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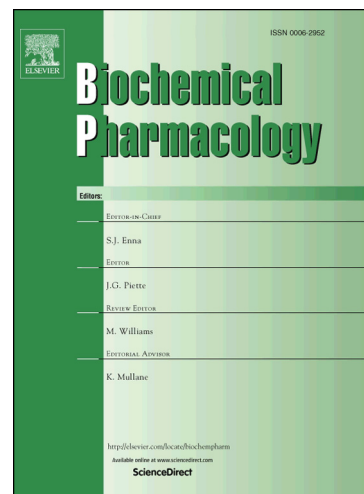
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Olean-28,13b-olide 2 plays a role in cisplatin-mediated apoptosis and reverses cisplatin resistance in human lung cancer through multiple signaling pathways

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Running title: ZHU *et al.*: ROLE OF OLO-2 IN CISPLATIN-MEDIATED APOPTOSIS AND CISPLATIN RESISTANCE IN LUNG CANCER

Abstract. Lung cancer, similar to other chronic diseases, occurs due to perturbations in multiple signaling pathways. Mono-targeted therapies are not ideal since they are not likely to be effective for the treatment and prevention of lung cancer, and are often associated with drug resistance. Therefore, the development of multi-targeted agents is required for novel lung cancer therapies. Thioredoxin reductase (TrxR or TXNRD1) is a pivotal component of the thioredoxin (Trx) system. Various types of tumor cells are able to overexpress TrxR/Trx proteins in order to maintain tumor survival, and this overexpression has been shown to be associated with clinical outcomes, including irradiation and drug resistance. Emerging evidence has indicated that oleanolic acid (OA) and its derivatives exhibit potent anticancer activity, and are able to overcome drug resistance in cancer cell lines. In the present study, it was demonstrated that a

novel synthesized OA family compound, olean-28,13b-olide 2 (OLO-2), synergistically enhanced cisplatin (CDDP)-mediated apoptosis, led to the activation of caspase-3 and the generation of reactive oxygen species (ROS), induced DNA damage, and inhibited the activation of the extracellular-signal-regulated kinase (ERK), signal transducer and activator of transcription 3 (STAT3), AKT and nuclear factor- κ B (NF- κ B) pathways in human multidrug-resistant A549/CDDP lung adenocarcinoma cells. Subsequent analyses revealed that OLO-2 inhibited P-glycoprotein (P-gp or ABCB1) and TrxR by reducing their expression at the protein and mRNA levels, and by suppressing P-gp ATPase and TrxR activities. Further biological evaluation indicated that OLO-2 significantly reduced Trx and excision repair cross-complementary1 (ERCC1) protein expression and significantly inhibited the proliferation of drug-sensitive (A549) and multidrug-resistant (A549/CDDP) non-small cell lung cancer (NSCLC) cells, but had no effect on non-tumor lung epithelial-like cells. In addition, the present study demonstrated, for the first time, to the best of our knowledge, that overexpressing or knocking down TrxR in NSCLC cells enhanced or attenuated, respectively, the resistance of NSCLC cells against CDDP, which indicated that TrxR plays an important role in CDDP resistance and functions as a protector of NSCLC against chemotherapeutic drugs. OLO-2 treatment also exhibited up to 4.6-fold selectivity against human lung adenocarcinoma cells. Taken together, the results of the present study shed light on the drug resistance-reversing effects of OLO-2 in lung cancer cells.

1. Introduction

Lung cancer is one of the leading causes of cancer-associated mortality worldwide, accounting for as many as 1.3 million deaths per year [1, 2]. Non-small cell lung cancer (NSCLC) accounts for ~85% of all cases of lung cancer [3], and lung adenocarcinoma has become the major pathological type of NSCLC [4]. Although chemotherapy is currently the standard treatment for advanced NSCLC, the majority of patients develop cross-resistance to various chemotherapeutic drugs [a phenomenon termed ‘multiple drug resistance’ or multidrug resistance (MDR)] [5]. P-glycoprotein (P-gp or ABCB1), a protein encoded by the human MDR-1 gene, is a member of the large ATP-binding cassette (ABC) family of membrane proteins [6]. P-gp, when overexpressed in cancer cells, is able to pump anticancer drugs out of the cells [7-9]; therefore, research efforts have been directed to the search of P-gp deactivators in order to ensure an improved prognosis in cancer treatment.

The mammalian thioredoxin reductases (TrxRs or TXNRD1) are a family of selenium-containing pyridine nucleotide-disulfide oxidoreductases [10]. The TrxR system plays a vital role in regulating antioxidant defense and gene transcription [11-13]. TrxR, which is considered to play an important role in carcinogenesis, is overexpressed in numerous types of human tumors, and plays a key role in regulating intracellular redox balance [14]. Over the course of the past few years, an increasing number of studies have attempted to address the role of the thioredoxin (Trx) system in the biology of human malignant tumors, and a large amount of evidence derived

from studies carried out in the laboratory and clinical setting have verified that the TrxR/Trx system is a putative target for antitumor drug development [15-17]. As expected, the expression of TrxR/Trx in various types of tumor has been demonstrated to be higher compared with that in corresponding non-cancerous tissues [18-20]. Previous studies have reported that the expression of Trx/TrxR in tumor cells is increased following treatment with chemotherapeutic drugs, including cisplatin (CDDP), and this has been demonstrated to be associated with drug resistance [21, 22]. Since TrxR is the only enzyme that is known to catalyze the reduction of oxidized Trx, it has been inferred that TrxR may serve as a protector against chemotherapeutic drugs [23]. Therefore, we hypothesized that antagonists of TrxR may contribute towards improving the efficacy of chemotherapeutic drugs, thereby preventing the development of MDR.

CDDP, a potent antitumor agent, has been widely used in numerous types of cancer chemotherapies, including ovarian, bladder, esophageal, testicular and head-and-neck cancer, small lung cancer, and NSCLC [24, 25]. It is the most active chemotherapeutic drug known against NSCLC. However, CDDP resistance often occurs in clinical therapy [26]. This resistance may arise as a consequence of multiple complications, including a reduced drug intracellular concentration, an altered intracellular drug distribution, decreased drug-target interaction, strengthened DNA-damage repair, cell-cycle deregulation, enhanced detoxification responses and an attenuated apoptotic response [27]. The human multidrug-resistant cell line,

A549/CDDP, exhibits a 5.49-fold CDDP resistance against its parental cell line, which is a potent level of CDDP resistance. This cell line may be used in studies *in vitro* for the direct assessment of the MDR phenomenon, such as in the case of the overexpression of P-gp. The inhibition of P-gp may increase the intracellular drug concentration and enhance NSCLC apoptosis.

The extracellular signal-regulated kinase (ERK), signal transducer and activator of transcription 3 (STAT3), AKT and nuclear factor (NF- κ B) pathways have been reported to be closely associated with drug resistances, including cisplatin (CDDP) resistance [28-31]. Essentially, inhibition of ERK, STAT3, AKT and NF- κ B can induce cell apoptosis and activate PARP and caspase-3 [32-35]. Importantly, activation of NF- κ B can enhance P-gp expression [36], while attenuating NF- κ B suppresses P-gp expression [37].

CDDP is the first-line chemotherapy treatment for NSCLC in clinic. By forming the DNA adducts, CDDP inhibits cancer cells viability and the DNA replication. Overexpression of excision repair cross-complementary1 (ERCC1) in tumour cells cleans this cisplatin induced DNA adducts, and brings about CDDP resistance. Therefore, targeting ERCC1 can reverse CDDP resistance in NSCLC cells [38].

Oleanolic acid (OA) is a well-known natural triterpenoid that has numerous pharmacological functions in anti-inflammatory, antiviral, anti-microbial and

anti-parasitic processes, and so forth [27, 39]. The OA derivatives, 2-cyano-3,12-dioxoolean-1,9-dien-28-oic acid (CDDO) and CDDO-Me (its methylated derivative), have been shown to exhibit potent anticancer activities [40-42]. Previous studies have demonstrated that several OA derivatives target MDR by suppressing ABCB1 expression, whereas OA itself inhibits multidrug resistance protein (MRP1 or ABCC1) instead of ABCB1 [43]. In our previous study, we obtained a novel synthesized OA family compound, olean-28,13b-olide 2 (OLO-2), and demonstrated that it exhibits selective cytotoxic activity by inducing the apoptosis of human hepatocellular carcinoma cell lines, but not that of normal human hepatic cells in vitro [44]. The present study aimed to investigate the multiple pharmacological activities of OLO-2 in multidrug-resistant NSCLC cells.

2. Materials and methods

2.1. Reagents and chemicals

OLO-2 (purity, >99%) was first designed and synthesized by the authors of the present study [45]. The molecular structure is illustrated in Fig. 1A. OLO-2 and CDDO-ME were synthesized in our laboratory, dissolved in DMSO at a concentration of 10 mM, and stored at -20°C until further use. The stock solution was diluted to the appropriate concentration in culture medium containing serum immediately prior to addition to the cell cultures.

All antibodies were purchased from Abcam (Cambridge, UK), Cell Signaling Technology, Inc. (Danvers, MA, USA) and ProteinTech Group, Inc. (Chicago, IL,

USA). Cisplatin was purchased from QiLu Pharmaceuticcal (Jinan, China). Rhodamine 123, N-acetyl-L-cysteine-antioxygen (NAC), thiazolyl blue tetrazolium bromide (MTT) and dimethylsulfoxide (DMSO) were purchased from Sigma-Aldrich (Darmstadt, Germany). A Pgp-Glo™ Assay system was purchased from Promega Corp. (Madison, WI, USA). RPMI-1640 medium and fetal bovine serum (FBS) were from Gibco (now a brand of Thermo Fisher Scientific, Inc, Waltham, MA, USA). The reagents RTA 408, S3I 201, U0126, zVAD-fmk, LY 294002, glutathione (GSH), doxorubicin, vincristine and paclitaxel were all purchased from Selleck Corporation (Houston, TX, USA).

2.2. Cell culture

The human lung adenocarcinoma cell lines, A549, SPC-A-1 and LTEP-a-2, the multidrug resistant human lung adenocarcinoma cell line, A549/CDDP, and the human bronchial epithelial cell line, HBE (obtained from the Cell Biology Research Laboratory of Modern Analysis and Testing Center of Central South University, Changsha, China), were cultured in our laboratory. The cells were cultured in RPMI-1640 medium supplemented with 10% FBS, 100 U/ml penicillin, and 100 mg/ml streptomycin at 37°C under a humidified atmosphere with 5% CO₂. To maintain drug resistance, the A549/CDDP cells were cultured with 4 µg/ml CDDP, and subsequently cultured in CDDP-free RPMI 1640 medium for 2 days prior to the start of the experiments.

2.3. MTT assay.

A total of 1×10^4 cells in 200 μl of cell culture medium were seeded into each well of a 96-well plate. Following incubation in 5% CO_2 at 37°C for 24 h, the cells were treated with OLO-2, CDDO-Me CDDP and the vehicle, DMSO (0.1%, v/v) alone for 72 h. Subsequently, 20 μl of MTT (5 mg/ml in PBS) was added to each well, and the cells were incubated for a further 4 h, as previously described [46]. The MTT formazan formed by viable cells was dissolved in DMSO (150 μl), and the absorbance at 570 nm was measured using a microplate reader (PerkinElmer VICTOR X3, USA).

2.4. Analysis of cell apoptosis

An Annexin V-Fluorescein Isothiocyanate (FITC) Apoptosis Detection kit (BD Biosciences, Franklin Lakes, NJ, USA) was used for the analysis of cell apoptosis. A total of 1×10^5 A549/CDDP cells were seeded into each well of a 6-well plate and treated with the vehicle, DMSO (0.1%, v/v) alone, or with OLO-2 or CDDO-ME for 48 h. The cells were then collected and resuspended in 100 μl 1X binding buffer. Aliquots of 5 μl annexin V and propidium iodide (PI) were subsequently added to the buffer, according to the manufacturer's instructions. Finally, the cells were analyzed by flow cytometry using a BD FACSCanto™ cell analyzer (BD Biosciences), as previously described [47].

2.5. Western blot analysis

The total cellular proteins from the A549/CDDP or A549 cells exposed to OLO-2, CDDO-ME and the vehicle, DMSO (0.1%, v/v) alone were extracted and quantified

using a bicinchoninic acid (BCA) kit (Thermo Fisher Scientific, Inc., Waltham, MA, USA), according to the manufacturer's instructions. The protein samples (20 μ g) extracted from the A549/CDDP or A549 cells were resolved by electrophoresis on 10, 12 or 15% polyacrylamide gels, and electro-transferred onto nitrocellulose membranes. After blocking with 5% non-fat dry milk in PBS containing 0.01% Tween-20 (T-PBS), the membranes were blotted with antibodies against extracellular-signal-regulated kinase (ERK) (16443-1-AP, Proteintech), phosphorylated (p)-ERK (#4370, Cell Signaling Technology), nuclear factor- κ B (NF- κ B) (10745-1-AP, Proteintech), p-NF- κ B (#3033, Cell Signaling Technology), signal transducer and activator of transcription 3 (STAT3) (60199-1-Ig, Proteintech), p-STAT3 (#9134, Cell Signaling Technology), AKT (10176-2-AP, Proteintech), p-AKT (#4060, Cell Signaling Technology), H2A.X (ab11175, Abcam), Ser15-p53 (#9286, Cell Signaling Technology), Ser20-p53 (#9287, Cell Signaling Technology), TrxR (#6925, Cell Signaling Technology) , caspase-3 (#9662, Cell Signaling Technology), c-caspase-3 (#9661, Cell Signaling Technology), PARP (13371-1-AP, Proteintech), c-PARP (SAB4500488, Sigma-Aldrich), alpha-tubulin (T6074, Sigma-Aldrich), β -actin (7D2C10, Proteintech), ERCC1 (66275-1-Ig, Proteintech) and P-gp (#13342, Cell Signaling Technology), respectively. The blots were washed in T-PBS 3 times. Subsequently, they were developed with horseradish peroxidase (HRP)-labeled anti-rabbit immunoglobulin (Ig)G or anti-mouse IgG secondary antibodies for 45 min at room temperature. After washing 3 times in T-PBS, signals were detected using an enhanced chemiluminescence system (EMD Millipore,

Billerica, MA, USA). The images were captured with the Bio-Rad Imaging System, as previously described [48].

2.6. Measurement of *P-gp* and *TrxR* mRNA expression

Following treatment with 1.25 μ M, 2.5 μ M and 5 μ M OLO-2, 5 μ M CDDO-ME or the vehicle, DMSO (0.1%, v/v) alone for 48 h, the A549/CDDP cells (1×10^5) were digested in TRIzol[®] reagent (Invitrogen/Thermo Fisher Scientific, Inc., Waltham, MA, USA), and total RNA was extracted according to the manufacturer's instructions and as previously described [49].

A sample (1 μ g) of RNA was then reverse transcribed by oligo-dT primer using a RevertAid First Strand cDNA Synthesis kit (Thermo Fisher Scientific, Inc., Waltham, MA, USA) following the manufacturer's instructions and as previously described [50].

Aliquots of 1 μ l cDNA were used as the template for polymerase chain reaction (PCR)

using the following primers: ABCB1 forward,

5'-CCTTCAGGGTTTCACATTTGGC-3'; ABCB1 reverse,

5'-ATCATTGGCGAGCCTGGTAG-3'; TXNRD1 forward, 5'-

GCAGACGAAAGGCAAGAACG-3'; TXNRD1 reverse, 5'-

TCTTTACCTCAGTACAGCGTGTG-3'; GAPDH forward,

5'-GATGACATCAAGAAGGTGGTGA-3'; and GAPDH reverse,

5'-GTCTACATGGCAACTGTGAGGA-3'. The PCR conditions used were 34 cycles

of denaturation (94° C, 1 min), annealing (60°C, 30 sec) and polymerization (72°C, 1

min). The standard curves were generated, and data analyses were performed using

Bio-Rad iQ5 software (Bio-Rad). The relative ABCB1 and TXNRD1 mRNA levels treated with OLO-2 were expressed as fold changes of the control (in the presence of 0.1% DMSO).

2.7. Measurement of TrxR activity by cell-free and cellular assays.

TrxR (0.5 μM) and nicotinamide-adenine dinucleotide phosphate (NADPH; 100 μM) were mixed together in TE buffer in 96-well plates, and incubated at room temperature for 5 min. Subsequently, a series concentrations (0.3125, 0.625, 1.25, 2.5, 5 and 10 μM) of OLO-2, CDDO-ME, or DMSO (0.1%, v/v) alone were added, and the mixtures were incubated in quadruplicate at room temperature for 2 h in a final mixture volume of 80 μl . To measure the TrxR activity, 60 μl of the mixture was withdrawn by plus guns and added to a cuvette containing 25 μl 4 mM NADPH and 2 mM 5,5'-dithiobis(2-nitrobenzoic acid) (DTNB). The absorbance at 412 nm was measured with a spectrophotometer (PERSEE, T6, Beijing, China) at 1 min after initially mixing with a blank reference.

The Thioredoxin Reductase Assay kit (Cayman Chemical Co., Ann Arbor, MI, USA) was used to measure the inhibition of TrxR activity by OLO-2, CDDO-ME, or DMSO (0.1%, v/v) alone in the A549 and A549/CDDP cells. In brief, the cells were cultured in the presence of 1.25, 2.5, 5, 10, 25 and 50 μM OLO-2 or CDDO-ME, or DMSO (0.1%, v/v) alone for 24 h. Subsequently, the cells were lysed in RIPA buffer (Beyotime Institute of Biotechnology, China) in the presence of protease inhibitor (Thermo Fisher Scientific, Inc., Waltham, MA, USA). After quantifying the protein

concentrations, 50 μg cell protein per sample was reacted in quadruplicate with NADPH (40 mg/ml) and DTNB (10 mM) in TE buffer in 96-well plates at 37°C for 1 h. The absorbance was then measured using a microplate spectrophotometer (Berthold, LB941, Germany) at 412 nm. The inhibition rate of TrxR was calculated based on the ratio of activity difference between the control group (DMSO alone) and the experimental group.

2.8. P-gp ATPase assay

P-gp ATPase assay was performed according to the instructions for use provided by Pgp-Glo™ Assay systems (Promega Corp., Madison, WI, USA). Briefly, the individual P-gp membrane samples (250 $\mu\text{g}/\text{ml}$) were treated in quadruplicate at 37°C for 60 min with 40 μM OLO-2, 200 μM verapamil (substrate control), 200 μM Na_3VO_4 (P-gp inhibitor) or the vehicle in the presence of 5 mM MgATP. After the completion of the above-mentioned reaction, 50 μl of ATP detection reagent were added to each sample, respectively, followed by an incubation at room temperature for 20 min. The relative light units (RLUs) in individual samples were measured using a luminescent detector (Beckman Coulter, Inc., Brea, CA, USA). RLUs representing the quantity of ATP consumed by P-gp-ATPase were detected using a luminescent detector, and RLUs were obtained from the untreated samples ($\text{RLU}_{\text{untreated}}$), verapamil-treated samples (RLU_{VRP}), Na_3VO_4 -treated samples ($\text{RLU}_{\text{Na}_3\text{VO}_4}$) and OLO-2-treated samples ($\text{RLU}_{\text{OLO-2}}$) (Table III), using the following formulae:
 $\text{RLU}_{\text{Na}_3\text{VO}_4} - \text{RLU}_{\text{untreated}} = \Delta\text{RLU}_{\text{basal}}$ ($\Delta\text{RLU}_{\text{basal}}$ reflects basal P-gp-ATPase activity);

$RLU_{Na_3VO_4} - RLU_{OLO-2} = \Delta RLU_{OLO-2}$ (ΔRLU_{OLO-2} reflects P-gp-ATPase activity in the presence of OLO-2). $\Delta RLU_{OLO-2} > \Delta RLU_{basal}$ indicated that OLO-2 was a stimulator of Pgp ATPase activity; $\Delta RLU_{OLO-2} = \Delta RLU_{basal}$ indicated OLO-2 has no effect on Pgp ATPase activity; and $\Delta RLU_{OLO-2} < \Delta RLU_{basal}$ indicated that OLO-2 is an inhibitor of Pgp ATPase activity. Na_3VO_4 is an inhibitor of P-gp-ATPase, and is often used as a negative control.

2.9. Fluorescence microscopy observation of intracellular Rhodamine 123

A total of 1×10^5 A549/CDDP cells or A549 cells were seeded in each well of 6-well plates 24 h prior to the experiment. The cells were treated with various concentrations of OLO-2 (0.625, 1.25, 2.5 and 5 μ M), verapamil (5 μ M) or the vehicle DMSO (0.1%, v/v) alone for 2 h at 37°C. To assess the accumulation of Rhodamine 123, 5 μ M Rhodamine 123 was added to each cell culture, followed by incubation for 1 h in the dark at 37°C. After washing the cells 3 times with cold PBS, images were captured using a fluorescence microscope (Nikon Corp., Tokyo, Japan).

2.10. Effect of OLO-2 on the P-gp-mediated efflux of Rhodamine 123

Cell suspensions with 1×10^5 cells/ml were treated with various concentrations of OLO-2 (0, 0.625, 1.25, 2.5 and 5 μ M), verapamil (5 μ M) or the vehicle, DMSO (0.1%, v/v) alone for 2 h at 37°C. Subsequently, the cells were collected by centrifugation at 300 x g and washed twice with cold PBS. In order to assess the extent of the accumulation of Rhodamine 123, 5 μ M Rhodamine 123 were added, and the cells

were incubated for 1 h in the dark at 37°C. Finally, the cells were washed 3 times with cold PBS and resuspended in PBS buffer prior to analysis by flow cytometry using a BD FACSCanto™ cell analyzer (BD Biosciences) equipped with an excitation wavelength of 488 nm and an emission wavelength of 590 nm. The data were analyzed using Flowjo version 10 software.

2.11. OLO-2 enhances CDDP-induced A549/CDDP cell apoptosis by triggering caspase-3

To confirm the effect of caspase-3 in OLO-2 and CDDP mediated A549/CDDP cells apoptosis, 40 μM of the pan-caspase inhibitor, zVAD-fmk, was added into the medium before the treatment of 20 μM CDDP and 1 μM OLO-2. After the combined treatment for 48 h, flow cytometry and western blot were used to examine the effects.

2.12. Measurement of ROS generation

The A549/CDDP cells were incubated with the vehicle [DMSO (0.1%, v/v)] alone, 1 μM OLO-2, 20 μM CDDP, or a combination of 1 μM OLO-2 and 20 μM CDDP for 2 h. Subsequently, the cells were stained with dihydroethidium (DHE; Beyotime Institute of Biotechnology, Haimen, China), which could mark the cells as the probe of O₂⁻, a kind of primary ROS, as previously described [51, 52]. The levels of intracellular ROS were detected by measuring the fluorescence signals using a fluorescence microplate reader (absorbance, 610 nm) (PerkinElmer VICTOR X3, USA).

To determine the role of intracellular ROS in the apoptotic cell death induced by combined treatment with OLO-2 and CDDP, both *N*-acetyl-L-cysteine-antioxygen (NAC) and glutathione (GSH) ROS scavengers were used. A549/CDDP cells were pre-treated with 10 mM NAC or GSH for 2 h before the combined treatment with 1 μ M OLO-2 and 20 μ M CDDP. After 72 h combined treatments, MTT assays were used for detecting the combinations against A549/CDDP viability.

2.13. Measurement of the combination with Inhibitors of the PI3K/AKT, MEK/ERK, NF κ B and STAT3 pathways

A549/CDDP cells were respectively pre-treated with 10 μ M LY294002 (an upstream inhibitor of AKT), U0126 (an ERK inhibitor), 1 μ M RTA 408 (a specific NF- κ B inhibitor), or 60 μ M S3I 201 (a STAT3 inhibitor) for 2 h prior to the combined treatment with CDDP and OLO-2 or the vehicle, DMSO (0.1%, v/v). Cell viability was detected by MTT assay and western blot. After 48 h, the cells were detected by western blot, and Cell viability was examined by MTT assay after 72 h.

2.14. Measurement of CDDP with Inhibitors of PI3K/AKT, MEK/ERK, NF κ B and STAT3 pathways

A549/CDDP cells were pre-treated with 10, 20, 30 μ M LY294002 and U0126, respectively, or 1, 2, 3 μ M RTA 408, or 60, 120, 180 μ M S3I 201 for 2 h prior to the combined treatment with 20 μ M CDDP. After 72 h, Cell viability was detected by MTT assay.

2.15. Cell transfection

In order to silence TXNRD1, the A549/CDDP cells were transfected with non-targeting siRNA (RioboBio, China) or siRNA-TXNRD1, of which sequence is GCAAGACTCTCGAAATTAT, using Lipofectamine™ 3000 reagent (Thermo Fisher Scientific, Inc., Waltham, MA, USA). Briefly, the cancer cells (2×10^5) were plated into a 60 mm Petri dish, cultured for 24 h, and treated with 4 ml Opti-MEM™ medium containing 10 μ l Lipofectamine™ 3000 reagent and 100 nM siRNA for 48 h (51). TrxR expression was subsequently analyzed by Realtime PCR and western blot analysis.

For the overexpression of TXNRD1, the A549/CDDP cells were transfected with 10 μ g empty or TXNRD1 expression plasmid (pcDNA-3.1-TXNRD1) using Lipofectamine™ 3000 reagent. Following transfection for 48 h, the cells were examined for TrxR expression by western blot analysis.

2.16. Statistical analysis

Each experiment was repeated at least 3 times, and the data are presented as the means \pm standard deviation (SD). Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). For larger datasets involving >2 groups, one-way analysis of variance (ANOVA) with Bonferroni's multiple comparison tests was used. A value of $P \leq 0.05$ was considered to indicate a statistically significant difference.

3. Results

3.1. OLO-2 inhibits the proliferation of human lung adenocarcinoma cells *in vitro*

Four human lung adenocarcinoma cell lines were examined by MTT assay. OLO-2 significantly inhibited the proliferation of the human lung adenocarcinoma cells, and the inhibition ratio increased in a dose-dependent manner (Fig. 1B, C, D and E). At the majority of concentrations, the inhibition ratios of OLO-2 in four species of lung adenocarcinoma cells were significantly higher than the human normal bronchial epithelial cell line, HBE (Fig. 1B, C, D and E), suggesting that OLO-2 is a selective anticancer compound against human lung adenocarcinoma cells ($P < 0.01$). The IC_{50} (i.e., the concentration at which cell viability is inhibited by 50%) values of OLO-2 following 72 h of treatment of the human lung adenocarcinoma cells are presented in Table I. The IC_{50} values of OLO-2 were comparable with the IC_{50} values of the positive controls, CDDP and CDDO-Me (a C-28 methyl ester of CDDO). In addition, OLO-2 exerted a similar inhibitory effect on the A549/CDDP ($2.39 \pm 0.56 \mu\text{M}$) and A549 ($1.96 \pm 0.41 \mu\text{M}$) cells, thereby exhibiting an advantage over CDDP and CDDO-ME. These data indicate that OLO-2 may have potential for use as a treatment agent against human MDR lung adenocarcinoma cells.

3.2. OLO-2 inhibits *TrxR* mRNA and protein expression

Various types of tumor cells are able to overexpress TrxR/Trx proteins in order to

maintain tumor survival [14], and this overexpression has been shown to be associated with clinical outcomes, including irradiation [53, 54] and drug resistance [21, 22]. Inhibition of TrxR induces ROS rising[54, 55], which can lead to DNA damage [56] and cell apoptosis. Therefore, western blot and RT-PCR analyses were used to determine whether the inhibition of multidrug resistant human lung adenocarcinoma cells induced by OLO-2 was caused by effect on TrxR. First, TrxR protein expression was detected among the A549, A549/CDDP and HBE cell lines. As shown in Fig. 2A and B, both cancer cell lines exhibited a significantly higher TrxR expression compared with the normal cell line, HBE, and the A549/CDDP cells expressed ~4-fold the levels of TrxR protein compared with the A549 cells. Subsequently, treatment of the A549/CDDP cells with OLO-2 markedly decreased TrxR protein and mRNA expression (Fig. 2C-E), although CDDO-ME did not lead to a decrease in TrxR expression at either the protein or mRNA levels. As the concentration of OLO-2 increased, the levels of TrxR protein and mRNA expression decreased. And we find that Trx protein was affected by OLO-2 too (Fig. 2C). As the concentration of OLO-2 increased, the inhibition rates of TrxR protein and mRNA expression also increased. These results suggested that TrxR is indeed a target of OLO-2.

3.3. OLO-2 inhibits TrxR in both cell-free and cellular assays

The results described above demonstrated that OLO-2 could inhibit TrxR expression. For the further study, we wished to determine whether OLO-2 inhibits

TrxR activity. First, the inhibitory effects of OLO-2 and CDDO-ME on the purified TrxR enzyme were examined with a DTNB assay, which could furnish a direct measurement of TrxR activity[23, 57]. As shown in Table II, OLO-2 exhibited more marked TrxR inhibitory activity (IC_{50} , 0.95 μ M) compared with CDDO-ME (IC_{50} , 2.71 μ M). Secondly, the TrxR inhibitory activity of OLO-2 and CDDO-ME in the A549 and A549/CDDP cells was detected. In brief, the cells were treated with various concentrations of OLO-2 or CDDO-ME for 24 h, and the activity of TrxR was measured using a Thioredoxin Reductase Assay kit [58]. As shown in Table II, OLO-2 displayed significantly more potent TrxR inhibitory activity (IC_{50} , 4.49 and 3.14 μ M, A549 and A549/CDDP cells, respectively) compared with CDDO-ME (IC_{50} , 13.12 and 13.39 μ M, A549 and A549/CDDP cells, respectively) ($P < 0.05$). These results indicated that OLO-2 may function as a TrxR inhibitor to suppress cell survival.

3.4. OLO-2 inhibits P-gp expression and activity in A549/CDDP cells.

The results of fluorescence microscopy and flow cytometric analysis demonstrated that, with an increase in the OLO-2 concentration, the inhibition of P-gp became more pronounced, and even at the concentration of 2.5 μ M, OLO-2 exerted more marked effects than did 5 μ M verapamil, using the P-gp substrate, Rhodamine 123, as an indicator (Fig. 3C and G). A previous study demonstrated that cancer cells expressing P-gp may exhibit drug resistance [59]. The inhibition of cellular P-gp expression may therefore enhance the sensitivity of cancer cells to chemotherapeutic drugs [60, 61]. In

this study, to further reveal whether the multi-targeted agent, OLO-2, inhibits P-gp expression and activity in A549/CDDP cells, western blot analysis was used to examine P-gp expression in the A549/CDDP and A549 cell lines following treatment with OLO-2. As shown in Fig. 3A and B, the A549/CDDP cells expressed high levels of P-gp; however, the A549 cells only exhibited weak levels of P-gp protein expression. Following treatment with OLO-2, the mRNA and protein levels of P-gp were clearly inhibited in the A549/CDDP cells, as determined by RT-PCR and western blot analysis (Fig. 3D, E and F).

3.5. Evaluating the effects of OLO-2 on P-gp-ATPase activity in vitro.

The Pgp-Glo™ Assay system was used to directly investigate the effects of OLO-2 on P-gp-ATPase. P-gp pumps drugs out of the cells by consuming ATP, and the quantity of the ATP consumption may reflect whether the compound is a stimulator or an inhibitor of P-gp-ATPase activity. Verapamil is a substrate of P-gp, which has been identified to be a stimulator of P-gp-ATPase and can be used as a positive control. According to the calculated results, OLO-2 was demonstrated to be an inhibitor of P-gp ATPase activity (Table III).

3.6. OLO-2 enhances CDDP-induced ROS accumulation

Inhibition of TrxR can induce ROS accumulation[54, 55], and CDDP has been reported to generate ROS to induce cell death as a part of its anticancer defense mechanism [62]. We therefore wished to determine whether OLO-2 can

synergistically enhance the ROS levels induced by CDDP. As was anticipated, treatment with OLO-2 alone elicited detectable ROS overproduction in a time-dependent manner, as measured using the fluorescein-labeled probe, DHE (Fig. 4A). Furthermore, co-treatment with OLO-2 and CDDP markedly elevated the CDDP-induced ROS levels in a time-dependent manner, and the ROS levels markedly increased during the period between 0-20 min, suggesting an important participatory role of ROS in the early stages of triggering cell apoptosis (Fig. 4A). The excessive ROS levels may further induce intracellular DNA damage and activate downstream signaling pathways.

In addition, both *N*-acetyl-L-cysteine (NAC)-antioxygen and glutathione (GSH) ROS scavengers were used to determine the role of intracellular ROS in the apoptotic cell death induced by combined treatment with OLO-2 and CDDP. As was expected, the addition of GSH and NAC attenuated the suppressive effects on A549/CDDP cell proliferation induced by combined treatment with OLO-2 and CDDP (Fig. 4B). The cells treated with a combination of 20 μ M CDDP and 1 μ M OLO-2 exhibited a decrease in viability to 35.7%. However, treatment of the cells with 10 mM NAC or 10 mM GSH for 2 h prior to combined treatment with OLO-2 and CDDP significantly increased cell viability to 65.2 and 70.2%, respectively. NAC and GSH reversed the suppressive effects on the apoptosis of the A549/CDDP cells induced by combined treatment with OLO-2 and CDDP, implying that ROS production is essential for the induction of cell apoptosis resulting from combined treatment with OLO-2 and CDDP.

3.7. DNA damage is triggered by OLO-2 alone and combination treatment with OLO-2 and CDDP.

Accumulation of the ROS can lead to DNA damage [56]. To determine whether the combination of OLO-2 and CDDP induces DNA damage, DHE and 3 DNA damage markers, H2A.X, p-p53 (Ser-20) and phosphorylation of histone (Ser-15), were examined to investigate this synergistic effect. Treatment with OLO-2 or CDDP alone activated H2A.X and p-p53 in the A549/CDDP cells (Fig. 4C and D). However, the combination of OLO-2 and CDDP markedly enhanced CDDP-induced DNA damage, as indicated by the enhanced H2A.X activation and p53 phosphorylation (Fig. 4C and D). Finally, the effects of the combined treatment were attenuated by pre-treatment of the cells with GSH for 2 h (Fig. 4C and D).

3.8. OLO-2 alone inhibits the PI3K/AKT and MEK/ERK pathways, and augments the CDDP-induced inhibition of the PI3K/AKT and MEK/ERK pathways

DNA damage can lead to the inhibition of the PI3K/AKT and MEK/ERK pathways [63, 64]. Phosphoinositide 3-kinase (PI3K)/AKT and mitogen-activated protein kinases (MAPKs, including ERK) both serve as upstream kinases in their respective signaling pathways, and play vital roles in regulating cell survival, proliferation and cell growth [65, 66]. In this study, important signaling molecules in the PI3K/AKT and MAPK pathways, including AKT, p-AKT (Ser-473), ERK and p-ERK (Thr-202/Tyr-204), were investigated to evaluate the role of OLO-2-associated

mechanisms in inhibiting cell survival. The results obtained from western blot analysis demonstrated that treatment with OLO-2 alone led to obvious downregulation of AKT, p-AKT and p-ERK (Fig. 5A, D, E and I). Combined treatment with OLO-2 and CDDP markedly inhibited AKT and ERK activation to an even greater extent. Subsequently, LY 294002 and U0126, specific inhibitors of AKT and ERK respectively, were used to further verify the roles of AKT and ERK in inducing the death of A549/CDDP cells by combined treatment of OLO-2 and CDDP. The results revealed that pre-treatment with the two inhibitors for 2 h significantly augmented the inhibitory effects on A549/CDDP cell viability induced by combined treatment (Fig. 6A). Furthermore, the dephosphorylation of ERK and AKT induced by combined treatment was enhanced by pre-treatment with the inhibitors, LY294002 and U0126, for 2 h (Fig. 6C and D). These results demonstrated that combined treatment with OLO-2 and CDDP inhibited A549/CDDP cell growth in an ERK- and AKT-dependent manner. OLO-2, as well as the investigated inhibitors of ERK and AKT signaling, acted synergistically with CDDP to reduce A549/CDDP cell viability.

3.9. OLO-2 alone inhibits STAT3 pathways, and enhances the CDDP-induced inhibitory effects on the NF- κ B and STAT3 pathways

DNA damage can also suppress NF- κ B and STAT3 pathways [67, 68]. NF- κ B and STAT3 are closely associated with tumor cell survival, proliferation and invasion, and are targets for drug development and cancer therapy [23, 69-71]. In this study, to determine whether OLO-2 inhibits activation of the NF- κ B and STAT3 pathways, the

expression of NF- κ B, p-NF- κ B (Ser-536), STAT3 and p-Stat3 (Ser-727) was investigated. The results indicated that OLO-2 alone suppressed the protein levels of p-STAT3 (Ser-727) (Fig. 5A and G) and the inhibition of NF- κ B was not obviously when treated with 1 μ M OLO-2 alone (Fig. 5A). However, NF- κ B pathway could be blocked via DNA damage caused by the increase in ROS upon OLO-2 treatment. Additionally, combined treatment with OLO-2 and CDDP markedly inhibited NF- κ B and STAT3 activation (Fig 5A, B, C, F and G). To further confirm the roles of NF- κ B and STAT3, cell viability was detected by MTT assay using the specific NF- κ B and STAT3 inhibitors, RTA 408 and S3I 201, respectively. The results revealed that pre-treatment with the two inhibitors for 2 h markedly enhanced the inhibitory effects on A549/CDDP cell growth induced by combined treatment with OLO-2 and CDDP (Fig. 5B). The dephosphorylation of ERK and AKT induced by combined treatment with OLO-2 and CDDP was markedly augmented by pre-treatment with the inhibitors, RTA 408 and S3I 201, for 2 h (Fig. 5E and F). Taken together, these data demonstrated that, in addition to the PI3K/AKT and MEK/ERK pathways, the NF- κ B and STAT3 signaling pathways also play important roles in the inhibition of A549/CDDP cell growth induced by combined treatment with OLO-2 and CDDP.

3.10. Inhibitions of PI3K/AKT, MEK/ERK, NF κ B and STAT3 pathways can reverse CDDP resistance

It has been reported that *PI3K/AKT, MEK/ERK, NF κ B and STAT3 pathways* are closely associated with drugs resistances, including cisplatin (CDDP) resistance

[28-31]. We wish to determine whether attenuating four pathways could reverse CDDP resistance. We used the inhibitors of the four pathways to suppress the pathways, respectively, and MTT assay was used to examine A549/CDDP cells viability with 20 μ M CDDP treatment.

The results showed that 30 μ M LY 294002 (an upstream inhibitor of AKT) or U0126 (an ERK inhibitor) could obviously sensitize A549/CDDP cells to the CDDP treatment (Fig. 7A and B), and 180 μ M S3I 201 (a STAT3 inhibitor) or 3 μ M RTA 408 (a specific NF- κ B inhibitor) could also achieve this effect (Fig. 7C and D). Because the combination of OLO-2 and CDDP significantly suppressed the four pathways, the combined treatment should be able to reverse CDDP resistance through this mechanism.

3.11. OLO-2 induces the apoptosis of A549/CDDP cells

To determine whether the inhibitory effects of OLO-2 on the proliferation of human multidrug resistant lung cancer cells were accompanied by enhanced apoptosis, Annexin V-FITC and PI staining was applied to evaluate the percentages of apoptotic cells by flow cytometric analysis. The results revealed that the apoptotic rate induced by OLO-2 in the A549/CDDP cells was significantly higher compared with that induced by CDDO-ME or CDDP ($P < 0.01$; Fig. 8A and B).

In addition, the results of western blot analysis revealed that treatment with 1 μ M OLO-2 for 48 h markedly decreased the levels of pro-caspase-3 and PARP, but evidently increased cleaved-caspase-3 and cleaved-PARP expression in the

A549/CDDP cells (Fig. 8E and F), also indicating that OLO-2 induced the apoptosis of the A549/CDDP cells.

3.12. OLO-2 enhances CDDP-induced A549/CDDP cell apoptosis by triggering caspase-3 activation

The apoptotic rate was 12.37% in the A549/CDDP cells treated with 20 μ M CDDP (Fig. 7E). It was noteworthy that treatment with a combination of 1 μ M OLO-2 and 20 μ M CDDP for 48 h markedly enhanced cell apoptosis to 27.54%, and cell necrosis to 38.9% (Fig. 8C). However, when the cells were pre-treated with 40 μ M of the pan-caspase inhibitor, zVAD-fmk, for 2 h, the apoptosis induced by 1 μ M OLO-2 and 20 μ M CDDP was markedly decreased ($P < 0.05$; Fig. 8C and D).

To further investigate the mechanisms responsible for the enhancement of the CDDP-induced apoptosis of A549/CDDP cells by OLO-2, western blot analyses were performed. The cells were treated with 20 μ M CDDP or 1 μ M OLO-2 individually or in combination for 48 h. CDDP induced the activation of caspase-3 and the cleavage of PARP, and the effects of OLO-2 were as described above (Fig. 8E and F). Combined treatment with OLO-2 and CDDP significantly decreased the expression of pro-caspase-3 and PARP, and markedly increased cleaved caspase-3 and cleaved PARP expression (Fig. 8E and F). To verify the role of caspase-3 in the enhancement of CDDP-induced A549/CDDP cell apoptosis by OLO-2, the cells were treated with 40 μ M of the pan-caspase inhibitor, zVAD-fmk, for 2 h prior to the various combination treatments. The results demonstrated that the cleavage of caspase-3 and

PARP induced by the combined treatments was impeded by zVAD-fmk (Fig. 8E and F). Thus, we hypothesized that caspase-3 activation may play a critical role in the apoptosis of A549/CDDP cells which was induced by CDDP and enhanced by OLO-2.

3.13. Role of TrxR in OLO-2 treatment.

To further investigate the role of TrxR in the OLO-2-induced inhibition of cell proliferation and survival, siRNA and transfection technologies were used to knock down or overexpress TrxR in the A549 and A549/CDDP cells upon treatment with various concentrations of OLO-2 for 48 h. After identifying alterations in the TrxR protein levels by western blot analysis, the cell death was measured by MTT assay. As shown in Fig. 9A, transfection with siRNA-TrxR markedly enhanced the sensitivity of the two cell lines to OLO-2 at concentrations of 0.25-1.25 μ M. On the other hand, the overexpression of TrxR markedly reduced the sensitivity to OLO-2 at concentrations of 0.625-5 μ M (Fig. 9B). Transfection with the empty plasmid and the non-targeting siRNA had no effect on the response of cells to OLO-2 (Fig. 10).

Taken together, these results demonstrate that TrxR plays a role in the effects of OLO-2 treatment on human lung adenocarcinoma cells. OLO-2 induces ROS which in turn renders cells dependent on Trx protection. Hence when Trx protection goes down, cell death increases.

3.14. TrxR plays an important role in the resistance of A549/CDDP cells to CDDP.

It is well known that TrxR is usually overexpressed in various types of cancer cells [18, 72], and is associated with the drug resistance of tumors [22]. Thus, in this study, to confirm and compare the resistance of A549/CDDP cells to CDDP by overexpressing or suppressing TrxR, Annexin V and PI flow cytometric analysis was used. Transient transfection with pcDNA-3.1-TXNRD1 markedly increased the viability of the A549/CDDP cells in the presence of 50 μ M CDDP (Fig. 9C and D). When CDDP dose increased from 20 to 50 μ M, CDDP-induced ROS raised and the CDDP-induced ROS would induce the more cancer cells apoptosis[62]. The raised TrxR expression could reduce ROS harmful effect and decrease the apoptosis which was induced by ROS. By contrast, transfection with siRNA-TXNRD1 markedly increased the sensitivity of the A549/CDDP cells to CDDP at the concentration of 20 μ M (Fig. 9C and D). These results indicated that TrxR indeed plays an important role in the resistance of A549/CDDP cells to CDDP, and that the inhibition of TrxR can sensitize the lung cancer cells to CDDP.

CDDP

3.15. OLO-2 inhibits ERCC1 expression in A549/CDDP cells

Overexpressing ERCC1 can cause chemotherapy drug resistances, including CDDP resistance. Chemotherapy drugs induce DNA damage, and ERCC1 can repair this damage [73]. Co-treatment with OLO-2 enhanced CDDP induced DNA damage. We used western blot assay to determine whether the enhancement of DNA damage induced by OLO-2 was caused via ERCC1. As shown in Fig. 11A and B, treatment of

the A549/CDDP cells with OLO-2 obviously decreased TrxR protein expression (Fig. 11 A and B). As the concentration increased, the levels of ERCC1 protein expression decreased. These results indicated that ERCC1 is a target of OLO-2.

In summary, OLO-2 reversed the CDDP resistance and multidrug resistance through the inhibition of thioredoxin and multiple signaling pathways (Fig. 12).

3.16. A549/CDDP cells resist doxorubicin, vincristine and paclitaxel

As a multi-drug resistant cell line, A549/CDDP cells not only resist CDDP but also resist other potent chemotherapeutic drugs. To test A549/CDDP cells' MDR, MTT assay was used to determine the IC₅₀ values of doxorubicin, vincristine and paclitaxel, which are first-line chemotherapy drugs. The MTT assay showed that the IC₅₀ values of doxorubicin, vincristine and paclitaxel in A549/CDDP cells, respectively, were approximately 50, 15 and 39 fold of the IC₅₀ values of them in the parental A549 cells (P<0.001) (Table. 4). These results indicated that the A549/CDDP cells in this research are indeed multi-drug resistant cells.

3.17. OLO-2 augments the CDDP-induced inhibition of the PI3K/AKT, MEK/ERK, NF-κB and STAT3 pathways in A549 cells

To test the synergistic effects in the parental A549 cells, MTT and western blot assays were used to determine whether OLO-2 augmented the cell death and inhibition of the PI3K/AKT, MEK/ERK, NF-κB and STAT3 pathways induced by CDDP. The MTT assay exhibited that the combination of 4 μM CDDP and 0.7 μM OLO-2

exhibited a decrease in viability to 51.29%, which was the most potent effect among all groups (Fig. 11C). The western blot assay showed that combined treatment with OLO-2 and CDDP markedly inhibited p-AKT (Ser 473), p-ERK (Thr 202/Tyr 204), p-NF- κ B (Ser-536) and p-Stat3 (Ser-727) expression levels to a significantly greater extent in A549 cells compared to CDDP treatment group (Fig. 11D-H). These results demonstrated that OLO-2 synergizes CDDP-induced growth inhibition of A549 cells and augments the CDDP-induced inhibition of the PI3K/AKT, MEK/ERK, NF- κ B and STAT3 pathways.

4. Discussion

CDDP, which is one of the front-line chemotherapeutic drugs used in the treatment of human lung cancer, is often negated by MDR in clinical therapy [74, 75]. OLO-2 targets both TrxR expression and TrxR activity, and this can contribute towards alleviating this critical problem. In this study, when various concentrations of OLO-2 (0.25, 0.5 and 1 μ M) were administered to the A549/CDDP cells together with 20 μ M CDDP, the apoptotic rates of the cells were found to markedly increase. Combined treatment with CDDP and 1 μ M OLO-2 was able to significantly enhance caspase-3 and PARP activation. The inhibitory effects of OLO-2 mediated by TrxR/Trx may prevent Trx from binding to apoptosis signal-regulating kinase 1 (ASK-1), a kinase that plays a vital role in apoptosis and may be inactivated by binding with Trx [76]. If Trx is unable to bind ASK-1, ASK-1 will activate various signaling cascades, ultimately leading to the induction of apoptosis.

P-gp, which has two transmembrane regions and two ATP-binding cassettes, is a famous and the first protein confirmed as a mediator of tumor drug resistance and plays a vital role in MDR progresses in cancer[77]. In this study, OLO-2 was found to inhibit P-gp expression and activity. OLO-2 not only suppresses CDDP resistance but also can reverse the MDR caused by P-gp. We will focus on OLO-2's effect on doxorubicin, a P-gp substrate, and its derivatives in tumor cells in the further research.

The MEK/ERK and PI3K/AKT signaling pathways play essential roles in cell growth, proliferation and survival [78], and activate anti-apoptotic pathways and induce drug resistance in tumor cells [78-80]. Several novel treatment strategies have been developed to inhibit these signaling pathways [81-83]. In the present study, the MEK/ERK and PI3K/AKT pathways were investigated as targets of OLO-2, and OLO-2 was found to synergistically augment the CDDP-mediated apoptosis of human multidrug-resistant lung adenocarcinoma cells by inhibiting ERK and AKT. The results suggested that combined treatment with OLO-2 and CDDP induced the apoptosis of the A549/CDDP cells via AKT- and ERK-dependent mechanisms. In addition, using U0126 (an ERK inhibitor) and LY294002 (an upstream inhibitor of AKT) respectively, inhibitors of the pathways, could sensitize A549/CDDP cells to CDDP, which confirmed that the inhibition of MEK/ERK and PI3K/AKT signaling pathways could weaken the CDDP resistance in the A549/CDDP cells.

NF- κ B and STAT3 are closely associated with tumor cell survival, proliferation, invasion and drug resistance [84, 85], and are common targets for drug development and cancer therapy. In the present study, OLO-2 was found to synergistically augment CDDP-mediated death and the apoptosis of human multidrug-resistant lung adenocarcinoma cells by inhibiting the NF- κ B and STAT3 signaling pathways. The data demonstrated that the NF- κ B and STAT3 pathways also play a key role in the apoptosis of A549/CDDP cells induced by combined treatment with OLO-2 and CDDP. The further study showed that using RTA-408 (a specific NF- κ B inhibitor) and S3I-201 (a STAT3 inhibitor) could sensitize A549/CDDP cells to CDDP, which confirmed that the inhibition of NF- κ B and STAT3 signaling pathways could diminish the CDDP resistance in the A549/CDDP cells.

Recent studies have demonstrated that the majority of tumor cells, including cancer stem cells, exhibit elevated ROS levels, which render them more vulnerable to increases in oxidative stress levels compared with normal cells, including various types of stem cell [86, 87]. This characteristic may be utilized to selectively induce the apoptosis and death of these cells. CDDP leads to an increase in cellular ROS levels, which provides one of its antitumor mechanisms [88]. In our previous study, OLO-2 was found to be able to induce ROS generation in tumor cells [44]. As was expected, in the present study, the combined use of OLO-2 and CDDP led to a significantly more potent generation of ROS compared with OLO-2 or CDDP treatment alone. Furthermore, the inhibitory effect of this combined treatment was

attenuated by GSH and NAC, which act as ROS scavengers.

Owing to the DNA-damaging effects elicited by ROS, H2A.X, p53-Ser15 and p53-Ser20, three DNA-damage markers that are associated with CDDP treatment [89, 90], were recruited in the present study to assess this effect. The results demonstrated that treatment with OLO-2 and CDDP alone only marginally gave rise to DNA damage in the A549/CDDP cells, as evidenced by the weak upregulation of H2A.X, p53-Ser15 and p53-Ser20. The combination of OLO-2 and CDDP led to a clear enhancement of DNA damage, and the phosphorylation of the DNA-damage markers was attenuated by GSH. Therefore, these results suggest that upregulation of ROS may cause DNA damage, and may further lead to apoptosis.

TrxR and Trx levels are overexpressed in numerous types of tumor cells, particularly those that are treated with chemotherapeutic drugs, such as CDDP, mitomycin C, doxorubicin, docetaxel and etoposide [21, 91-93]. In the present study, the A549/CDDP cells exhibited a marked increase in TrxR expression levels compared with A549 cells. In addition, this study, to the best of our knowledge, demonstrated for the first time, that the overexpression or knockdown of TrxR in A549/CDDP cells may respectively enhance or attenuate the resistance of the cells to CDDP. Therefore, these results indicate that TrxR may function as a protector against chemotherapeutic drugs. TrxR plays vital roles in tumor cells as a redox regulator of intracellular signal transduction and as a free radical scavenger [10, 94, 95]. OLO-2

may inhibit the mRNA and protein expression of TrxR, as well as its activity, which leads to the suppression of Trx, the upregulation of ROS and the apoptosis of human lung adenocarcinoma cells. In this study, it was of interest to ascertain whether OLO-2 exhibits selective toxicity in human lung adenocarcinoma cells compared with human normal cells. We surmised that human lung adenocarcinoma cells require a higher protein expression level of TrxR/Trx than do human normal cells in order to maintain their redox balance for their higher levels of ROS compared with normal cells, and that tumor cells are more vulnerable to TrxR/Trx inhibition than are normal cells. Cancer cells require higher levels of the TrxR/Trx system to dispose of the cellular stress elicited by elevated ROS levels, and to maintain rapid DNA assembly [23, 96].

CDDP can enter into cell nucleus, bind cellular DNA, lead to DNA-platinum adducts and produce inter-strand cross-links, thus impeding precise DNA synthesis. The cancer cells will die if they cannot repair the damaged DNA or the damage is too intense [97]. As shown in this study, OLO-2 inhibited ERCC1 protein expression in A549/CDDP cells. We speculated that the enhancement of CDDP induced DNA damage in the combination treatment may partly due to inhibition of ERCC1 by OLO-2.

OLO-2 also augmented the CDDP induced inhibition of the PI3K/AKT, MEK/ERK, NF- κ B and STAT3 pathways in its parental A549 cells. This indicated that OLO-2

not only synergizes CDDP-induced inhibition of multiple signaling pathways in human multidrug-resistant lung adenocarcinoma cells but also can enhance CDDP-induced inhibition of multiple signaling pathways in drug-sensitive lung cancer cells.

As indicated in our study, OLO-2 inhibited TrxR expression and activity, and thus increasing ROS and DNA damage. The increased DNA damage will suppress PI3K/AKT and MEK/ERK pathways [62,63], as well as NF- κ B and STAT3 pathways [67, 68]. OLO-2 could also inhibited P-gp expression and activity. It has been reported that P-gp expression is positively regulated by NF- κ B [37], MEK/ERK [98] and PI3K/AKT [99] [100] signaling pathways. Therefore, OLO-2 most likely reduced P-gp mRNA level by inhibiting these three pathways. We speculate that these multiple action ways of OLO-2 might result from its multiple targeting characteristics. In order to address this issue, interrogating the direct targets of OLO-2 using bioinformatic and experimental methods, and elaborating the following biochemical reactions are warranted in the future work.

In conclusion, the present study demonstrates that OLO-2 could synergistically enhance CDDP-mediated apoptosis, lead to the activation of caspase-3 and ROS generation, cause DNA damage, and inhibit the ERK, STAT3, AKT and NF- κ B signaling pathways and ERCC1 in A549/CDDP cells. Furthermore, OLO-2 inhibits

the expression of both TrxR and P-gp and their associated enzymatic activities, which leads to the downregulation of Trx and an augmentation of the above-mentioned effects. Further investigation on this composite may contribute to the development of novel cancer therapies associated with MDR in the future.

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Ethics approval and consent to participate

Not applicable.

Patient consent for publication

Not applicable.

Competing interests

The authors declare that they have no competing interests.

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Figure 1. OLO-2 inhibits the viability of human lung cancer cells and human bronchial epithelial cell line HBE. (A) Structure of OLO-2. (B) Inhibition ratios of OLO-2 in human A549 and HBE cells. (C) Inhibition ratios of OLO-2 in human A549/CDDP and HBE cells. (D). Inhibition ratios of OLO-2 in human LTP-a-2 and HBE cells. (E). Inhibition ratios of OLO-2 in human of SPC-A-1 and HBE cells. Data are representative of 3 independent experiments and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). * $P < 0.05$, ** $P < 0.01$ as compared to HBE cells. OLO-2, olean-28,13b-olide 2; A549/CDDP cells, the multidrug resistant human lung adenocarcinoma cell line.

Figure 2. OLO-2 inhibits TrxR expression at the protein and mRNA levels. (A) TrxR

expression in the A549/CDDP, A549 and HBE cells. (B) Quantification of TrxR expression in the A549/CDDP, A549, and HBE cells. (C) With an increasing concentration of OLO-2, the inhibition of TrxR and Trx proteins gradually became more pronounced. CDDO-ME exerted only a small influence on the protein expression levels of TrxR and Trx. (D) Fold changes of the TrxR and Trx protein expression levels. (E) OLO-2 inhibited TrxR mRNA expression, which was measured by RT-PCR. Data are representative of 3 independent experiments, and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). For larger datasets involving >2 groups, one-way analysis of variance (ANOVA) with Bonferroni's multiple comparison tests was used. *P<0.05, **P<0.01, ***P<0.001 compared with the control. #P<0.05 vs. the CDDO-ME treatment group. OLO-2, olean-28,13b-olide 2; CDDP, cisplatin; TrxR, thioredoxin reductase; TRx, thioredoxin; PCR, polymerase chain reaction; CDDO(-ME), (methylated) 2-cyano-3,12-dioxoolean-1,9-dien-28-oic acid. A549/CDDP cells, the multidrug resistant human lung adenocarcinoma cell line.

Figure3. Influence of OLO-2 on the efflux of rh123 in A549/CDDP cells. (A) Expression of P-gp in the A549/CDDP and A549 cells. (B) Fold changes of P-gp expression in the A549/CDDP and A549 cells. (C) Accumulation of rh123 in the A549/CDDP cells was detected by flow cytometric assay. (D) With an increasing

concentration of OLO-2, the inhibition of P-gp proteins gradually became more pronounced. CDDO-ME exerted only a little influence on the protein expression levels of P-gp. (E) Fold changes of the P-gp protein expression levels. (F) OLO-2 inhibited P-gp mRNA expression, which was measured by RT-PCR. (G) OLO-2 and verapamil inhibited the efflux of rh123 in A549/CDDP cells, which was detected by fluorescence microscopy. Scale bar, 100 μ m. Data are representative 3 three independent experiments and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). For larger datasets involving >2 groups, one-way analysis of variance (ANOVA) with Bonferroni's multiple comparison tests was used. ***P<0.001 as compared with the control. OLO-2, olean-28,13b-olide 2; P-gp, P-glycoprotein; rh123, Rhodamine 123; CDDP, cisplatin.

Figure 4. OLO-2 synergistically enhances CDDP-mediated ROS accumulation and DNA damage. (A) OLO-2 enhanced CDDP-mediated ROS accumulation. A549/CDDP cells were treated with 1 μ M OLO-2 for 1 h, and then treated with 20 μ M CDDP for 2 h. ROS generation was subsequently measured using the fluorescence probe, DHE. (B) Pre-treatment with 10 mM NAC or GSH for 2 h clearly attenuated the inhibition resulting from combined treatment with 1 μ M OLO-2 and 20 μ M CDDP against A549/CDDP viability. (C) Treatment with 1 μ M OLO-2 or 20 μ M CDDP alone for 24 h induced DNA damage in the A549/CDDP cells, whereas combined treatment with 1 μ M OLO-2 and 20 μ M CDDP for 24 h significantly

enhanced DNA damage. Pre-treatment with 10 mM GSH for 2 h clearly reduced the combined effects on DNA damage. (D) Fold changes of H2A.X, Ser15-p53 and Ser20-p53 protein expression. Data are representative of 3 independent experiments and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). For larger datasets involving >2 groups, one-way analysis of variance (ANOVA) with Bonferroni's multiple comparison tests was used. *P<0.05, **P<0.01, ***P<0.001 compared with the control. #P<0.05 vs. the OLO-2 alone or the CDDP alone group. &P<0.05 vs. the OLO-2 + CDDP group. OLO-2, olean-28,13b-olide 2 ; CDDP, cisplatin; ROS, reactive oxygen species; NAC, *N*-acetyl-L-cysteine (NAC); GSH, glutathione; DHE, dihydroethidium.

Figure 5. OLO-2 synergistically enhances the CDDP-induced inhibition of ERK, AKT, NF- κ B and STAT3 pathways. (A) OLO-2 synergistically enhanced the CDDP-induced inactivation of ERK, p-ERK, AKT, p-AKT, NF- κ B, p-NF- κ B, STAT3 and p-STAT3. The protein expression levels were detected by western blot analysis. (B-I) Fold changes of the ERK, p-ERK, AKT, p-AKT, NF- κ B, p-NF- κ B, STAT3 and p-STAT3 protein expression levels. Data are representative of 3 independent experiments and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). For larger datasets involving >2 groups, one-way analysis of variance (ANOVA) with Bonferroni's

multiple comparison tests was used. ** $P < 0.01$, *** $P < 0.001$ as compared with the control. # $P < 0.05$ vs. CDDP alone group. & $P < 0.05$ vs. OLO-2 alone group. OLO-2, olean-28,13b-olide 2; CDDP, cisplatin; ERK, extracellular-signal-activated kinase; NF- κ B, nuclear factor- κ B. p-NF- κ B, Phospho-NF- κ B p65 (Ser536); p-AKT, Phospho-Akt (Ser473); p-STAT3, Phospho-STAT3 (Ser727); p-ERK, Phospho-p44/42 MAPK (Erk1/2) (Thr202/Tyr204). U0126, an ERK inhibitor; LY294002, an upstream inhibitor of AKT; RTA-408, a specific NF- κ B inhibitor; S3I-201, a STAT3 inhibitor.

Figure 6. Contribution of the ERK, AKT, NF- κ B and STAT3 pathways to the inhibition of the viability of A549/CDDP cells induced by combined treatment CDDP and OLO-2. We used low concentrations of the inhibitors, so that the experiment could highlight the synergistic effects of OLO-2. (A and B) ERK, AKT, NF- κ B and STAT3 inhibitors enhanced the inhibitory effects on the viability of A549/CDDP cells induced by combined treatment. The cells were pre-treated with 10 μ M LY294002 (an upstream inhibitor of AKT), U0126 (an ERK inhibitor), 1 μ M RTA 408 (a specific NF- κ B inhibitor), or 60 μ M S3I 201 (a STAT3 inhibitor) respectively for 2 h prior to the combined treatment with CDDP and OLO-2. Cell viability was detected by MTT assay. (C) LY294002 enhanced the inactivation of p-AKT induced by combined treatment. (D) U0126 enhanced the inactivation of p-ERK induced by combined treatment. (E) S3I-201 enhanced the inactivation of p-STAT3 induced by combined treatment. (F) RTA-408 enhanced the inactivation of p-NF- κ B induced by combined

treatment. (G-J) Fold changes of inactivation of p-ERK, p-AKT, p-NF- κ B and p-STAT3 induced by combined treatment. Data are representative of 3 independent experiments and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). For larger datasets involving >2 groups, one-way analysis of variance (ANOVA) with Bonferroni's multiple comparison tests was used. **P<0.01, ***P<0.001 as compared with the control. #P<0.05 vs. the OLO-2 0.5 μ M + CDDP group. &P<0.05 vs. the OLO-2 1 μ M + CDDP group. @P<0.05 vs. OLO-2 + CDDP group. OLO-2, olean-28,13b-olide 2; CDDP, cisplatin; ERK, extracellular-signal-activated kinase; NF- κ B, nuclear factor- κ B. p-NF- κ B, Phospho-NF- κ B p65 (Ser536); p-AKT, Phospho-Akt (Ser473); p-STAT3, Phospho-STAT3 (Ser727); p-ERK, Phospho-p44/42 MAPK (Erk1/2) (Thr202/Tyr204). U0126, an ERK inhibitor; LY294002, an upstream inhibitor of AKT; RTA-408, a specific NF- κ B inhibitor; S3I-201, a STAT3 inhibitor.

Figure 7. Inhibitors of PI3K/AKT, MEK/ERK, NF κ B and STAT3 pathways could suppress CDDP resistance, detected by MTT assay. (A) LY294002 could reverse CDDP resistance. (B) U0126 could reverse CDDP resistance. (C) S3I 201 could reverse CDDP resistance. (D) RTA-408 could reverse CDDP resistance. Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). For larger datasets involving >2 groups, one-way analysis of variance (ANOVA) with Bonferroni's multiple comparison tests was used. Data are

representative of 3 independent experiments and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. * $P < 0.05$ as compared with CDDP 20 μM group. U0126, an ERK inhibitor; LY294002, an upstream inhibitor of AKT; RTA-408, a specific NF- κB inhibitor; S3I-201, a STAT3 inhibitor. OLO-2, olean-28,13b-olide 2; CDDP, cisplatin; ERK, extracellular-signal-activated kinase; NF- κB , nuclear factor- κB .

Figure 8. OLO-2 synergistically enhances the CDDP-mediated apoptosis of A549/CDDP cells. (A) At concentrations of 2.5 and 5 μM , OLO-2, CDDO-ME and CDDP separately induced apoptosis. (B) Percentages of apoptotic cells induced by treatment with OLO-2, CDDO-ME or CDDP at concentrations of 2.5 and 5 μM . (C) CDDP at a concentration of 20 μM and combined treatment with various concentrations of OLO-2 induced apoptosis, which was inhibited by zVAD-fmk (a pan-caspase inhibitor). (D) Percentages of apoptotic cells induced by combined treatment with OLO-2 and CDDP. (E) A549/CDDP cells were treated with the vehicle (control), 20 μM CDDP (CDDP), 1 μM OLO-2 (OLO-2), 20 μM CDDP plus 1 μM OLO-2 (OLO-2 + CDDP), and zVAD-fmk combined with 20 μM CDDP and 1 μM OLO-2. The expression of caspase-3 and PARP was detected by western blot analysis. (F) Fold changes of caspase-3 and PARP protein expression. Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). For larger datasets involving >2 groups, one-way analysis of

variance (ANOVA) with Bonferroni's multiple comparison tests was used. Data are representative of 3 independent experiments and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. * $P < 0.05$, ** $P < 0.01$, *** $P < 0.001$ by ANOVA. # $P < 0.05$ vs. the OLO-2 + CDDP group. OLO-2, olean-28,13b-olide 2; CDDP, cisplatin; PARP, poly (ADP-ribose) polymerase; CDDO(-ME), (methylated) 2-cyano-3,12-dioxoolean-1,9-dien-28-oic acid.

Figure 9. TrxR is a target of OLO-2 and is associated with the resistance of lung cancer cells to CDDP. (A) A549 and A549/CDDP cells were transfected with siRNA-TrxR for 48 h, and TrxR expression was detected by western blot analysis. The inhibitory rates of tumor cells were measured using an MTT assay. (B) A549 and A549/CDDP cells were transfected with pcDNA-3.1-TrxR for 48 h, and TrxR expression was detected by western blot analysis. The inhibitory rates of tumor cells were measured by MTT assay. (C) Detection of CDDP sensitivity before and after transfection. (D) Percentages of apoptotic cells induced by the treatments before and after transfection. Data are representative of 3 independent experiments and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. * $P < 0.05$, ** $P < 0.01$ compared with the control. OLO-2, olean-28,13b-olide 2; CDDP, cisplatin.

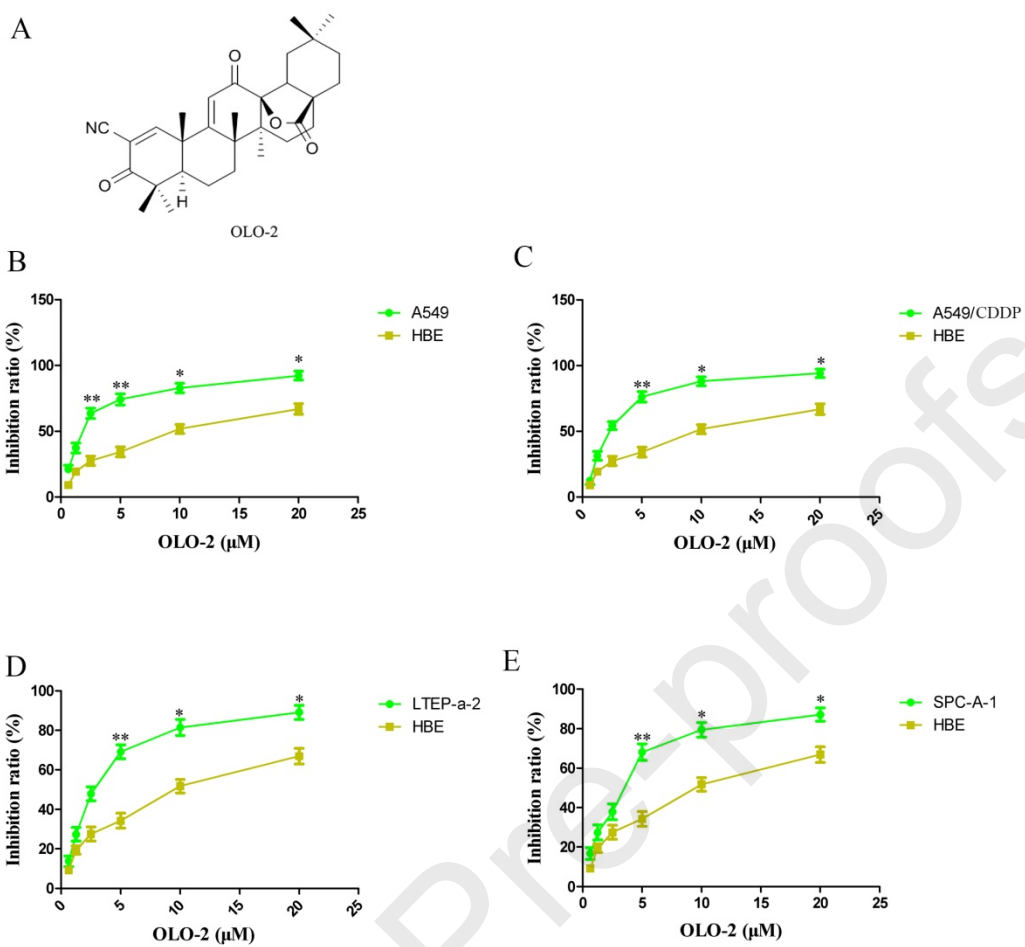
Figure 10. The TXNRD1 mRNA changes before and after the siRNA or plasmid transfections. (A) Realtime PCR detected the reduced TXNRD1 after transfection

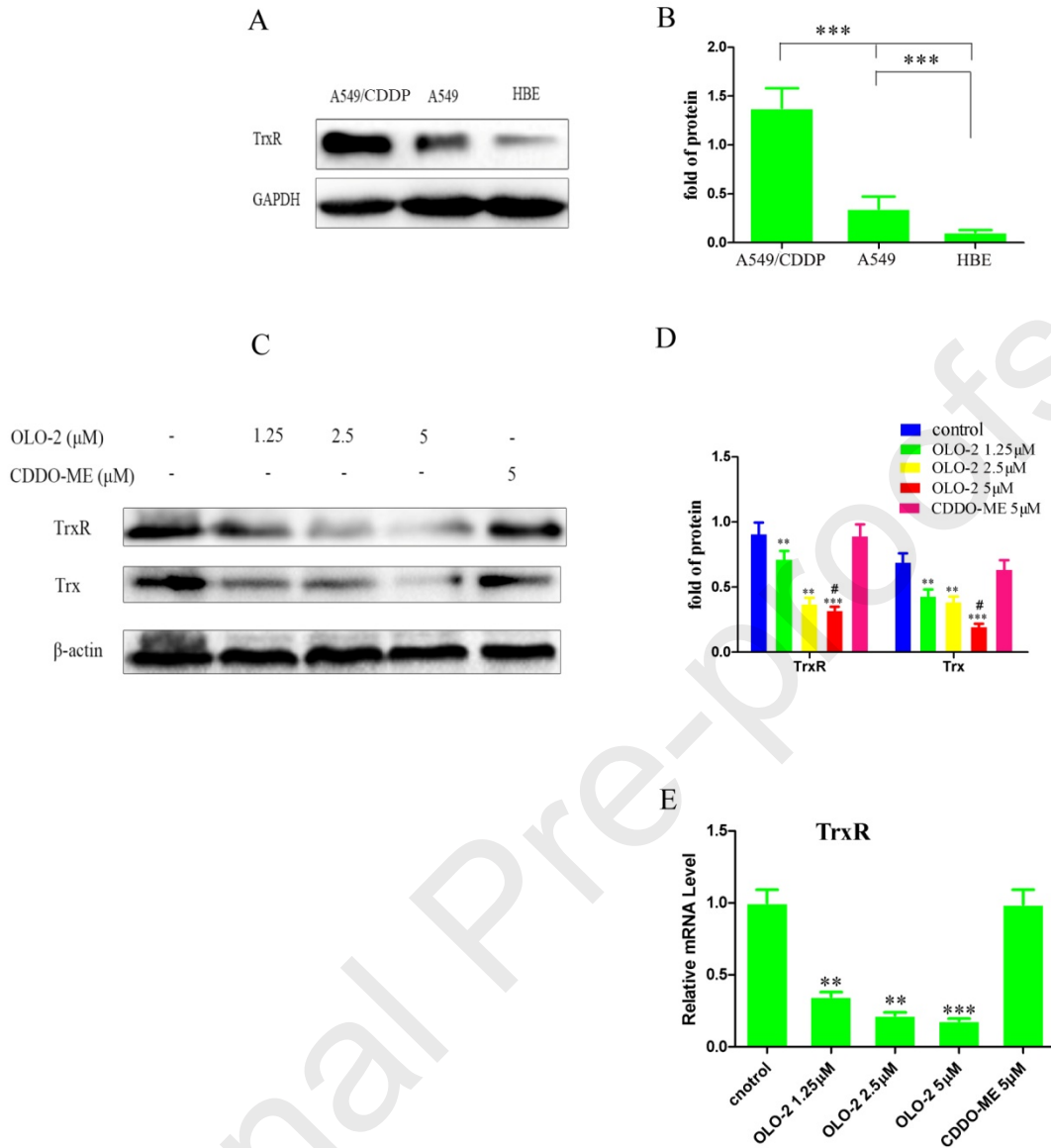
with siRNA-TXNRD1 and non-targeting siRNA in A549 cells. (B) Realtime PCR detected the reduced TXNRD1 after transfection with siRNA-TXNRD1 and non-targeting siRNA in A549/CDDP cells. (C) Realtime PCR detected the increased TXNRD1 expression after transfection with pcDNA 3.1-TXNRD1 and pcDNA 3.1 in A549 cells. (D) Realtime PCR detected the increased TXNRD1 expression after transfection with pcDNA 3.1-TXNRD1 and pcDNA 3.1 in A549/CDDP cells. Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). For larger datasets involving >2 groups, one-way analysis of variance (ANOVA) with Bonferroni's multiple comparison tests was used. Data are representative of 3 independent experiments and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. **P<0.01 compared with the controls.

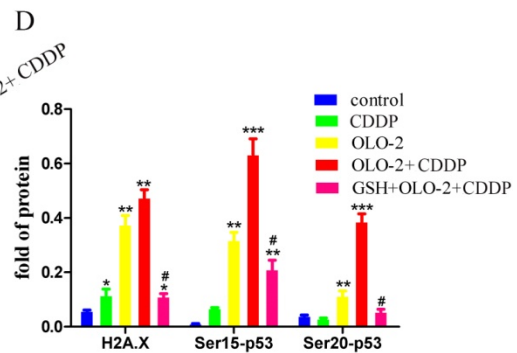
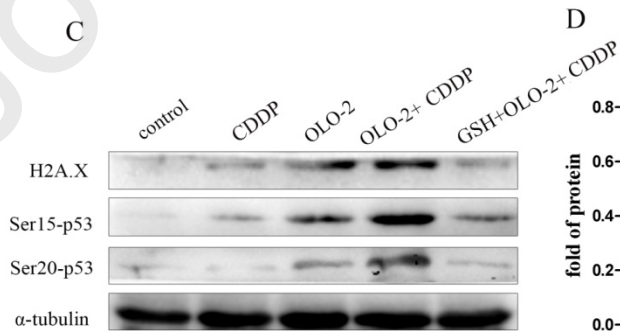
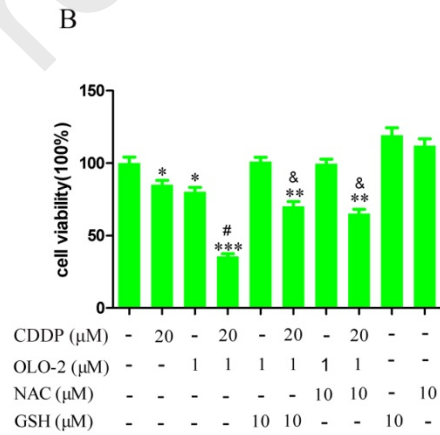
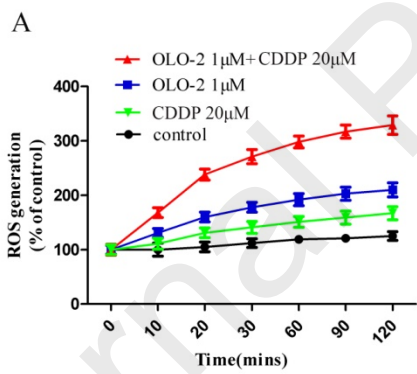
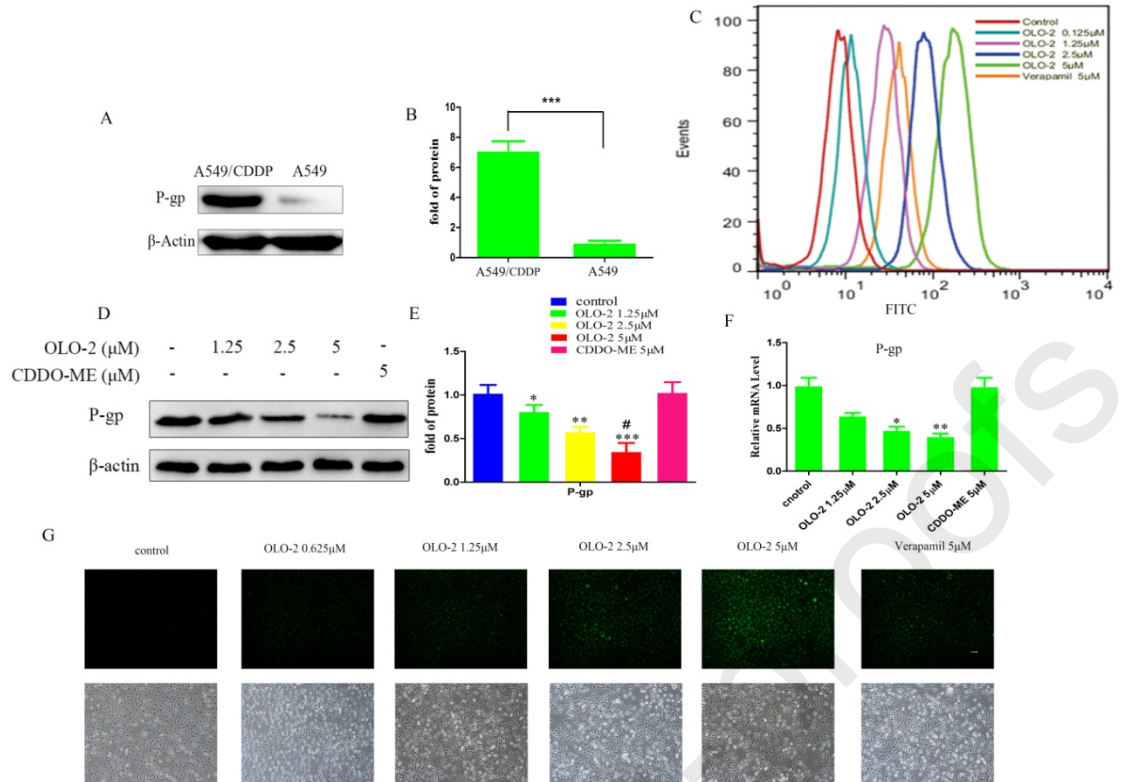
Figure 11. OLO-2 inhibited ERCC1 in A549/DDP cells and the combination treatment suppressed PI3K/AKT, MEK/ERK, NF κ B and STAT3 pathways in A549 cells. (A) With increasing concentrations of OLO-2, the inhibition of ERCC1 protein became more and more pronounced. (B) Fold changes of the ERCC1 protein expression levels. (C) The viability of A549 cells was inhibited by combination treatments of OLO-2 and CDDP, which was tested by MTT assay. (D) OLO-2 synergistically enhanced the CDDP-induced inactivation of p-ERK, AKT, p-AKT, p-NF- κ B and p-STAT3 in A549 cells. The protein expression levels were detected by western blot analysis. (E-H) Fold changes of the p-ERK, p-AKT, p-NF- κ B and

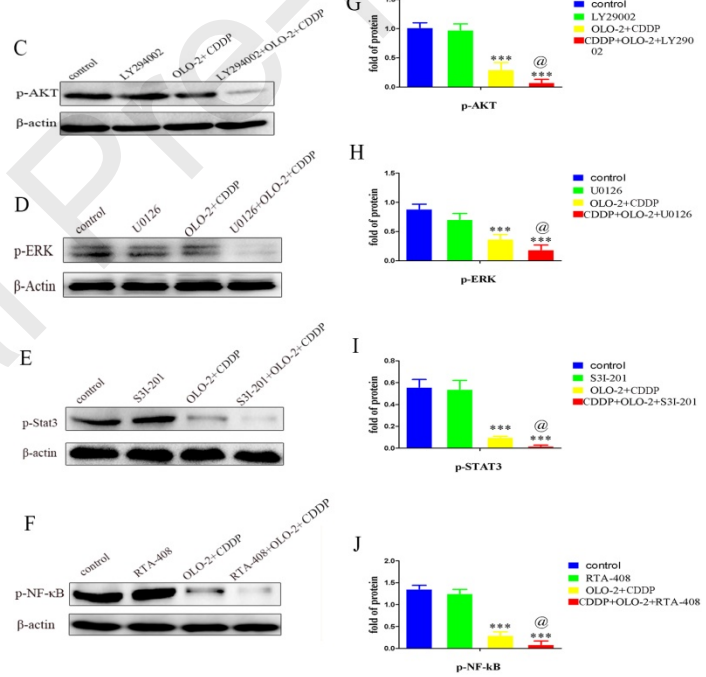
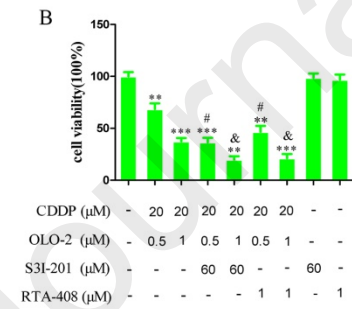
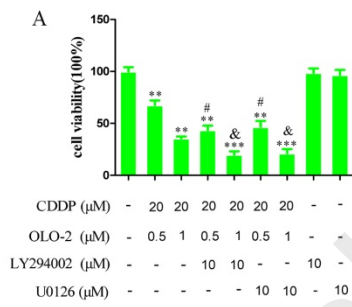
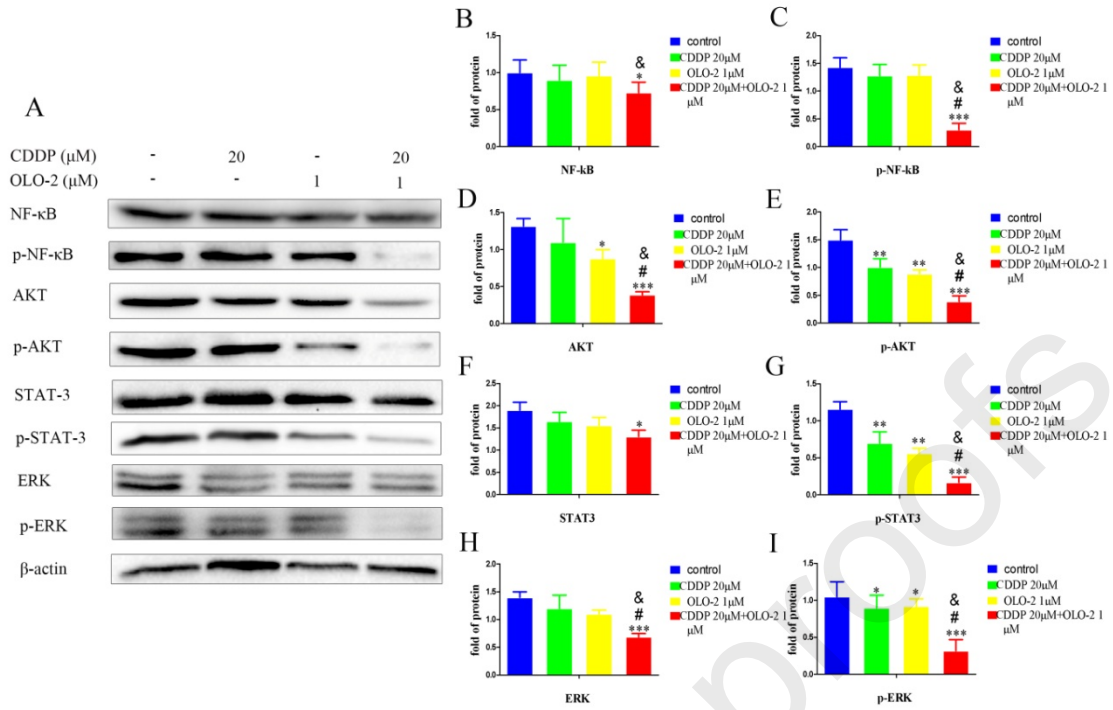
p-STAT3 protein expression levels. Data are representative of 3 independent experiments and all the controls were treated with the vehicle, DMSO (0.1%, v/v) alone. Differences were analyzed by a Student's t-test using SPSS version 18.0 statistical software (SPSS, Inc., Chicago, IL, USA). For larger datasets involving >2 groups, one-way analysis of variance (ANOVA) with Bonferroni's multiple comparison tests was used. **P<0.01, ***P<0.001 as compared with the control. #P<0.05 vs. CDDP alone group. &P<0.05 vs. OLO-2 alone group. OLO-2, olean-28,13b-olide 2; CDDP, cisplatin; ERK, extracellular-signal-activated kinase; NF-κB, nuclear factor-κB. p-NF-κB, Phospho-NF-κB p65 (Ser536); p-AKT, Phospho-Akt (Ser473); p-STAT3, Phospho-STAT3 (Ser727); p-ERK, Phospho-p44/42 MAPK (Erk1/2) (Thr202/Tyr204).

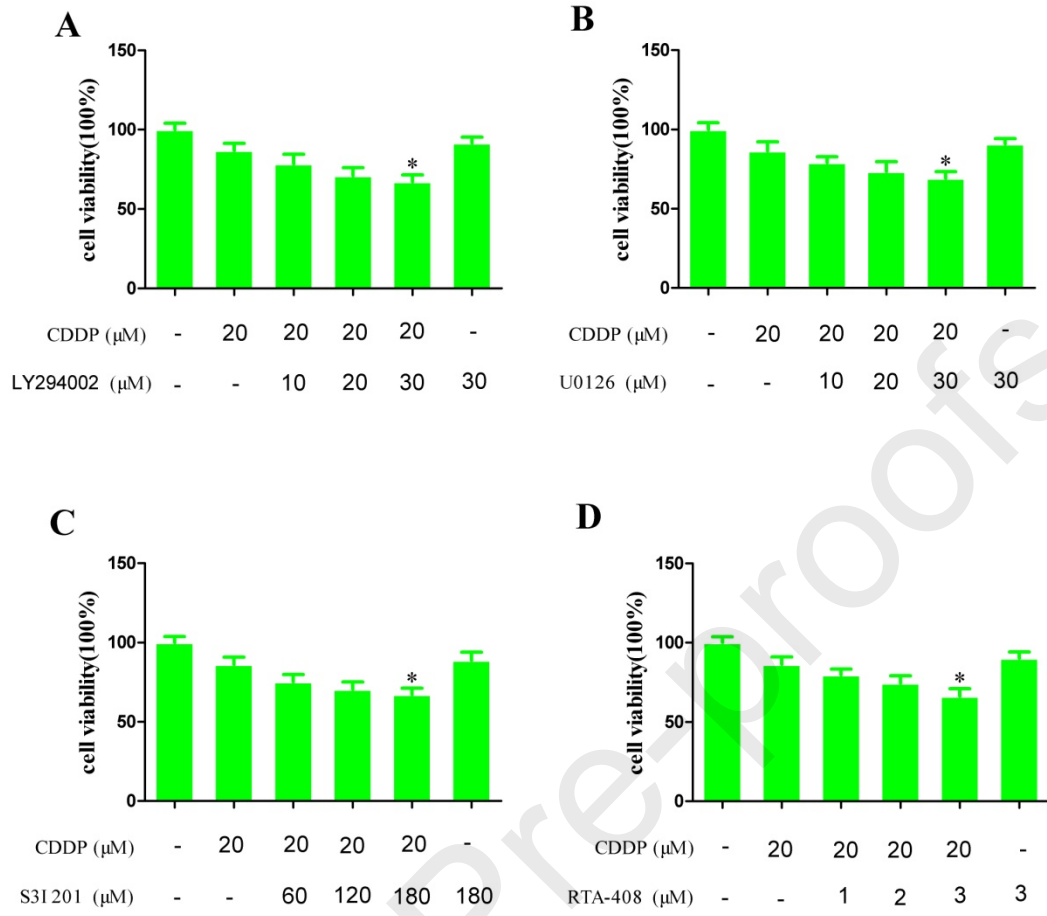
Figure 12. Proposed mechanisms of OLO-2 reversed CDDP resistance and multidrug resistance through the inhibition of thioredoxin and multiple signaling pathways.

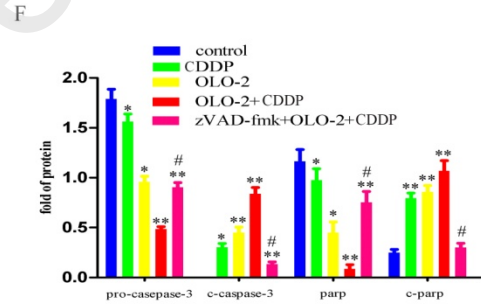
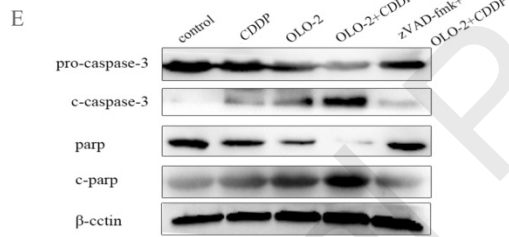
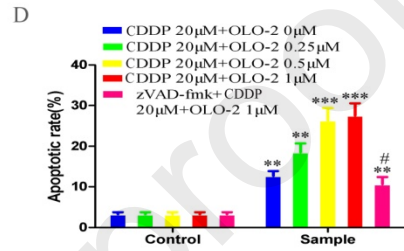
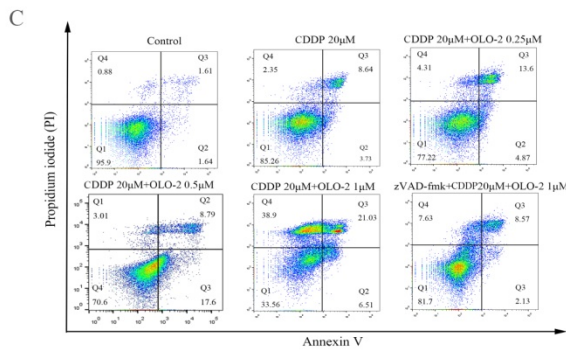
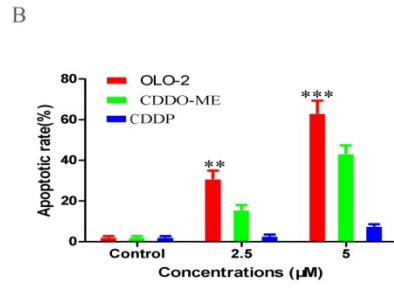
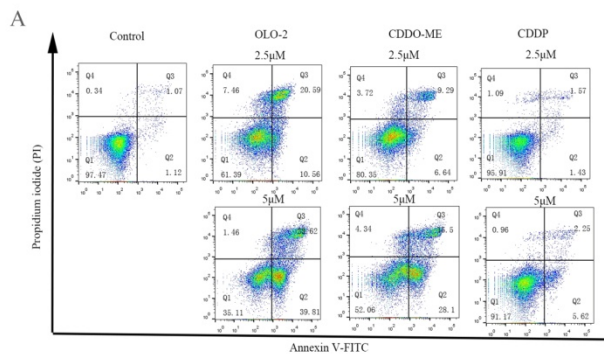


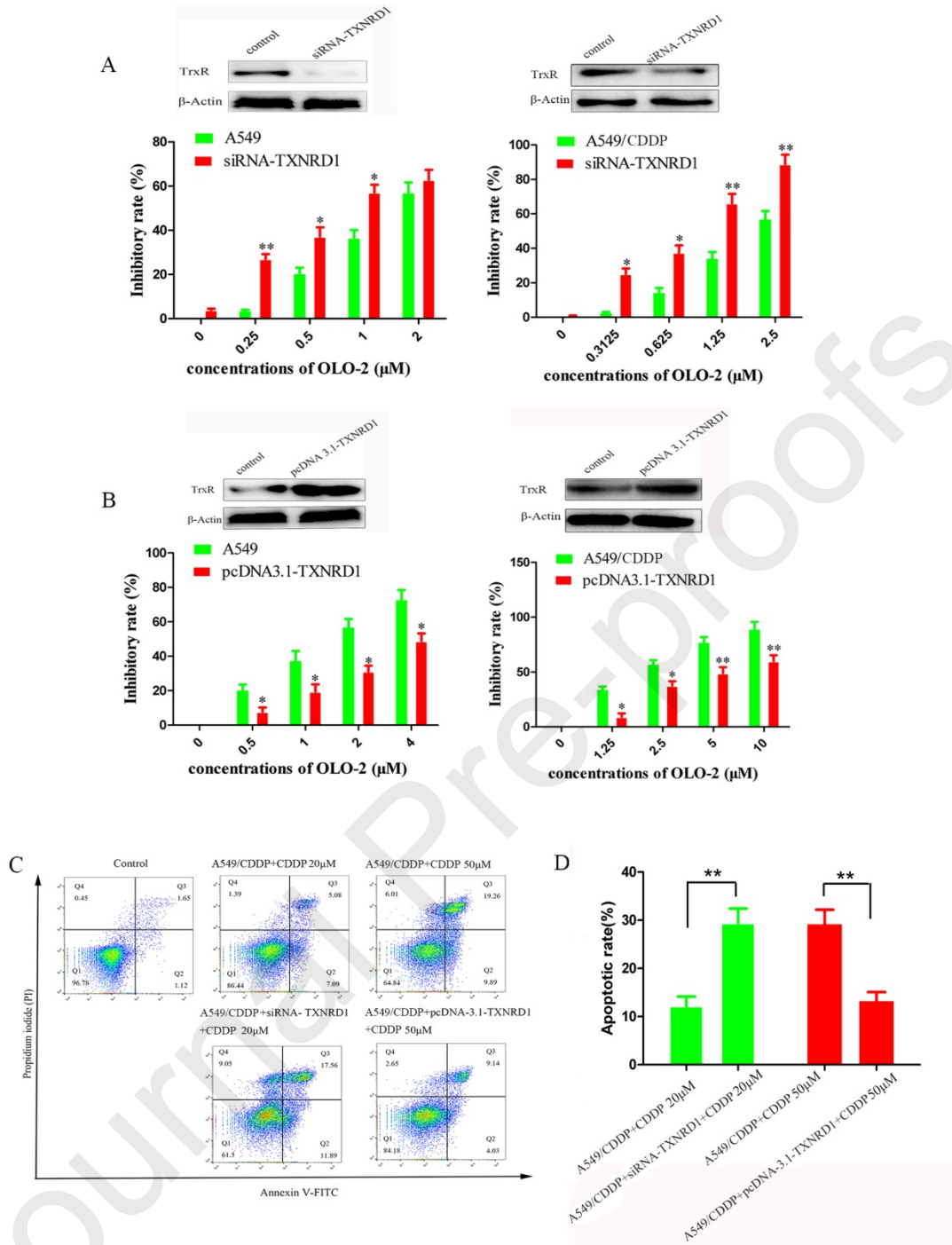


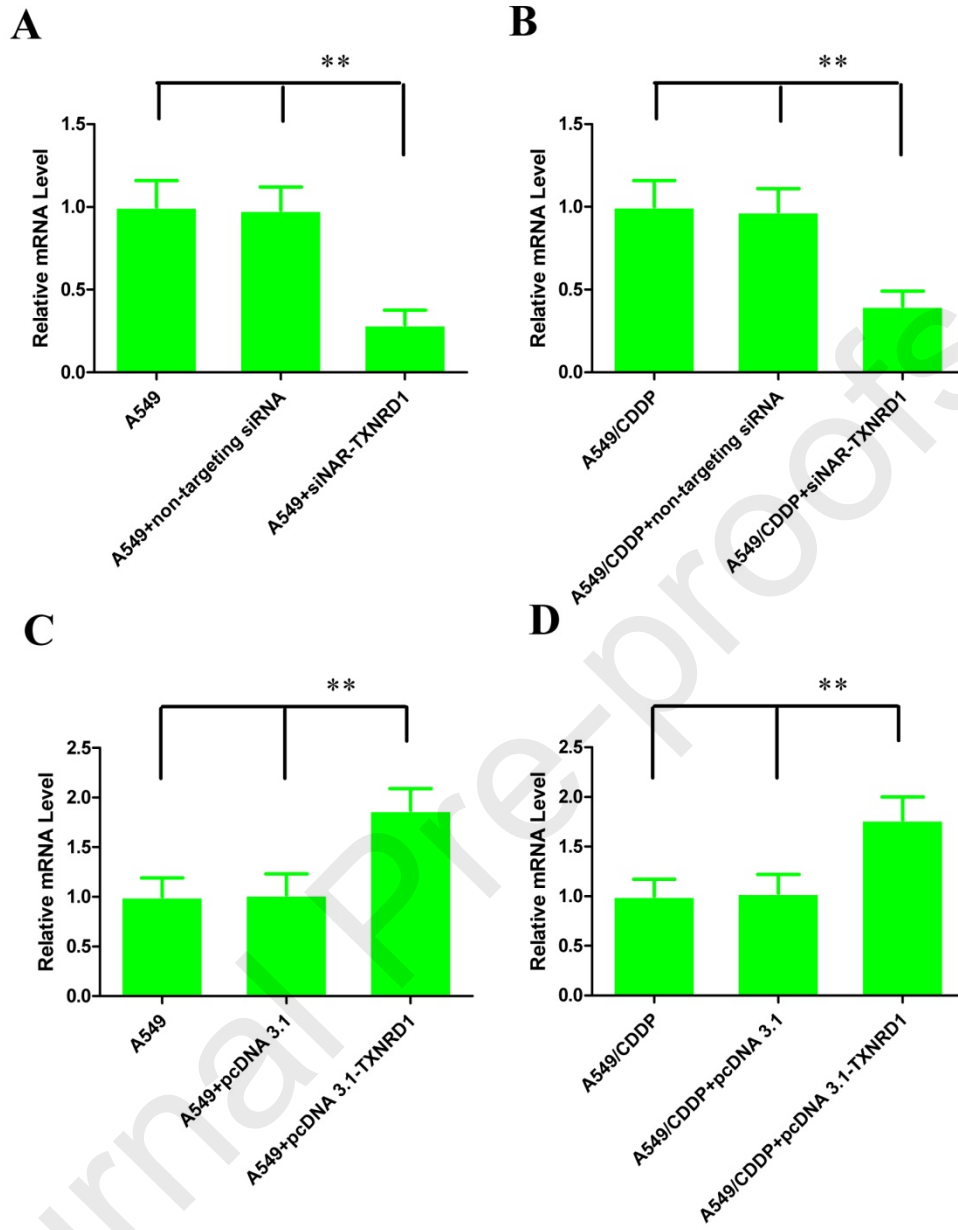


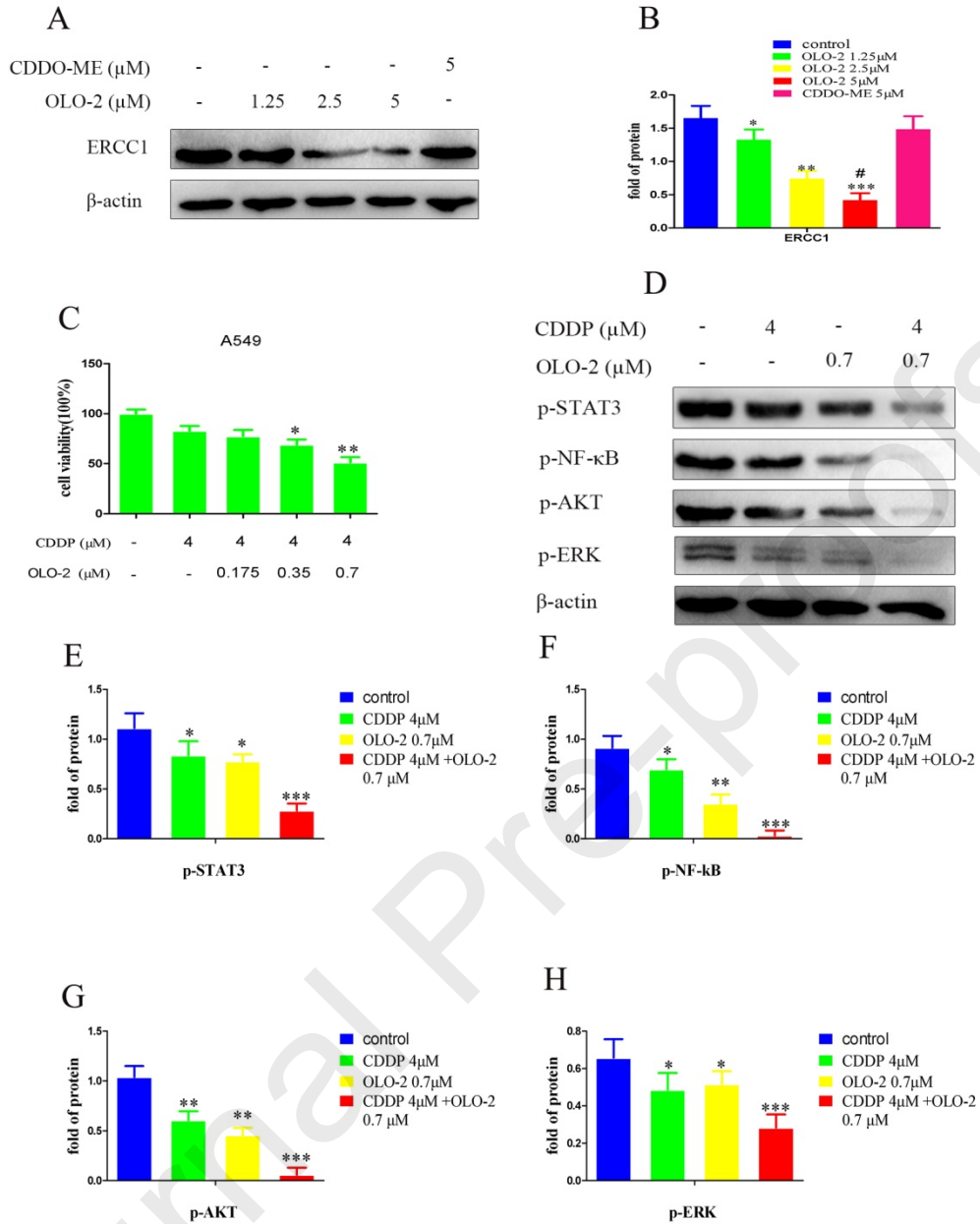












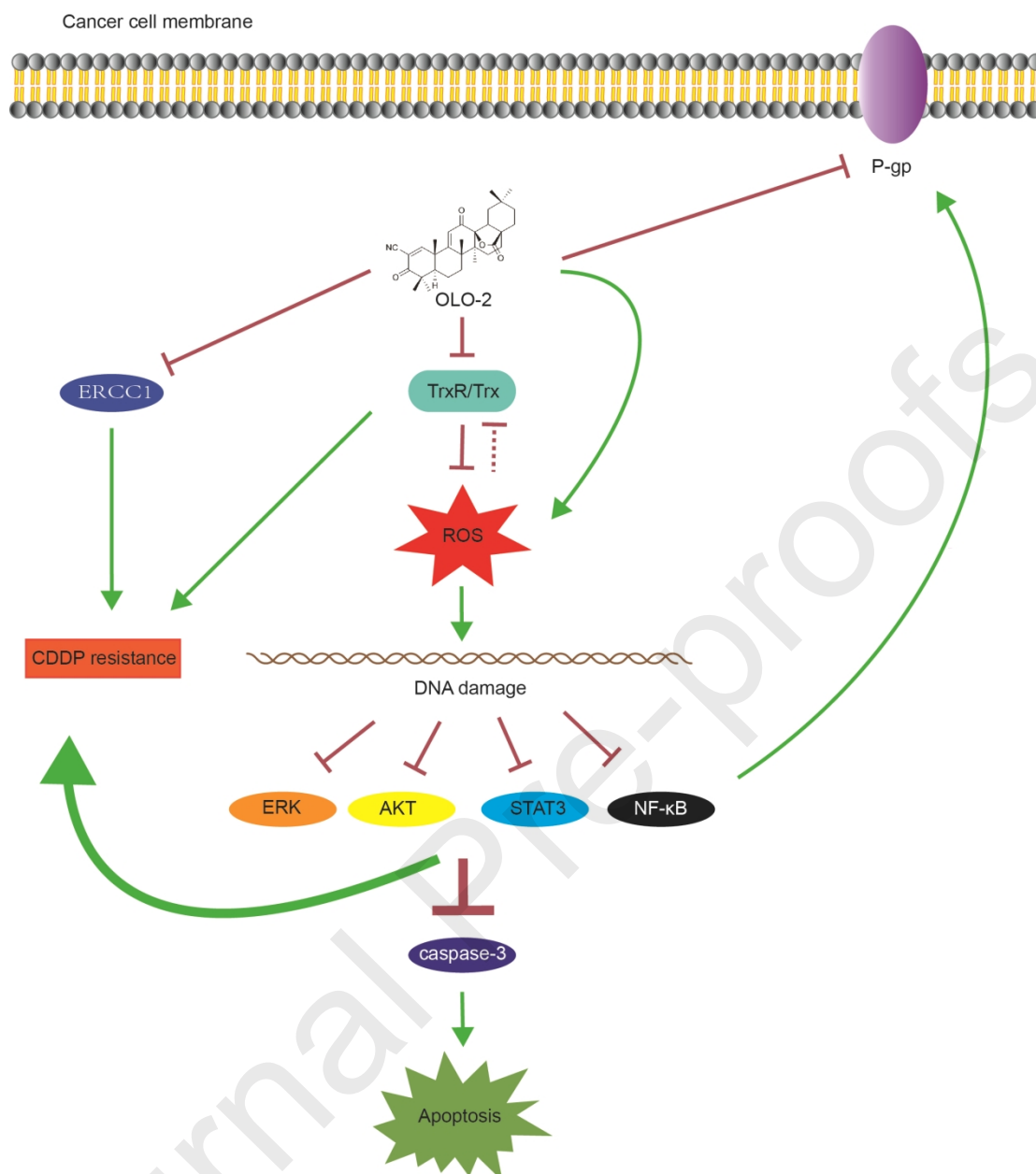


Table 1

The IC_{50} values of OLO-2, CDDO-ME and CDDP in human lung adenocarcinoma cell lines and human bronchial epithelial cell line HBE.

compounds	$IC_{50}(\mu M)^a$				
	A549	SPC-A-1	LTEP-a-2	A549/CDDP	HBE
OLO-2	1.96±0.41 ^b	3.02±0.53 ^b	2.80±0.66 ^b	2.39±0.56 ^b	9.07±1.26
CDDO-ME	2.51±0.37 ^b	3.36±0.58 ^b	2.71±0.47 ^b	4.68±0.78 ^b	8.16±0.68
CDDP	8.87±1.05 ^b	16.17±1.45 ^b	15.56±1.26 ^b	48.67±3.07 ^b	11.78±1.78

^aThe values of IC_{50} for each compound were calculated from three independent experiments and expressed as mean±SD. ^b $P < 0.05$ as compared to HBE cells.

Table 2.

OLO-2 inhibits TrxR activity in cell-free and cellular assays

compounds	in cell-free assay IC ₅₀ (μ M) ^a	in cellular assay IC ₅₀ (μ M) ^b	
		A549	A549/CDDP
OLO-2	0.95 \pm 0.11 ^c	4.49 \pm 0.51 ^c	3.14 \pm 0.32 ^c
CDDO-ME	2.71 \pm 0.29	13.12 \pm 1.12	13.39 \pm 1.43

^aThe TrxR inhibitory activity of OLO-2 in cell-free assay was detected by DTNB assay as depicted in the **Materials and methods**. ^b Thioredoxin Reductase Assay Kit was used to detect the activity of TrxR. ^c $P < 0.05$ as compared to CDDO-ME. Data are representatives of three independent experiments.

Table 3

compounds	concentration (μ M)	luminescence (RLUs) ^a
untreated	0	512236 \pm 18356
verapamil	200	417889 \pm 17919*
Na ₃ VO ₄	200	601760 \pm 14882**
OLO-2	40	587129 \pm 12772*

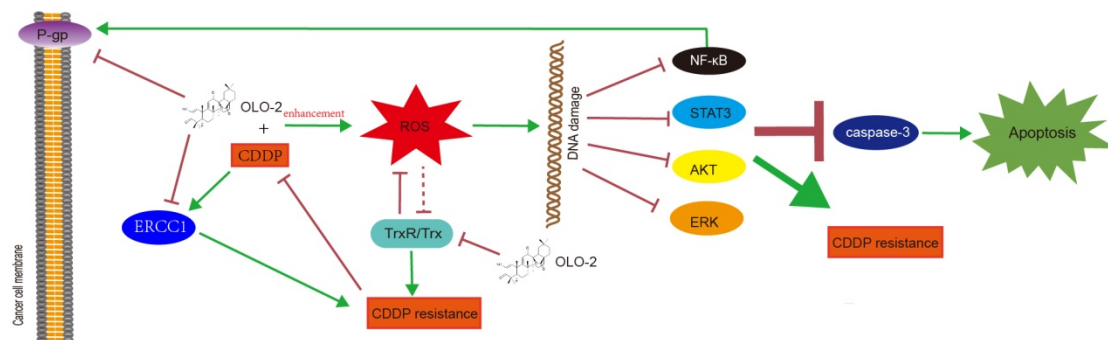
^aRelative light units (RLUs) symbolize the levels of ATP in the samples, and are contrary to the activity of P-gp-ATPase. Data are representatives of three independent experiments. * $P < 0.05$, ** $P < 0.01$ as compared to the untreated group.

Table 4

The IC₅₀ values of doxorubicin, vincristine and paclitaxel in human lung multidrug-resistant (A549/CDDP) non-small cell lung cancer cell lines and its parental A549 cell line.

compounds	IC ₅₀ (nM) ^a	
	A549	A549/CDDP
doxorubicin	11.38 \pm 1.41	577.89 \pm 65.12 ^b
vincristine	141.76 \pm 7.64	2128.75 \pm 151.78 ^b
paclitaxel	96.79 \pm 8.26	3787.92 \pm 261.82 ^b

^aThe values of IC₅₀ for each compound were calculated from three independent experiments and expressed as mean \pm SD. ^b $P < 0.001$ as compared to A549 cells.



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