

Stimulation of the Estrogen Axis Induces Epithelial–Mesenchymal Transition in Human Salivary Cancer cells

TOMOKI SUMIDA¹, AKIKO ISHIKAWA² and YOSHIHIDE MORI¹

¹Section of Oral and Maxillofacial Surgery, Division of Maxillofacial Diagnostic and Surgical Sciences, Faculty of Dental Science, Kyushu University, Fukuoka, Japan;

²Department of Oral and Maxillofacial Surgery, Ehime University Graduate School of Medicine, Shitsukawa, Toon, Japan

Abstract. *Background:* Salivary gland cancer is a common type of head and neck cancer characterized by occasional deep invasion and lung metastasis. The precise role of sex steroid hormones in salivary gland cancer is unclear. To address this issue, we investigated whether the estrogen axis modulates salivary adenocarcinoma (SAC) and whether hormone therapy can be an effective treatment. *Materials and Methods:* The estrogen receptor (ER) was overexpressed in HSG human SAC cells that lack endogenous ER and the cells were treated with and without 17 β -estradiol (E₂). *Results:* E₂ enhanced malignant phenotypes. Moreover, E₂ treatment reduced E-cadherin expression, while increasing that of N-cadherin, vimentin, and inhibitor of differentiation 1 proteins that are associated with the epithelial–mesenchymal transition. Cell invasion was enhanced through activation of matrix metalloproteinase-9. *Conclusion:* These results indicate that hormone therapy used in breast cancer may also be effective for ER-positive SAC.

Estrogen receptor (ER), a sex steroid hormone receptor, is intimately associated with cancer of the female reproductive organs (1, 2). ERs are steroid receptors located in the cytoplasm and on the nuclear membrane. Human, mouse, rat, dog, and cat ER α present more than 90% similarity, but ER α structure may differ among species. Estrogen can be an agonist and antagonist depending on its target organ (3).

Correspondence to: Tomoki Sumida, Section of Oral and Maxillofacial Surgery, Division of Maxillofacial Diagnostic and Surgical Sciences, Faculty of Dental Science, Kyushu University, 3-1-1, Maidashi, Higashi-ku, Fukuoka, 812-8582, Japan. Tel: +81 926426452, Fax: +81 926426392, e-mail: tomoki94530@gmail.com

Key Words: 17 β -Estradiol, epithelial–mesenchymal transition, AKT, estrogen receptor, hormone therapy, MMP9, salivary adenocarcinoma.

Estrogen binds to ERs, inducing conformational change and downstream cascades. While ERs are known to be expressed in tissues of the female reproductive tract and breast, recent studies indicate that ERs are also expressed in other tissues such as the bone, brain, liver, colon, skin, and salivary gland (4). Therefore, ER was investigated as a potential target in other organs such as the prostate, colon, lung, and stomach (5). ER influences many biological processes, not only in women, but also in men.

Head and neck malignancies, especially those of the oral cavity, account for about 3% of all cancer based on long-term studies (6). Salivary gland cancer (SGC) is the most dominant type of cancer after squamous cell carcinoma (6). SGC is known to morphologically mimic breast tumors with respect to histology and steroid hormone receptor status (7). Salivary adenocarcinoma (SAC) is among the common malignant SGC types, with an aggressive nature. Unfortunately, only few cell lines have been established from salivary cancer. We possess four cell lines of salivary cancer origin, but none of them expresses ERs. However, it was reported that ER α is expressed at higher levels in high-grade malignant SGCs than in low-grade malignant and benign SGCs (8).

Therefore, in this study, we transfected a SAC cell line with ER α and used this cell line to determine whether the estrogen–ER axis is functional in human SAC cells.

Materials and Methods

Cell culture. Human HSG cells were established from an adenocarcinoma of the submandibular gland (9) and were a generous gift from Professor Sato (Tokushima University, Tokushima, Japan). The human breast cell line, T47D, was obtained from the American Tissue Culture Collection (Manassas, VA, USA) and used as a control like. Cells were cultured in RPMI-1640 (Sigma-Aldrich, St. Louis, MO, USA) supplemented with 5% charcoal-stripped fetal bovine serum (FBS) at 37°C in the presence of 5% CO₂.

Transfection of HSG cells with ER. The pSG5-ER plasmid encoding human ER α was a gift from Professor P. Chambon (Institute of Genetics and Molecular and Cellular Biology, Strasbourg, France). The pBK-CMV vector (Stratagene, La Jolla, CA, USA) containing the neomycin resistance gene was co-transfected with pSG5-ER into HSG cells using Lipofectamine Plus reagent (Life Technologies, Carlsbad, CA, USA). Neomycin-resistant clones were selected with medium containing G418. Cells co-transfected with empty pSG5 and pBK-CMV vectors served as controls. HSG cells expressing ER α were pooled and after assessing ER α expression levels, clones with different expression levels of ER α were produced.

Chemical treatment. 17 β -Estradiol (E₂) was obtained from Sigma-Aldrich and prepared as a 10-mM stock solution in ethanol. For most experiments, E₂ was used at a concentration of 10 nM in 10 ml culture medium for a final ethanol concentration of 0.1%. Control cells were treated with 0.1% ethanol only. Cells were treated with ethanol or E₂ (10 nM) once daily for 2 days.

Western blot analysis. Cells were lysed in 2 \times Laemmli buffer and stored at -70°C. Protein concentration was determined using the DC Protein Assay kit (Bio-Rad, Hercules, CA, USA). Samples (20-30 μ g of total protein) were separated by sodium dodecyl sulfate-polyacrylamide gel electrophoresis and transferred to polyvinylidene difluoride membranes (Hybond P; Amersham Biosciences, Little Chalfont, UK). Membranes were blocked for 1 h at room temperature with Tris-buffered saline with Tween-20 (20 mM Tris, 137 mM NaCl, 3.8 mM HCl, and 0.1% Tween-20) containing 5% nonfat milk, and blots were probed with anti-ER α (EP1; DAKO, Glostrup, Denmark), anti-protein kinase B (AKT, 610860; BD Biosciences Pharmingen, San Diego, CA, USA), anti-pAKT (Thr308) (558275; BD Biosciences Pharmingen), anti-pAKT (Ser473) (560404; BD Biosciences Pharmingen), anti-E-cadherin (HECD-1; Abcam, Cambridge, UK), anti-N-cadherin (32; BD Biosciences, San Jose, CA, USA), anti-vimentin (V9; DAKO), anti-inhibitor of differentiation 1 (ID1) (Z-8; Santa Cruz Biotechnology, Santa Cruz, CA, USA), anti-matrix metalloproteinase 9 (MMP9) (ab35326; Abcam plc), or anti-actin (C4; Chemicon International, Temecula, CA, USA) for 1 h. The membranes were then washed and incubated with a secondary antibody (either goat anti-rabbit or anti-mouse IgG-horseradish peroxidase) (Santa Cruz Biotechnology, Santa Cruz, CA, USA) overnight, washed again, and developed using enhanced chemiluminescence with the Amersham ECL-Plus kit according to the manufacturer's instructions.

Cell proliferation assay. After incubation of HSG cells for 24 h with E₂ (10 nM) or ethanol, cell proliferative ability was determined by cell counting. Cells were digested with trypsin-ethylenediaminetetra-acetic acid at 37°C for 5 min. Next, 8 ml of conditioned medium containing 5% FBS was added to the cells and the cells were collected. Then, 0.5 ml of the supernatant was diluted with 9.5 ml of balanced electrolyte solution. The cell number was determined by particle counting and analyzed using a Multisizer™ 3 system (Beckman Coulter, Brea, CA, USA). Assays were performed in triplicate and the results were averaged.

Boyden chamber invasion assay. Invasion assays were performed in modified Boyden chambers with 8- μ m-pore filter inserts for 24-well plates (Collaborative Research, Waltham, MA, USA). The filters were coated with 10-12 μ l of ice-cold Matrigel (Collaborative

Research). Cells (40,000 cells/well) were added to the upper chamber in 200 μ l of serum-free medium. The lower chamber was filled with 300 μ l of conditioned medium from fibroblasts. After incubation for 20 h with E₂ (10 nM) or ethanol, the HSG-ER cells were fixed with 2.5% glutaraldehyde and stained with 0.5% toluidine blue in 2% Na₂CO₃. Cells that remained in the Matrigel or attached to the upper side of the filter were removed with cotton tips. Cells on the lower side of the filter were counted under a light microscope. Assays were performed in triplicate or quadruplicate and the results were averaged.

Zymography. Proliferating HSG cells (1 \times 10⁶ cells in 100-mm dishes) were transferred to serum-free medium for 2-3 days, after which the medium was replaced with 10 ml of fresh serum-free medium. Forty-eight hours later, the conditioned medium was collected and concentrated 10- to 15-fold using 10 kDa cutoff filters (EMD Millipore, Darmstadt, Germany). The concentrated medium was analyzed using gelatin substrate gels. Briefly, gels consisted of 8-10% (v/v) polyacrylamide and 3 mg/ml gelatin (Sigma-Aldrich). Concentrated conditioned medium was mixed with non-reducing Laemmli sample buffer and incubated at 37°C for 15 min. After electrophoresis, the gels were incubated for 1 h in 2.5% (v/v) Triton™ X-100 at room temperature, followed by 24-48 h in substrate buffer [100 mM Tris-HCl (pH 7.4) and 15 mM CaCl₂]. The gels were stained with Coomassie Blue for 30 min and destained with 30% methanol/10% acetic acid (v/v). E₂ (10 nM) or ethanol was also used in this experiment.

Statistical analysis. Statistical comparisons were performed using the Wilcoxon signed-rank test. *p*-Values of less than 0.05 were considered statistically significant. All statistical tests were performed using Statcel2 software (Statcel2, OMS, Tokyo, Japan).

Results

ER overexpression in HSG cells. HSG cells were transfected with a vector encoding ER α . Twenty four transfectants were established and screened by western blotting. T47D cells expressing human ER were used as positive controls in this experiment. We selected the HSG transfectant that expressed ER to a level similar to that of T47D cells for the subsequent experiments (Figure 1). HSG-ctl transfected with two empty vectors did not express ER.

Effect of E₂ on cell proliferation and expression of AKT of HSG cells. Treatment with E₂ (10 nM) for 24 h significantly enhanced the proliferation of HSG-ER cells when compared to that of ethanol-treated cells (*p*<0.01) (Figure 2A).

Western blotting results indicated that E₂ treatment induced the phosphorylation of AKT on residues Thr308 and Ser473 in HSG-ER cells (Figure 2B). No effect on proliferation and AKT phosphorylation in HSG-ctl cells was observed after E₂ treatment (data not shown).

Changes in the expression of epithelial-mesenchymal transition (EMT) markers and cell morphology in E₂ or ethanol treated HSG-ER cells. We next investigated whether E₂ modulated the

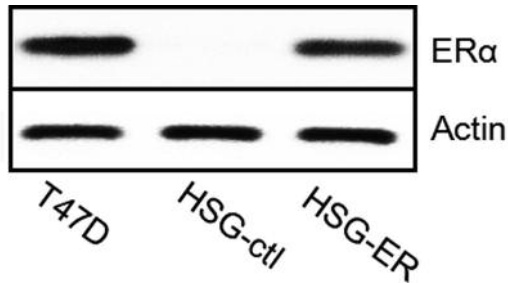


Figure 1. Estrogen receptor (ER) overexpression in ER-deficient HSG cells. Actin served as a loading control. These HSG-ER cell populations were used for further experiments. HSG-ctl cells were transfected with an empty vector.

expression of genes known to be up-regulated (N-cadherin, vimentin, and ID1) or down-regulated (E-cadherin) during EMT. E-Cadherin expression decreased whereas that of N-cadherin, vimentin and ID1 increased in E_2 -treated HSG-ER cells when compared with ethanol-treated cells (Figure 3A).

Moreover, the cell morphology drastically differed between E_2 - and ethanol-treated HSG-ER cells (Figure 3B). Ethanol-treated cells had a more flattened appearance and formed monolayers, while E_2 -treated cells grew in a disorderly fashion and a large fraction of the cells formed multilayers.

There was no effect of E_2 treatment on gene expression or cell morphology in HSG-ctl cells (data not shown).

Effect of E_2 treatment on cell invasion and MMP9 activity. Next, we compared the invasive phenotype of HSG-ER cells upon treatment with E_2 and ethanol using the Boyden chamber invasion assay. Invasiveness was significantly enhanced in E_2 -treated HSG-ER cells when compared to that of ethanol-treated cells ($p < 0.01$) (Figure 4A).

Accordingly, the expression of MMP9, one of the major gelatinases secreted by aggressive cancer cells, was also induced in E_2 -treated HSG-ER cells when compared with ethanol-treated cells (Figure 4B).

Discussion

The prognosis of aggressive SGC is poor and the only reliable treatment is surgery because SGCs a relatively rare and heterogeneous group of tumors with variable pathological and phenotypic characteristics (10). New treatment modalities are urgently needed.

A previous report indicated that ERβ inhibits the migration and invasion of breast cancer cells and up-regulated E-cadherin expression in an ID1-dependent manner (11). Sometimes, ERβ, in contrast to ERα, does not act as an oncogene. High ERβ expression is associated with a

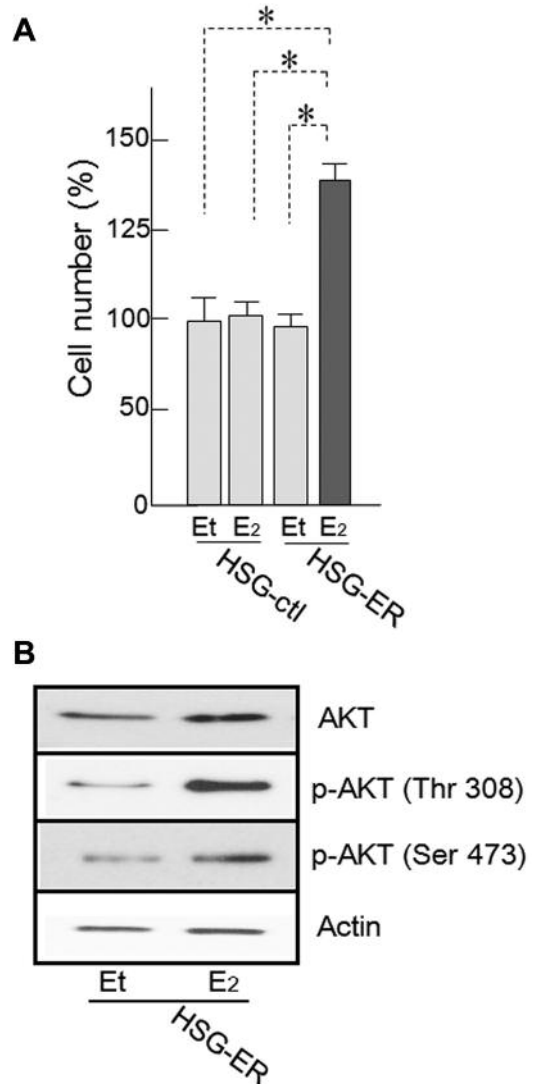


Figure 2. Effect of 17β -estradiol (E_2) treatment on HSG-estrogen receptor (ER) cell proliferation. A: HSG cell proliferation was enhanced by E_2 treatment. Treatment with 10 nM E_2 for 24 h significantly enhanced the proliferation of HSG-ER cells and HSG-ctl cells ($*p \leq 0.01$). B: Protein kinase B (AKT) phosphorylation was also up-regulated. Western blotting indicated that the quantity of phosphorylated (p)-AKT (Thr308, Ser473) increased. Et: Ethanol (vehicle).

significantly decreased risk of breast cancer in women with atypical hyperplasia (12). Moreover, while ERα is a prognostic marker of breast cancer, ERβ is not. (13). ERα is an oncogenic transcription factor and treatment with 4-hydroxytamoxifen is well established (14, 15).

The proliferation of HSG cells overexpressing ERα was up-regulated by E_2 treatment, indicating, as far as we are aware for the first time, that the E_2 -ERα axis is functional in this experimental system. This increase in proliferation was

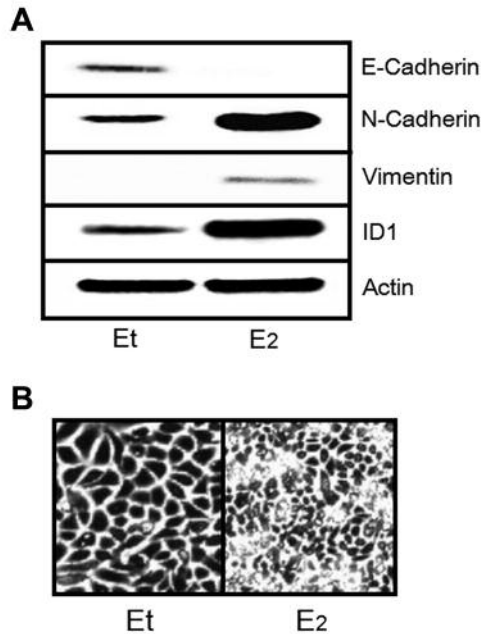


Figure 3. A: Expression profiles of proteins associated with the epithelial–mesenchymal transition are presented. B: The change in HSG-estrogen receptor (ER) cell morphology after E₂ administration was also observed. Et: Ethanol (vehicle).

accompanied by AKT phosphorylation. Similar results were obtained in different breast cancer cells expressing ER α (16), and the up-regulation of cyclin D1 was also mentioned, explaining the effect of E₂ on cell proliferation. ER α -dependent AKT activation was previously reported (17, 18, 19). Thus, this pathway might be the main signaling pathway underlying the proliferation of SGC cells. Moreover, E₂ treatment affected cell morphology. Therefore, we also investigated the expression of genes associated with EMT. The results indicated that the expression of E-cadherin was down-regulated, while that of N-cadherin, vimentin, and ID1 was up-regulated by E₂ stimulation, consistent with the EMT process.

In addition, E₂ treatment significantly increased the invasive capacity of HSG-ER cells and up-regulated MMP9 expression. AKT is known to be associated with MMP9 up-regulation (20, 21). However, up-regulation of ID1 cannot be ignored in this study. ID1 can enhance tumor cell migration, which is associated with the secretion of MMP9 (22, 23). Moreover, ID1 is also associated with the EMT (24, 25).

A recent study reported that 66.7% of high-grade SGCs were positive for ER α , while only 20% of the low-grade lesions were ER α -positive (8). Another report mentioned that ER α -dependent protein kinase, CK2 α , regulates AKT expression and activation in oncogenesis (26). Taken together, these findings indicate that the E₂–ER α axis might be a target for the treatment of SGC.

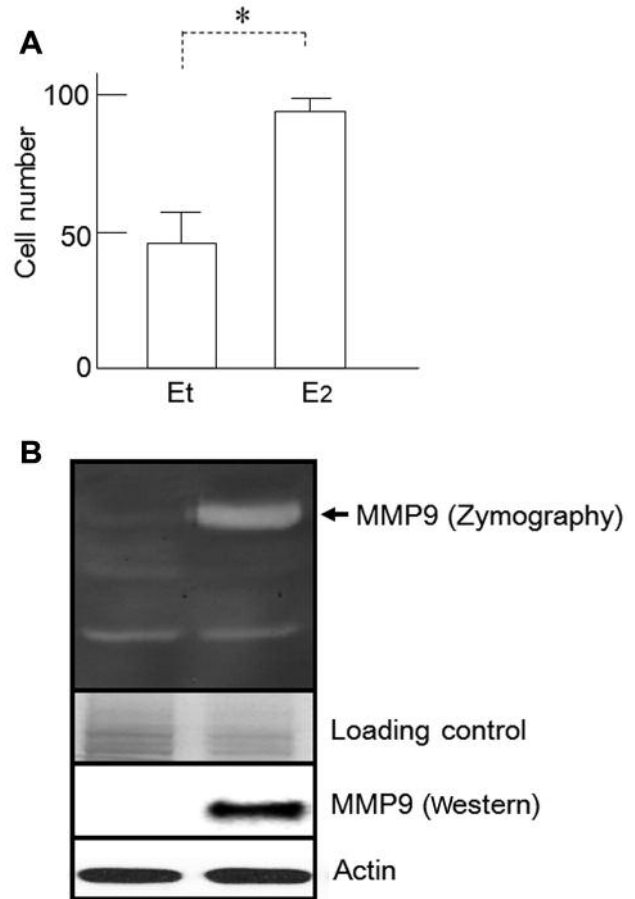


Figure 4. Effects of E₂ on HSG cell invasiveness and matrix metalloproteinase 9 (MMP9) secretion. A: Cell counts of HSG-estrogen receptor (ER) and HSG-ctl cell populations as determined by Boyden chamber invasion assays. **p*<0.01. B: Gelatin zymography indicated that MMP9 secretion by HSG-ER cells was increased by E₂ administration. Western blot analysis indicated that MMP9 protein was strongly up-regulated in HSG-ER cells after E₂ treatment. Et: Ethanol (vehicle).

In conclusion, our results clearly show that the E₂–ER α axis is functional in HSG-ER cells, and that E₂ treatment results in an increase in malignant phenotypes of these SGC cells such as increased proliferation and invasion. ER has recently garnered attention as a potential therapeutic target in malignancies arising from organs other than the female reproductive tract, such as gallbladder (27), prostate (28), lung (29), and hepatocellular (30) carcinomas. Future studies will be designed to determine whether 4-hydroxytamoxifen is an effective treatment approach for ER-positive SGCs.

Conflicts of Interest

None of the Authors has a financial conflict of interest to disclose in relation to the content of this article.

Acknowledgements

This work was supported by JSPS KAKENHI Grant Number 15K11257. The Authors gratefully acknowledge this financial support. They would also like to thank Editage (www.editage.jp) for English language editing.

References

- Groom AG and Younis T: Endocrine therapy for breast cancer prevention in high-risk women: clinical and economic considerations. *Expert Rev Pharmacoecon Outcomes Res* 16: 245-255, 2016.
- Sieh W, Köbel M, Longacre TA, Bowtell DD, deFazio A, Goodman MT, Høgdall E, Deen S, Wentzensen N, Moysich KB, Brenton JD, Clarke BA, Menon U, Gilks CB, Kim A, Madore J, Fereday S, George J, Galletta L, Lurie G, Wilkens LR, Carney ME, Thompson PJ, Matsuno RK, Kjær SK, Jensen A, Høgdall C, Kalli KR, Fridley BL, Keeney GL, Vierkant RA, Cunningham JM, Brinton LA, Yang HP, Sherman ME, García-Closas M, Lissowska J, Odunsi K, Morrison C, Lele S, Bshara W, Sucheston L, Jimenez-Linan M, Driver K, Alsop J, Mack M, McGuire V, Rothstein JH, Rosen BP, Bernardini MQ, Mackay H, Oza A, Wozniak EL, Benjamin E, Gentry-Maharaj A, Gayther SA, Tinker AV, Prentice LM, Chow C, Anglesio MS, Johnatty SE, Chenevix-Trench G, Whittmore AS, Pharoah PD, Goode EL, Huntsman DG, Ramus SJ. Sieh W, Köbel M and Longacre TA: Hormone-receptor expression and ovarian cancer survival: an Ovarian Tumor Tissue Analysis consortium study. *Lancet Oncol* 14: 853-862, 2013.
- Chamkasem A and Toniti W: Sequence to structure approach of estrogen receptor alpha and ligand interactions. *Asian Pac J Cancer Prev* 16: 2161-2166, 2015.
- Eyster KM: The estrogen receptors: an overview from different perspectives. *Methods Mol Biol* 1366: 1-10, 2016.
- Dey P, Barros RP, Warner M, Ström A and Gustafsson JÅ: Insight into the mechanisms of action of estrogen receptor β in the breast, prostate, colon, and CNS. *J Mol Endocrinol* 51: T61-74, 2013.
- Mohtasham N, Saghravanian N, Goli M and Kadeh H: Oral Non Squamous Cell Malignant Tumors in an Iranian Population: a 43-year Evaluation. *Asian Pac J Cancer Prev* 16: 8215-8220, 2015.
- Wick MR, Ockner M, Mills SE, Ritter JH and Swanson PE: Homologous carcinomas of the breasts, skin, and salivary glands. A histologic and immunohistochemical comparison of ductal mammary carcinoma, ductal sweat gland carcinoma, and salivary duct carcinoma. *Am J Clin Pathol* 109: 75-84, 1998.
- Kolude B, Adisa A, Adeyemi B and Lawal A: Immunohistochemical expression of oestrogen receptor- α and progesterone receptor in salivary gland tumours. *J Oral Pathol Med* 42: 716-719, 2013.
- Sato N, Kyakumoto S, Sawano K and Ota M: Proliferative signal transduction by epidermal growth factor (EGF) in the human salivary gland adenocarcinoma (HSG) cell line. *Biochem Mol Biol Int* 38: 597-606, 1996.
- Goyal G, Mehdi SA and Ganti AK: Salivary gland cancers: biology and systemic therapy. *Oncology* 29: 773-780, 2015.
- Zhou Y, Ming J, Xu Y, Zhang Y and Jiang J: ER β 1 inhibits the migration and invasion of breast cancer cells through up-regulation of E-cadherin in a Id1-dependent manner. *Biochem Biophys Res Commun* 457: 141-147, 2015.
- Hieken TJ, Carter JM, Hawse JR, Hoskin TL, Bois M, Frost M, Hartmann LC, Radisky DC, Visscher DW and Degnim AC: ER β expression and breast cancer risk prediction for women with atypias. *Cancer Prev Res* 8: 1084-1092, 2015.
- Liu J, Guo H, Mao K, Zhang K, Deng H and Liu Q: Impact of estrogen receptor- β expression on breast cancer prognosis: a meta-analysis. *Breast Cancer Res Treat* 156: 149-162, 2016.
- Yaacob NS, Kamal NM, Wong KK and Norazmi MN: Cell cycle modulation of MCF-7 and MDA-MB-231 by a sub-fraction of *Strobilanthes crispus* and its combination with tamoxifen. *Asian Pac J Cancer Prev* 16: 8135-8140, 2015.
- Manna S, Bostner J, Sun Y, Miller LD, Alayev A, Schwartz NS, Lager E, Fornander T, Nordenskjöld B, Yu JJ, Stål O and Holz MK: ERR α is a marker of tamoxifen response and survival in triple-negative breast cancer. *Clin Cancer Res* 22: 1421-1431, 2016.
- Sui JQ, Xie KP, Zou W and Xie MJ: Emodin inhibits breast cancer cell proliferation through the ER α -MAPK/AKT-cyclin D1/BCL-2 signaling pathway. *Asian Pac J Cancer Prev* 15: 6247-6251, 2014.
- Li Z, Yang SS, Yin PH, Chang T, Shi LX, Fang L and Fang GE: Activated estrogen receptor-mitogen-activated protein kinases cross talk confer acquired resistance to lapatinib. *Thorac Cancer* 6: 695-703, 2015.
- Jeon YW, Ahn YE, Chung WS, Choi HJ and Suh YJ: Synergistic effect between celecoxib and luteolin is dependent on estrogen receptor in human breast cancer cells. *Tumour Biol* 36: 6349-6359, 2015.
- Wang Q, Xia X, Deng X, Li N, Wu D, Zhang L, Yang C, Tao F and Zhou J: Lambda-cyhalothrin disrupts the up-regulation effect of 17 β -estradiol on post-synaptic density 95 protein expression via estrogen receptor α -dependent AKT pathway. *J Environ Sci* 41: 252-260, 2016.
- Li L, Zhang J, Xiong N, Li S, Chen Y, Yang H, Wu C, Zeng H and Liu Y: Notch-1 signaling activates NF- κ B in human breast carcinoma MDA-MB-231 cells via PP2A-dependent AKT pathway. *Med Oncol* 33: 33, 2016.
- Li W, Liu Z, Zhao C and Zhai L: Binding of MMP-9-degraded fibronectin to β 6 integrin promotes invasion via the FAK-Src-related Erk1/2 and PI3K/AKT/SMAD-1/5/8 pathways in breast cancer. *Oncol Rep* 34: 1345-1352, 2015.
- Sun W, Guo MM, Han P, Lin JZ, Liang FY, Tan GM, Li HB, Zeng M and Huang XM: ID-1 and the p65 subunit of NF- κ B promote migration of nasopharyngeal carcinoma cells and are correlated with poor prognosis. *Carcinogenesis* 33: 810-817, 2012.
- Lai X, Liao J, Lin W, Huang C, Li J, Lin J, Chen Q and Ye Y: Inhibitor of DNA-binding protein 1 knockdown arrests the growth of colorectal cancer cells and suppresses hepatic metastasis *in vivo*. *Oncol Rep* 32: 79-88, 2014.
- Stankic M, Pavlovic S, Chin Y, Brogi E, Padua D, Norton L, Massagué J and Benezra R: TGF- β -ID1 signaling opposes TWIST1 and promotes metastatic colonization via a mesenchymal-to-epithelial transition. *Cell Rep* 5: 1228-1242, 2013.
- Wahdan-Alaswad R, Harrell JC, Fan Z, Edgerton SM, Liu B and Thor AD: Metformin attenuates transforming growth factor beta (TGF- β) mediated oncogenesis in mesenchymal stem-like/claudin-low triple-negative breast Cancer. *Cell Cycle* 15: 1046-1059, 2016.

- 26 Das N, Datta N, Chatterjee U and Ghosh MK: Estrogen receptor alpha transcriptionally activates casein kinase 2 alpha: A pivotal regulator of promyelocytic leukaemia protein (PML) and AKT in oncogenesis. *Cell Signal* 2016 Mar 21 pii: S0898-6568(16)30061-4. doi: 10.1016/j.cellsig.2016.03.007.
- 27 Zhang LO, Zhang XD, Xu J, Wan Y, Qu K, Zhang JY, Wang ZX, Wei JC, Meng FD, Tai MH, Zhou L and Liu C: Potential therapeutic targets for the primary gallbladder carcinoma: estrogen receptors. *Asian Pacific J Cancer Prev* 14: 2185-2190, 2013.
- 28 Mishra S, Tai Q, Gu X, Schmitz J, Poullard A, Fajardo RJ, Mahalingam D, Chen X, Zhu X and Sun LZ: Estrogen and estrogen receptor alpha promotes malignancy and osteoblastic tumorigenesis in prostate cancer. *Oncotarget* 6: 44388-44402, 2015.
- 29 He Q, Zhang M, Zhang J, Chen Y, He J, Shen J, Liu Y, Zhong S, Jiang L, Yang C, Zeng Y, Guo M, Chen X, He J and Liang W: Correlation between epidermal growth factor receptor mutations and nuclear expression of female hormone receptors in non-small cell lung cancer: a meta-analysis. *J Thorac Dis* 7: 1588-1594, 2015.
- 30 Ahmed HH, Shousha WG, Shalby AB, El-Mezayen HA, Ismaiel NN and Mahmoud NS: Implications of sex hormone receptor gene expression in the predominance of hepatocellular carcinoma in males: role of natural products. *Asian Pac J Cancer Prev* 16: 4949-4954, 2015.

Received April 9, 2016

Revised May 12, 2016

Accepted May 17, 2016