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Activation of peroxisome proliferator-activated receptor gamma is a novel therapeutic means for giant cell tumor

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Introduction:

Peroxisome proliferator-activated receptor gamma (PPAR γ) is a ligand-activated transcription factor that belongs to the nuclear hormone receptor superfamily. PPAR γ plays a central role in the differentiation of adipocytes from precursor cells and is reported to exhibit anti-tumorigenic effects on a certain malignancy. Giant cell tumor of bone (GCTB) is a common primary benign tumor, but in some cases behaves aggressively, resulting in tumor recurrence. It is known that stromal cells of GCTB has a key role in the pathogenesis of the tumor rather than the multinucleated giant cell. However, effective therapies against GCTB have not been established to target the stromal cells. Moreover, the therapeutic effects of PPAR γ activation on GCTB have not been fully clarified.

Methods:

We established primary cell lines of GCTB stromal tumor cells from fresh GCTB specimens surgically resected from two patients. These cell lines were treated with zaltoprofen, a nonsteroidal anti-inflammatory drug possessing an ability of activation of PPAR γ , or troglitazone, a high-affinity agonist for PPAR γ , at different concentrations and then subjected to WST-1 cell proliferation and TUNEL assays. The expression of PPAR γ was assessed by immunofluorescent cytochemistry. The adipocytic differentiation of tumor cells was also examined using LipidTOX green neutral-lipid staining.

Results:

The treatment of 100 μ M or 200 μ M zaltoprofen significantly inhibited a cell proliferation of GCTB cells in a dose-dependent manner ($p < 0.001$). The apoptotic indices in TUNEL labeling were approximately 0% in control, 21.9% in 100 μ M ($p < 0.001$) and 48.1% in 200 μ M ($p < 0.001$) of zaltoprofen treatment. The labeling indices of PPAR γ -positive cells were significantly higher than those in control after 24 hour of zaltoprofen treatment. Troglitazone treatment also demonstrated an inhibition of the cellular proliferation. Moreover, zaltoprofen treatment significantly increased labeling indices of LipidTOX Green neutral-lipid staining.

Conclusions:

These findings demonstrated that zaltoprofen could induce anti-tumor effects on GCTB cells, and also promoted the differentiation into an adipocytic lineage in remained tumor cells via an activation of PPAR γ . This is the first study, to our knowledge, that activation of PPAR γ could be a novel therapeutic tool against GCTB.

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