcinoma, this reduced 72 expression was clearly associated with the histopathological differentiation (p < 0.05). revealed such loss of ?-73 cateninin the cases of oral squamous cell carcinomas [28,29] Unlike ?-catenin, which has a role as an oncogene 74 [30], ?-catenin is considered a potent suppressor in many tumors, and its loss or downregulation in many aggressive 75 cancers is clearly correlated with metastasis ??31, ??2]. In addition to its well-known role in cell-cell adhesion, 76 77 ?-catenin represses signaling through the Wnt, Ras, NF-kB, and Hedgehog pathways [33] which controls organs 78 sizes and cell contact inhibition by way of the Yes-associated protein YAP1. YAP1 is a potent coactivator in many signaling pathways and also interacts with ?-catenin in TBX5 complexes to regulate anti-apoptotic genes 79 in colon cancer ??34] At high cell density, phosphorylated YAP1 accumulates in the cytoplasm, where it is 80 sequestered by ?-catenin and inhibits Wnt signaling [22] . The YAP1 homolog TAZ is degraded by the APC 81 complex and is required for expression of many Wnt target genes ??35] Mechanistic studies of YAP1 function 82 in TGFb/SMAD signaling further reveal that it both stimulates transcription and promotes the exchange of 83 coactivator and corepressor complexes at target genes ??36] Thus, ?-catenin links cell adhesion signals to YAP1 84 inactivation and the inhibition of cell proliferation. 85

?-catenin may potentially control TAZ functions directly at Wnt target genes or guide it to the cytoplasm for 86 degredation by the APC complex. Because ?-catenin and APC are recruited with ?-cateninto target genes, their 87

transcriptional activities must be under control to prevent premature termination of transcription. ??37, ??8] 88



Figure 1: C







Figure 3: Figure 2 : Figure 3 : Figure 4 :



Figure 4: Figure 5 :

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One interesting possibility is that Y177 phosphorylation © 2015 Global Journals Inc. (US)

Figure 5:

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