

Blocking 17 β hydroxysteroid dehydrogenase type 1 in endometrial cancer: a potential novel endocrine therapeutic approach

G Konings (NL) [1], K Cornel (NL) [2], S Xanthoulea (NL) [3], B Delvoux (NL) [4], M Skowron (DE) [5], L Kooreman (NL) [6], P Koskimies (FI) [7], C Krakstad (NO) [8], H Salvesen (NO) [9], K van Kuijk (NL) [10], Y Schrooders (NL) [11], M Vooijs (NL) [12], A Groot (NL) [13], M Bongers (NL) [14], R Kruitwagen (NL) [15], A Romano (NL) [16]

Context: Type 1 17 β hydroxysteroid dehydrogenase (17 β HSD-1), responsible for generating active 17 β estradiol (E2) from low-active estrone (E1), is over-expressed in endometrial cancer (EC) thus implicating an increased intra-tissue generation of E2 in this estrogen-dependent condition.

Objective: Explore the possibility to inhibit 17 β HSD-1 and impair the generation of E2 from E1 in EC for potential therapeutic purposes. Various in vitro, in vivo and ex vivo models were used.

Methods and Patients: We generated EC cell lines derived from the well-differentiated endometrial adenocarcinoma Ishikawa cells and expressing levels of 17 β HSD-1 similar to human tissues (Ishi-HSD1). High-performance-liquid-chromatography (HPLC) was used to measure the 17 β HSD-1 activity in cell free assay. Estrogen dependent growth and the ability to inhibit 17 β HSD-1 activity were assessed in a colony formation assay and in vivo using the chicken chorioallantoic membrane assay (CAM). Two retrospective EC patient cohorts were used to test inhibition (HPLC) and to determine 17 β HSD-1 expression (RT-PCR) in paired primary/metastatic lesions.

Results: Using Ishi-HSD1 cells, E1 to E2 conversion and 17 β HSD-1 activity were blocked by a specific 17 β HSD-1 inhibitor in cell-free assay followed by HPLC analysis. In vitro, E1 administration elicited colony formation similar to E2, and this was impaired by 17 β HSD-1 inhibition. In vivo, tumours grafted on the CAM demonstrated that E1 upregulated the expression of the estrogen responsive cyclin A similar to E2, which was impaired by 17 β HSD-1 inhibition. Neither in vitro nor in vivo effects of E1 were observed using 17 β HSD-1 negative cells (negative control). Using a patient cohort of 52 primary ECs, we demonstrated the presence of 17 β HSD-1 enzyme activity, which was inhibited using the 17 β HSD-1 inhibitor by over 90% in more than 45% of ECs. Since drug treatment is generally indicated for metastatic/recurrent and not primary tumour, we next demonstrated the mRNA expression of the potential drug target, 17 β HSD-1, in metastatic lesions using a second cohort of 37 EC patients.

Conclusion: 17 β HSD-1 inhibition efficiently blocks the generation of E2 from E1 using various EC models. Further preclinical investigations and 17 β HSD-1 inhibitor development to make candidate compounds suitable for the first human studies are awaited.

[1] Maastricht University Medical Centre, [2] Maastricht University Medical Centre, [3] Maastricht University Medical Centre, [4] Maastricht University Medical Centre, [5] Heinrich Heine University Düsseldorf, [6] Maastricht University Medical Centre, [7] Forendo Pharma Ltd., [8] Haukeland University Hospital, [9] Haukeland University Hospital, [10] Maastricht University Medical Centre, [11] Maastricht University Medical Centre, [12] Maastricht University Medical Centre, [13] Maastricht University Medical Centre, [14] Maastricht University Medical Centre, [15] Maastricht University Medical Centre, [16] Maastricht University Medical Centre