

Alterations of the *INK4a/ARF* Locus in Human Intracranial Germ Cell Tumors¹Masayuki Iwato, Osamu Tachibana, Yasuo Tohma, Yasuaki Arakawa, Hisashi Nitta, Mitsuhiro Hasegawa, Junkoh Yamashita, and Yutaka Hayashi²

Department of Neurosurgery, Kanazawa University School of Medicine, 920-8641 Kanazawa [M. I., O. T., Y. T., Y. A., M. H., J. Y., Y. H.], and Department of Neurosurgery, Fukui Prefectural Hospital, 910-8526 Fukui [H. N.], Japan

Abstract

Little is known about the molecular mechanisms responsible for the development of intracranial germ cell tumors (ICGTs). Recently, we demonstrated that the balance of the p53-mdm2 interactions is disrupted in ICGTs. The *p14^{ARF}* product, a tumor suppresser gene located on the *INK4a/ARF* locus, acts as one of the major factors affecting p53-mdm2 interactions via its binding to mdm2 and the stimulation of mdm2 degradation. To evaluate whether genetic alterations of the *INK4a/ARF* locus occur in the genesis of ICGTs, we analyzed the *INK4a/ARF* genes in 21 ICGTs—10 pure germinomas and 11 nongerminomatous germ cell tumors. Fifteen (71%) of the 21 ICGTs displayed genetic alterations, including 14 homozygous deletions and 1 frameshift mutation. Furthermore, the frequency of the alterations was higher in pure germinomas [9 (90%) of the 10] than in nongerminomatous germ cell tumors [6 (55%) of the 11; $P = 0.09$]. These data suggested that *INK4a/ARF* gene abnormalities could play an important role in the genesis of ICGTs, especially in pure germinoma.

Introduction

ICGTs³ are rare neoplasms. The reported frequency of the tumor is 0.3–3.4% of primary intracranial tumors in Western countries and 2.1–12.7% in Japan (1–3), and their etiologies remain largely unknown. Studies on the histological nature of ICGTs revealed that ICGTs comprise five interrelated neoplasms: germinoma, teratoma, embryonal carcinoma, yolk sac tumor, and choriocarcinoma (2, 4). These five types can be divided into two groups, *i.e.*, pure germinoma and nongerminomatous germ cell tumors (teratoma, embryonal carcinoma, yolk sac tumor, and choriocarcinoma). Prognosis varies between these groups and is highly dependent on the response to chemotherapy or radiotherapy (2, 5, 6). In general, pure germinoma has a better prognosis than nongerminomatous germ cell tumors.

We recently reported that a disruption in the balance of the p53-mdm2 interactions could play an important role in the tumorigenesis of these neoplasms. *MDM2* gene amplification is found at a moderate frequency in ICGTs, whereas *TP53* gene mutations are very rare. Furthermore, mdm2 protein is overexpressed at a very high frequency in ICGTs (7).

Increasing knowledge on the molecular genetic mechanisms underlying many types of tumors has demonstrated a high frequency of genetic alterations in a single locus, *INK4a/ARF* (8–10). The *INK4a/*

ARF locus has two promoters and encodes two completely different proteins, p16^{INK4a} and p14^{ARF} (the mouse homologue is called p19^{ARF}; Refs. 10–12). By acting as an inhibitor of cyclin-dependent kinases, the p16^{INK4a} protein decreases the phosphorylation of retinoblastoma protein and results in cell cycle arrest at G₁ (13–15). The other encoded protein, p14^{ARF}, interacts with mdm2 and stimulates the degradation of mdm2 protein (16–19). The tumor-suppression function of p14^{ARF} is dependent upon the presence of wild-type p53 (20), and ARF-deficient mice tend to develop carcinoma and tumors of the nervous systems (21).

Molecular genetic findings of the ICGTs, namely, the disruption of the balance of p53-mdm2 interactions, led us to speculate that alteration in the *INK4a/ARF* locus could be a major factor affecting p53-mdm2 interaction, and the tumorigenesis of ICGTs.

To evaluate whether *INK4a/ARF* gene alterations play a role during ICGTs development, we examined a series of 21 ICGTs to identify mutations of both the *p16^{INK4a}* and *p14^{ARF}* genes.

Materials and Methods

Tissue Samples. Twenty-one intracranial germ cell tumor specimens (10 pure germinomas and 11 nongerminomatous germ cell tumors, including 4 mature teratomas, 3 immature teratomas, 2 choriocarcinomas, and 2 yolk sac tumors) were obtained at surgery. All of the cases were diagnosed and followed up at the Department of Neurosurgery, University Hospital, Kanazawa, Japan, between 1988 and 1998. The specimens were sent to the pathology laboratory for routine formalin fixation and paraffin embedding. All of the tumor specimens were examined microscopically, and only tumor tissue was dissected under microscope before phenolic DNA extraction.

Homozygous Deletion Analysis of the *INK4a/ARF* Genes. Homozygous deletions of the *INK4a/ARF* genes were analyzed by a differential PCR method (22). Because the exon2 is a common open reading frame of both of these genes and the deletion breakpoint is located between exon3 and exon 1 β (23), we coamplified a 204-bp fragment of *INK4a/ARF* from exon2 (primer: ex2–1) with a 134-bp fragment of the *APRT* gene. Primer sequences are listed in Table 1. One of each pair was labeled with indodicarbocyanine (Cy5) fluorescent dye (Pharmacia Biotech, Uppsala) at the 5' end. Differential PCR was performed in a final volume of 10 μ l containing 2 ng of DNA, 50 mM KCL, 1.5 mM of MgCL₂, 10 mM TRIS-HCL (pH 8.3), 200 μ M each dNTP, 0.1% gelatin, 5 pmol of each primer set, 10% DMSO, and 0.25 units of Taq polymerase. Initial denaturation at 94°C for 3 min was followed by 28 cycles of denaturation at 94°C for 40 s, annealing at 56°C for 55 s, and extension at 72°C for 55 s on a thermal cycler (thermal cycler 480, Perkin-Elmer, CA). A final extension step of 10 min at 72°C was used.

Mutation Analysis of the *INK4a/ARF* Genes. For all of the cases without *INK4a/ARF* gene homozygous deletion, all of the exons of each gene were analyzed by fluorescence-based SSCP and direct sequencing (24). PCR was performed in a final volume of 10 μ l containing 2ng DNA, 50 mM KCL, 1.5 mM MgCL₂, 10 mM TRIS-HCL (pH 8.3), 200 μ M each dNTP, 0.1% gelatin, 5 pmol of each primer set, 10% DMSO, and 0.25 units Taq polymerase. Initial denaturation at 94°C for 3 min was followed by 40 cycles of denaturation at 94°C for 40 s, annealing at 52°C to 60°C for 55 s, and extension at 72°C for 55 s on a thermal cycler (thermal cycler 480, Perkin-Elmer). A final extension step of 10 min at 72°C was used. PCR products were electrophoretically separated by 8 and 10% acrylamide gels (the methylene-bis-acrylamide:acrylamide ratio was 1:99) at 40 W with water cooling to a temperature of 16°C.

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² To whom requests for reprints should be addressed, at Department of Neurosurgery, Kanazawa University School of Medicine, 13-1 Takaramachi, 920-8641 Kanazawa, Japan. Phone: 81-76-265-2384; Fax: 81-76-234-4262; E-mail: yuh@ns.m.kanazawa-u.ac.jp.

³ The abbreviations used are: IGCT, intracranial germ cell tumor; APRT, adenine phosphoribosyltransferase; SSCP, single-strand conformational polymorphism; TGT, testicular germ cell tumor.

Once separated, the products were analyzed by an automated DNA sequencer (Pharmacia Biotech Model ALFred) running with a fragment analysis program (Pharmacia biotech AlleleLinks version 1.00).

The materials with variant SSCPs were reamplified and sequenced bidirectionally. Sequence analysis was carried out with a semiautomated sequencer (Model 373, Applied Biosystems, CA). The primers for SSCP analysis and direct sequencing are listed in Table 1.

Statistical Analysis. Two-tailed Fisher's exact test was carried out to compare the frequency of INK4a/ARF alterations in pure germinomas and nongerminomatous germ cell tumors.

Results

To determine the variation in the ratio of the PCR products of the INK4a/ARF genes to those of the APRT gene in normal DNA, we studied 60 genomic DNA samples from peripheral lymphocytes. The mean ratio and SD of the coamplified INK4a-ARF:APRT were 0.99 and 0.18, respectively. Cases exhibiting INK4a-ARF:APRT values lower than 4 SD below this mean ratio, i.e., <0.27, were considered to have INK4a/ARF gene deletions (Fig. 1). The deletions were considered to be homozygous because it was known that cases carrying hemizygous deletions should have INK4a-ARF values higher than half of the mean ratio, i.e., >0.45, or 3 SD below the mean value.

Homozygous deletions of the INK4a/ARF genes were detected in 9 (90%) of 10 patients with pure germinomas, and 5 (45%) of 11 patients with nongerminomatous germ cell tumors. Among the patients who carried no homozygous deletions, only one showed an altered migration pattern of SSCP. DNA sequencing confirmed an altered nucleotide sequence resulting in a frameshift mutation in this patient (Table 2).

Although there was no statistical correlation between the frequency of INK4a/ARF gene alterations and tumor types (pure germinomas and nongerminomatous germ cell tumors), pure germinomas tended to carry the INK4a/ARF gene alterations more frequently than the nongerminomatous germ cell tumors (P = 0.09).

Discussion

Little is known about the molecular mechanisms occurring in ICGTs. Although TP53 gene mutations are rare, some subsets of ICGTs carry the MDM2 gene amplification (7). This suggests that the disruption of the balance of p53-mdm2 interaction might play an important role in the tumorigenesis of ICGTs.

In this series, 9 (90%) of 10 pure germinomas and 6 (55%) of 11 nongerminomatous germ cell tumors exhibited INK4a/ARF gene alterations. The alterations in the ARF gene after the p53 degradation via the stabilized mdm2 could abrogate the normal balance of each molecule in the ARF-mdm2-p53 pathway. This could break down the

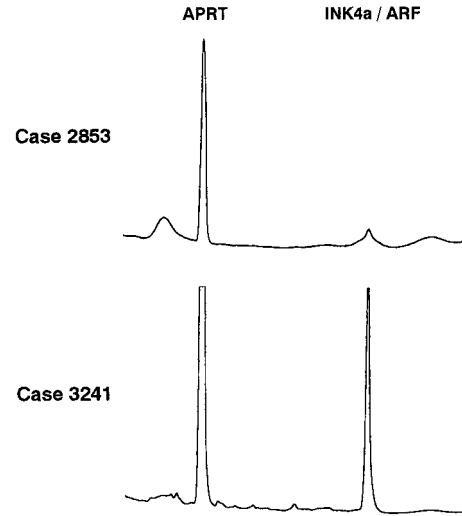


Fig. 1. Differential PCR-analysis for homozygous deletions of the INK4a/ARF genes. Representative cases with or without the INK4a/ARF gene homozygous deletions. Top, a pure germinoma with the INK4a/ARF gene homozygous deletion. Bottom, a pure germinoma with no evidence for deletion of the genes.

Table 2 INK4a/ARF genes alterations in intracranial germ cell tumors

Case no.	Age/Sex	Site	Diagnosis	Alteration
2665	16/M	P ^a	PG	HD
2832	16/F	S	PG	HD
2853	21/M	S	PG	HD
2962	16/M	P	PG	HD
2985	20/M	P	PG	HD
3241	19/M	P	PG	WT
3408	60/M	P	PG	HD
3437	18/M	P	PG	HD
3477	19/M	P	PG	HD
3573	7/M	P	PG	HD
3516	11/M	P	MT	WT
3378	15/M	P	MT	HD
2626	25/M	P	MT	WT
2633	15/M	P	MT	WT
2630	4/M	P	IT	HD
3384	5/M	P	IT	HD
3413	14/M	P	IT	WT
2577	10/F	P	YS	HD
3475	18/M	P	YS	INK4a: c226 insT / D76X ARF: c293 insT / R98fs → 160X
2591	12/M	H	CH	HD
3234	7/M	P	CH	WT

^a P, pineal region; S, supra sellar; H, hypothalamus; PG, pure germinoma; MT, mature teratoma; IT, immature teratoma; YS, york sac tumor; CH, choriocarcinoma; HD, homozygous deletion; WT, wild type.

G₁-S phase checkpoint and subsequently lead to cell proliferation. Thus, the high frequency of ARF gene alterations in ICGTs could confirm the mechanism of ICGTs tumorigenesis suggested above. Furthermore, another important pathogenesis of ICGTs in addition to the ARF alterations might be the INK4a alterations.

The higher frequency of INK4a/ARF alterations in pure germinomas (90%) compared with that in nongerminomatous germ cell tumors (55%) may help explain why pure germinomas are more sensitive to chemotherapy and/or radiotherapy than nongerminomatous germ cell tumors. In an earlier report (25), INK4a gene transfection and forced expression of p16^{INK4a} in the p16^{INK4a}-deficient cell line were found to increase the radiosensitivity of the cells. This is opposed to our findings, which suggested that pure germinoma, the more radiosensitive neoplasm, carried INK4a gene alterations. On the other hand, the abrogation of p53 function was found to increase the response to radiation in some types of neoplasms (26). This was consistent with our findings, which showed that the ARF alterations and subsequent abrogations of p53 function were more frequent in

Table 1 Oligonucleotide primers used for the analyses of the INK4a/ARF and APRT genes

Gene	Primers	Orientation	Sequence
INK4a/ARF	ex1B-1f	Forward	TCCCAGTCTGCAGTTAAGGG
	ex1B-1r	Reverse	ACCACGAAAACCCCTCACTCG
	ex1B-2f	Forward	TGCCGAGGTTCTTGGTGACC
	ex1B-2r	Reverse	GACTTTTCGAGGGCCTTTCC
	ex1A-f	Forward	GGGAGCAGCATGGAGCCG
	ex1A-r	Reverse	AGTCGCCCGCATCCCT
	ex2-1f	Forward	AGCTTCCTTCCGTCATGC
	ex2-1r	Reverse	GCAGCACCACAGCGTG
	ex2-2f	Forward	AGCCCAACTGCGCCGAC
	ex2-2r	Reverse	CCAGGTCCACGGGCAGA
	ex2-3f	Forward	TGGACGTGCGCATGC
	ex2-3r	Reverse	GGAAGCTCTCAGGGTACAAATTC
	ex3-f	Forward	CCGGTAGGGACGGCAAGAGA
	ex3-r	Reverse	CTGTAGGACCCTCGGTGACTGATGA
APRT	APRT-f	Forward	CAGGGAACACATTCCTTTGC
	APRT-r	Reverse	TGGGAAAGCTGTTTACTGCG

pure germinomas. In ICGTs, disorder in ARF-p53 pathway may overcome the INK4a-Rb pathway abrogation at the point of radiosensitivity.

ICGTs and TGTs may share similar cellular origins. Both types of tumors have the same molecular genetic abnormalities in *TP53* gene and *MDM2* genes (7, 27, 28). However, deletions or mutations in *INK4a/ARF* genes are rare in TGTs (29, 30). In contrast, in our study, a high frequency of *INK4a/ARF* gene deletions was demonstrated in ICGTs. In *ARF*-deficient mice, tumors of the nervous system are likely to emerge (21). The difference in the status of the *ARF* gene between ICGTs and TGTs may affect the site of germ cell tumor development.

The silencing of the *INK4a* gene by methylation at the promoter site has been reported in a variety of tumors (31). Recently, it has also been shown that the *ARF* gene is silenced by methylation at the *ARF*-specific promoter site in some types of cell lines, although not in natural tumors (32, 33). In our series of 21 ICGTs, cases without deletions or mutations in *INK4a/ARF* may carry a promoter site methylation. In the future, in addition to the analysis for genetic alterations, additional examinations for gene modifications of this type will be required to evaluate the biological features of p16^{INK4a} and p14^{ARF} in, and their influences on, ICGTs.

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