m^{6}A demethylase ALKBH5 promotes tumor cell proliferation by destabilizing

IGF2BPs target genes and worsens the prognosis of patients with non-small-cell

lung cancer

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Abstract

The modification of N^6-methyladenosine (m^{6}A) in RNA and its eraser ALKBH5, an

m^{6}A demethylase, play an important role across various steps of human carcinogenesis.

However, the involvement of ALKBH5 in non-small-cell lung cancer (NSCLC)

development remains to be completely elucidated. The current study revealed that the

expression of ALKBH5 was increased in NSCLC and increased expression of ALKBH5

worsened the prognosis of patients with NSCLC. *In vitro* study revealed that ALKBH5

knockdown suppressed cell proliferation ability of PC9 and A549 cells and promoted

G1 arrest and increased the number of apoptotic cells. Furthermore, ALKBH5

overexpression increased the cell proliferation ability of the immortalized cell lines.

Microarray analysis and western blotting revealed that the expression of CDKN1A

(p21) or TIMP3 was increased by ALKBH5 knockdown. These alterations were offset

by a double knockdown of both ALKBH5 and one of the IGF2BPs. The decline of

mRNAs was, at least partly, owing to the destabilization of these mRNAs by one of the

IGF2BPs. In conclusions, the ALKBH5–IGF2BPs axis promotes cell proliferation and

tumorigenicity, which in turn causes the unfavorable prognosis of NSCLC.

Keywords: Non-small-cell lung cancer (NSCLC), m^6A, ALKBH5, IGF2BPs, CDKN1A

(p21), TIMP3

Background

Lung cancer, the incidence of which has continued to increase annually,

remains the most frequently diagnosed cancer and leading cause of cancer-related death

worldwide (1). Considering the rapid improvement in the treatment of lung cancer,

particularly non-small-cell lung cancer (NSCLC), physicians now have several options

of personalized treatments targeting driver genes, such as EGFR mutations, ALK

rearrangements, ROS1 rearrangements, and BRAF mutations or combination therapies

comprising immunotherapy and anticancer drugs (2-6). However, despite the current

advancements in precision medicine, NSCLC still exhibits poor long-term prognosis

and high mortality rates owing to the rapid growth, metastasis, and infiltration of cancer.

Therefore, identifying effective therapeutic targets that inhibit such malignant behaviors

of NSCLC is urgently needed.

N^6-methyladenosine (m^{6}A), the most prevalent internal messenger RNA (mRNA)

modification, controls various mRNA functions. The m^{6}A sites, which are widely

distributed around the stop codons and 3′ untranslated regions (UTRs) of mRNAs,

presumably exist in precursor mRNAs (7). Recent m^{6}A transcriptome analysis revealed

that m^{6}A is predominantly present in the RRACU (R = A/G) consensus motif of

mammals (8). m^{6}A is reversibly catalyzed by a methyltransferase complex (writer) and

demethylase (eraser). Accordingly, the methyltransferase complex comprises

methyltransferase-like 3 and 14 (METTL3 and METTL14) with their cofactors Wilms

tumor 1-associated protein (WTAP), VIRMA (KIAA1429), and RNA-binding motif

protein 15 (RBM15) (9-12). Further, fat mass and obesity-related protein (FTO) and

AlkB homolog 5 (ALKBH5) have been identified as two eukaryotic demethylases that

oxidatively demethylate m^6A with α-ketoglutarate as a substrate and Fe (II) as a

coenzyme (13, 14). FTO is also involved in the demethylation of

$N^6,2'\text{-}O$-dimethyladenosine (m^6A_m) whereas there is no other RNA than m^6A that is

demethylated by ALKBH5 (15, 16). Moreover, m^6A-binding protein (reader protein),

which recognizes m^6A, is involved in numerous biological processes in an

m^6A-dependent manner. For instance, YT521-B homology (YTH) domain containing 1

(YTHDC1) and YTHDC2 promote alternative splicing and mRNA export from the

nucleus to the cytoplasm (17, 18); heterogeneous nuclear ribonucleoprotein G

(HNRNPG) alters RNA structures via RNA–protein interaction (19, 20); YTH domain

family1 (YTHDF1), YTHDF3, METTL3, and eukaryotic initiation factor3 (eIF3)

regulate translation efficiency (21-24); and insulin-like growth factor 2 mRNA-binding

proteins (IGF2BPs), YTHDF2, YTHDF3, and YTHDC2 alter mRNA stability (24-27).

Over the past few years, several researchers investigating the role of m^6A

erasers in malignant tumors have revealed that m^6A eraser proteins play a critical role in

oncogenesis. A number of previous studies have demonstrated that ALKBH5 exerts a

cancer-promoting effect in glioblastoma, osteosarcoma, colon cancer, ovarian cancer,

esophageal squamous cell carcinoma, endometrial cancer, and renal cell carcinoma

(28-34). In contrast, ALKBH5 has been reported to play a tumor-suppressing effect in

hepatocellular carcinoma and pancreatic cancer (35, 36). Several studies on lung cancer

have shown that FTO plays a cancer-promoting role through m^{6}A modification in lung

squamous cell carcinoma and adenocarcinoma (37-39), whereas ALKBH5 inhibits

NSCLC tumorigenesis by reducing YTHDFs-mediated YAP expression (40).

Conversely, ALKBH5 had also been found to promote NSCLC progression by reducing

TIMP3 stability (41) or stabilizing oncogenic drivers such as SOX2, SMAD7, and

MYC (42). Thus, the precise role of ALKBH5 in NSCLC tumorigenesis across various

conditions deserves further investigation.

Cell type and cell environment (e.g., during hypoxic conditions), as well as the

m^{6}A target gene and its recognition protein (reader), have been found to affect RNA

metabolism caused by ALKBH5 perturbation (43, 44). Therefore, m^{6}A-mediated gene

expression regulated by ALKBH5 could result in various consequences in cancer cells,

depending on the surrounding environment and other factors. Several studies regarding

m^{6}A have focused on specific genes in the specific contexts, with their results showing

that m^{6}A is involved in the mechanisms through which these specific genes are

regulated. However, in actual human cancers, ALKBH5 catalyzes specific m^{6}A of

numerous genes, which simultaneously alters several RNA and protein expressions

through RNA recognition by reader proteins, consequently causing numerous

interactions between them *in vivo*. As such, systematically clarifying the association

between m^6A modification and cancer development across each clinical and

pathological setting is important. Furthermore, elucidating the significance of m^6A

modification by ALKBH5 may facilitate the clinical usage of such molecules as

therapeutic targets. Therefore, the current study aimed to examine the role of m^6A

demethylase in NSCLC focusing on ALKBH5 and determine its association with

downstream targets, including "readers" and "target genes."

Methods

Immunohistochemistry

Resected NSCLC samples from Hamamatsu University School of Medicine and Seirei

Mikatahara General Hospital were collected and named as the HUSM cohort. Tissue

microarray (TMA) sections were analyzed using immunohistochemistry (IHC) as

previously described (45). Cores of insufficient quality or quantity were excluded from

the analysis. Antibodies for ALKBH5 (HPA007196, Atlas Antibodies, Stockholm,

Sweden) and FTO (Ab124892, Abcam, Cambridge, UK) were diluted at 1:400, whereas

those specific for EGFR E746-A750 deletion (#2085, D6B6, Cell Signaling Technology

[CST], Danvers, MA, USA) and EGFR L858R mutant (#3197, 43B2, CST) were

diluted at 1:100, followed by incubation at room temperature for 0.5 h. Protein

expression levels were then assessed using the H-score, which was calculated by

multiplying the percentage of stained tumor area (0%–100%) by the staining intensity

(scored on a scale of 0–3) to yield a value ranging from 0 to 300.

Analysis of publicly available datasets

We used the lung cancer database in the Kaplan–Meier plotter

(http://kmplot.com/analysis/index.php? p=service&cancer=lung) to analyze the

association between prognosis and ALKBH5 and FTO mRNA expression in NSCLC

cohorts. Data were downloaded on December 10, 2020. Kaplan–Meier curves for

overall survival (OS) were generated and stratified according to the median expression

of each mRNA. To assess the mRNA expression of ALKBH5 and FTO, data from the

Cancer Genome Atlas (TCGA) (NSCLC, Provisional) were downloaded from

cBioPortal (http://www.cbioportal.org/) on November 11, 2019. Expression data were

obtained in the form of RNA-seq by Expectation Maximization (RSEM).

Immunofluorescence analysis

Cells grown on coverslips were fixed with 4% paraformaldehyde and permeabilized

with 0.1% Triton X-100. After blocking with 5% bovine serum albumin in PBS (−) at

room temperature for 1 h, the cells were probed with primary antibodies against

ALKBH5 (HPA007196, Atlas Antibodies) and then incubated with a Goat anti-Rabbit

IgG (H + L) Cross-Adsorbed Secondary Antibody, Alexa Fluor 546 (#A-11010, Thermo

Fisher Scientific, Waltham, MA, USA). Nuclei were stained with ProLong® Gold

Antifade Reagent with DAPI (#8961, CST), after which the cells were imaged via

fluorescence microscopy using z-stack image reconstructions (BZ-9000; Keyence,

Osaka, Japan).

Cell lines and transient knockdown with siRNA

The human lung cancer cell lines H1299, H460, H2087, A549, ABC1, and H358 and

the human immortalized cell lines BEAS2B and HEK293 were obtained from Health

Science Research Resources Bank (Osaka, Japan) or the American Type Culture

Collection (Manassas, VA, USA). PC3 and PC9 lung cancer cells were purchased from

the Japanese Collection of Research Bioresources Cell Bank (Osaka, Japan) and

RIKEN BioResource Center (Tsukuba, Japan), respectively, whereas ACC-LC176 cells

were a kind gift from Dr. Takashi Takahashi (Nagoya University). RERF-LC-MS,

HLC-1, and LC-2/ad were kind gifts from Dr. Toshiro Niki (Tokyo University). Lung

cancer cell lines were cultured in RPMI1640 medium (R8758, Thermo Fisher

Scientific), whereas HEK293 cells were cultured in DMEM (D5796 MERCK,

Darmstadt, Germany) containing 10% (vol./vol.) fetal bovine serum (FBS), 100 IU/mL

penicillin G, and 100 µg/mL streptomycin. LHC9 (12680013, Thermo Fisher

Scientific) was also used as a medium for BEAS2B cells. Cells were maintained in a

5% CO_2 and 95% air incubator at 37□. Silencer Select Pre-designed siRNA for

ALKBH5 (siALKBH5: s29743, s29744, s29745, Thermo Fisher Scientific), FTO

(siFTO: s28147, s28148, s28149, Thermo Fisher Scientific), IGF2BP1 (siIGF2BP1:

s20916, s20917, Thermo Fisher Scientific), IGF2BP2 (siIGF2BP2: s20922, s20923,

Thermo Fisher Scientific), IGF2BP3 (siIGF2BP3: s20919, s20920, Thermo Fisher

Scientific), YTHDF2 (siYTHDF2: s28147, s28148, Thermo Fisher Scientific),

CDKN1A (siCDKN1A: s145, s147, Thermo Fisher Scientific), TIMP3 (siTIMP3:

s14147, s14148, Thermo Fisher Scientific), and Silencer Select Negative control (siNC:

4390843, Thermo Fisher Scientific) were purchased for transient knockdown. More

than two different sequences were used for one target gene to minimize off-target

effects. Cells were cultured for 24 h before transfection, after which they were

transfected with 15 nM of final siRNA concentrations using Opti-MEM (31985070,

Gibco, Dublin, Ireland) and Lipofectamine® 2000 (11668019, ThermoFisher). The cells

were then used for further assays at 48–96 h after transfection. When no siRNA sample

number was available, siRNA no. 1 (#1) and siRNA no. 3 (#3) were pooled for

ALKBH5 unless otherwise specified. siIGF2BP1, siIGF2BP2, siIGF2BP3, siYTHDF2,

siCDKN1A, and siTIMP3 were pooled for all transfections.

Generation of Retro-X Tet-On inducible cell lines overexpressing ALKBH5

The retroviral plasmid pRetroX-TetOne puro (634307, Clontech, Mountain View, CA,

USA) was amplified using NEB Stable competent *Escherichia coli* (high efficiency)

(C3040H, NEW ENGLAND BioLabs, Ipswich, MA, USA). The full-length ALKBH5

sequence (NM_017758), which was confirmed using Sanger sequencing, was subcloned

into pRetroX-TetOne puro vector using EcoRI and BglII restriction sites

(pRetroX-TetOne puro-ALKBH5). Retroviral supernatants were produced using the

GP2-293 packaging cell line (Clontech), in which pRetroX-TetOne puro empty vector

or pRetroX-TetOne puro-ALKBH5 were each cotransfected with the envelope vector

VSV-G using Xfect transfection reagent (Clontech). BEAS2B, HEK293, PC9, and A549

cells were transfected for 24 h using 4 µg/mL polybrene (H9268, Sigma-Aldrich, St.

Louis, MO, USA). Puromycin selection (0.5–1.5 µg/mL) began 48 h after transfection

and lasted for 3 days until all nontransfected cells had died. In subsequent experiments,

Retro-X cells were induced with 0.1–100 ng/mL of doxycycline (DOX) diluted in

culture media upon cell seeding for 24–96 h. Cells transfected with pRetroX-TetOne

puro-ALKBH5 with 100 ng/mL DOX were designated as ALKBH5-overexpressed

(OE) cells, whereas those infected without DOX were designated as negative control

(NC) unless otherwise noted.

RNA isolation and quantitative-polymerase chain reaction (qPCR)

Total RNA was extracted using the RNeasy Plus Mini Kit (#74136, QIAGEN, Hilden,

Germany) according to the manufacturer's instructions, with the total RNA

concentration calculated using Nanodrop (NanoDrop1000, Thermo Fisher Scientific).

cDNA was synthesized from 1 μg of total RNA using the ReverTra Ace qPCR RT

Master Mix (FSQ-201, TOYOBO) or SuperScript III Reverse Transcriptase (1080044,

Thermo Fisher Scientific) according to the manufacturer's instructions. qPCR reactions

were performed on a Step One Plus Real-Time PCR System (Applied Biosystems,

Thermo Fisher Scientific) using the THUNDERBIRD qPCR Mix (QPS-201, TOYOBO,

Osaka, Japan). The relative RNA expression levels were calculated using the ΔΔCt

method, with the levels normalized to glyceraldehyde 3-phosphate dehydrogenase

(GAPDH) mRNA. All amplicons were confirmed as a single product using agarose gel

visualization and/or melting curve analysis. The applied primer sequences are listed in

Table S1.

Protein isolation and western blotting

Total protein lysates were extracted from whole cells using $1\times$ sodium dodecyl sulfate

(SDS) sample buffer. The Pierce BCA Protein Assay Kit (Cat#23225, Thermo Fisher

Scientific) was used to determine the protein concentration. All proteins were separated

using SDS-polyacrylamide gel electrophoresis and transferred to PVDF Blotting

Membrane (P 0.45, A29532146, GE healthcare Life science, Chicago, IL, USA) using

the Trans-Blot Turbo Cassette (Bio-Rad, Hercules, CA, USA). Blocking One (03953,

Nacalai, Kyoto, Japan) or 5% skimmed milk were used for blocking. Primary antibodies

for ALKBH5 (1:1000 dilution, HPA007196; Atlas Antibodies), FTO (1:1000 dilution,

Ab124892; Abcam), IGF2BP1 (1:1000 dilution, 22803-1-AP; Proteintech), IGF2BP2

(1:1000 dilution, 11601-1-AP; Proteintech), IGF2BP3 (1:2000 dilution, 14642-1-AP;

Proteintech), YTHDF2 (1:400, Ab170118, Abcam), TIMP3 (1:3000 dilution, Ab39184;

Abcam), p21 (1:1000 dilution, A1483; ABclonal, Woburn, MA, USA), E2F1 (1:500

dilution, A2067; ABclonal), CCNG2 (0.2μg/mL, Ab251826; Abcam), p53 (1:200

dilution, Sc-126; SANTA CRUZ BIO TECHNOLOGY, Dallas, TX, USA), and GAPDH

(1:1000 dilution, Ab8245; Abcam) were incubated for overnight at 4□. Secondary

antibodies for rabbit (1:20000 dilution, NA9340; GE healthcare Life science) or mouse

(1:20000 dilution, NA9310; GE Healthcare Life Science) were incubated at room

temperature with 1%–5% skimmed milk for 1 h. Enhanced chemiluminescence (Pierce

ECL Plus Substrate or West Atto Ultimate Sensitivity Substrate, Thermo Fisher

Scientific) was used to visualize the protein bands using ChemiDocTouch (Bio-Rad).

Cell viability assay

Cells were seeded into 96-well plates with 3000 cells per well after 48 h of knockdown

or overexpression. Cell proliferation was monitored using Cell Counting Kit-8 (CCK-8;

Dojindo, Kumamoto, Japan) according to the manufacturer's protocol. Thereafter, the

cells were incubated with 10% CCK-8 for 1 h, followed by absorbance assessment at

450 nm in each well via spectrophotometry (Synergy HT, BioTek, Winooski, VT, USA)

every 24 h.

Transwell migration assay

Cell migration was evaluated using a 24-well plate with cell culture inserts (353097,

Falcon, Mexico City, Mexico) containing a filter with 8 μm-diameter pores. Briefly,

after serum starvation for 24 h with 0.1% FBS-containing RPMI1640 medium, $1 \times$

10^5 cells resuspended in 500 μL of RPMI1640 medium (Gibco) were seeded into the

upper chamber, after which RPMI1640 medium containing 10% FBS was placed in the

lower compartment of the chamber. After incubation for 16 h, the upper surface of the

membrane was wiped with a cotton-tipped applicator to remove nonmigrating cells,

whereas the migrating cells on the lower surface were fixed with cold methanol and

stained with 0.5% crystal violet. Migrating cells were automatically counted in three

random microscopic fields using the Hybrid Cell Count software

(BZ-□ Analyzer, Keyence, Osaka, Japan).

Wound-healing assays

To assess cell migration, 2×10^5 cells were seeded into 6-well plates. Thereafter, cells

were incubated in 5% CO_2 at 37□ for 48□h and an additional 24 h with 0.1%

FBS-containing RPMI1640 medium. A wound was scratched into the cells using a

200-μL plastic tip and washed with PBS (−). The cells were then incubated in

RPMI1640 containing 10% FBS. The relative distance of the scratches was observed

under an optical microscope (IX53, Olympus, Tokyo, Japan) at 3–6 time points after

wounding and assessed using the Image J software.

Cell cycle assay and apoptosis assay

Cell Cycle Assay Solution Blue (C549, Dojindo) was used to measure the cell cycle

according to the manufacturer's instructions. Briefly, treated cells were synchronized at

the G1 phase through serum starvation with 0.1% FBS-containing medium for 48 h. At

24 h after the release of serum starvation, the treated cells were collected, washed with

PBS (−), and incubated with 5 μL cell cycle assay solution for 15 min at 37□.

Thereafter, DNA content was determined based on staining intensity using a Gallios

flow cytometer (Beckman Coulter, Miami, FL, USA). The annexin V-FITC Apoptosis

Detection Kit (15342-54 Nacalai) was used to detect apoptosis by measuring annexin V

and propidium iodide (PI)-positive cells following the manufacturer's instructions.

Briefly, cells were incubated for 96 h after siRNA transfection. To induce apoptosis, the

cells were exposed to either 7.5 μM of gefitinib (078-06561, FUJIFILM) or 10 μM of

cisplatin (P4394, Sigma-Aldrich) alone for 48 h after siRNA transfection. The treated

cells were collected, washed with PBS (−), and incubated with 5 μL of annexin V-FITC

solution and 5 μL of PI solution for 15 min. Thereafter, apoptotic cells were determined

using a Gallios flow cytometer. Results were analyzed using the FlowJo software

(Becton, Dickinson, Franklin Lakes, NJ, USA), after which the extent of apoptosis and

cell cycle distribution were determined.

RNA stability assay

Cancer cells were incubated for 48 h after siRNA transfection. Cells were treated with

actinomycin D at a final concentration of 5 µg/mL. Total RNA was extracted at 0, 2, 4,

and 6 h after adding actinomycin D. The remaining CDKN1A and TIMP3 mRNA was

measured through quantitative real-time PCR and normalized to RPL32 mRNA, which

has a half-life of 25 h.

Quantitative analysis of global m^{6}A levels using liquid chromatography–mass

spectrometry/mass spectrometry (LC–MS/MS)

PolyA-enriched RNA was extracted using PolyATract mRNA isolation systems

(#Z5310 Promega, Madison, WI, USA) according to the manufacturer's instructions.

PolyA-enriched RNA concentration was calculated using Qubit 2.0. The

polyA-enriched RNA was enzymatically hydrolyzed using 8-OHdG Assay Preparation

Reagent Set (292-67801, FUJIFILM Wako Pure Chemical Corporation, Tokyo, Japan).

Technically, 100 ng of polyA-enriched RNA was digested using 5.7 µL of acetic acid

buffer and 3 µL of Nuclease P1 included in the 45-µL sample containing nuclease-free

water at 37□ for 30 min, followed by incubation with 6 µL of Tris Buffer and 0.3 µL of

alkaline phosphatase at 37□ for 30 min. After digestion, the sample was centrifuged at

14,000 g and 4□ for 20 min using a Nanosep 3K Omega centrifugal device (Pall

Corporation, Port Washington, NY, USA) according to a previously published method

(46).

As an internal standard, N^6-methyladenosine-d3 (m^{6}A-d3; M275897, Toronto Research

Chemicals, Toronto, Canada), which is a stable isotope of N^6-methyladenosine labeled

with three deuterium atoms on the N^6-methyl group, was added to the nucleosides

obtained via digestion of polyA-enriched RNA. These nucleosides were separated using

an Acquity UPLC HSS T3 column (2.1 mm × 100 mm; Waters, Milford, CT, USA) with

0.1% (vol./vol.) formic acid in water as mobile phase A and methanol as mobile phase B

at a flow rate of 200 µL/min in a linear gradient elution of 5%–60% B from 0 to 7 min.

Standard compounds of adenosine (A; A9251, Sigma-Aldrich), N^6-methyladenosine

(m^{6}A; A170736, Sigma-Aldrich), and m^{6}A-d3 were used to confirm the

nucleoside-to-base ion mass transitions of 268.1–136.4 (A), 282.2–150.2 (m^{6}A), and

285.2–153.2 (m^{6}A-d3). Peak areas of A, m^{6}A, and m^{6}A-d3 in the nucleosides digested

from polyA-enriched RNA were calculated using the column retention time of the

standard compounds using Analyst 1.6.1 software (AB SCIEX, Foster City, CA, USA).

The m^6A level was quantified as the ratio of m^6A to A or m^6A-d3 based on the

calibrated concentrations.

Microarray analysis of differentially expressed genes

Total RNA was extracted from ALKBH5-knockdown or control PC9 cells 96 h after

transfection. RNA samples were used for global gene expression profiling on human

Clariom S Assay microarrays (Thermo Fisher Scientific, Wilmington, DE, USA), which

include 24351 genes. All microarray analyses were entrusted to Filgen Inc. (Aichi,

Japan). A total RNA quality control check was performed using a NanoDrop ND-1000

(Thermo Scientific) and an Agilent 2100 Bioanalyzer. Using the Gene Chip TM WT

PLUS Reagent Kit, fragmented and labeled cDNA samples were prepared from 250 ng

of total RNA according to the manufacturer's instructions (Gene Chip TM WT PLUS

Reagent Kit User Manual). Thereafter, 100 μL of hybridization solution was prepared

using 73 μL of Hybridization Master Mix and 2.3 μg of fragmented and labeled cDNA.

The array was incubated using the Gene Chip TM Hybridization Oven 645 at 45□ for

16 h (60 rpm). The array was cleaned using the Gene Chip TM Fluidics Station 450 and

scanned using the Gene Chip TM Scanner 3000 7G according to the manufacturer's

instructions [Gene Chip TM Command Console (AGCC) 4.0 User Manual]. The

Microarray Data Analysis Tool version 3.2 (Filgen, Aichi, Japan) was used for data

normalization and subsequent processing. Differentially expressed mRNAs were

identified using a set cutoff (fold change > 1.5 or < 0.67; $P < 0.01$). Gene set

enrichment analysis (GSEA) was performed to examine the gene sets regulated by

ALKBH5 knockdown (http:/software.broadinstitute.org/gsea/omdex.jsp). For analysis,

the false discovery rate (FDR) based on gene set permutation was used. Microarray data

has been deposited in the Gene Expression Omnibus (GEO) at the National Center for

Biotechnology Information (NCBI) (accession number GSE165453).

Epitranscriptomic microarray analysis

Unfragmented total RNA was extracted from ALKBH5-knockdown or control PC9 cells

at 96 h after transfection and quantified using the NanoDrop ND-1000. RNA samples

were used for global m^6A expression profiling on an Arraystar Human mRNA&lncRNA

Epitranscriptomic Microarray (8×60 K; Arraystar), which includes 44,122

protein-coding mRNAs and 12,496 long noncoding RNAs. Microarray analyses were

entrusted to Arraystar Inc. (Rockville, MD, USA). Sample preparation and microarray

hybridization were performed based on Arraystar's standard protocols. Briefly, total

RNAs were immunoprecipitated with an anti-m^{6}A antibody (Synaptic Systems, 202003).

The "immunoprecipitated (IP)" and "supernatant (Sup)" RNAs were labeled with Cy5

and Cy3, respectively, as cRNAs in separate reactions using the Arraystar Super RNA

Labeling Kit. The cRNAs were combined and hybridized onto Arraystar Human

mRNA&lncRNA Epitranscriptomic Microarray (8×60 K, Arraystar). After washing the

slides, the arrays were scanned in two-color channels using an Agilent Scanner G2505C.

Agilent Feature Extraction software (version 11.0.1.1) was used to analyze acquired

array images. Raw intensities of IP (Cy5-labeled) and Sup (Cy3-labeled) were

normalized with an average of log2-scaled Spike-in RNA intensities. The "m^{6}A

methylation level" was calculated to determine the percentage of modification based on

the IP (Cy5-labeled) and Sup (Cy3-labeled) normalized intensities. "m^{6}A quantity" was

calculated to determine the amount of m^{6}A methylation based on the IP (Cy5-labeled)

normalized intensities. Differentially m^{6}A-methylated RNAs between both comparison

groups were identified by filtering with a fold change of >1.5 or <0.67 ($P < 0.01$)

through the unpaired t-test. Microarray data had been deposited in the GEO at the NCBI

(accession number GSE165454).

qPCR for methylated RNA immunoprecipitation (MeRIP) with m^{6}A antibody

ALKBH5-knockdown or control lung cancer cells were used for methylated RNA

immunoprecipitation assay. The Magna MeRIP m^{6}A kit (catalog no.17-10499, Millipore,

Burlington, MA, USA) was used according to the manufacturer's protocol. Briefly, the

polyA-enriched RNA was fragmented into 100–200 nucleotides incubated with RNA

fragmentation buffer for 55 s (CS220011, Millipore). The size of polyA-enriched RNA

fragments was optimized using the Agilent 4200 TapeStation (Agilent technologies,

Santa Clara, CA, USA). We used 0.5 µg of fragmented polyA-enriched RNA as input

control and 5 µg of fragmented polyA-enriched RNA for m^{6}A mRNA

immunoprecipitation, followed by incubation with m^{6}A antibody (MABE1006,

Millipore)- or mouse IgG-conjugated Protein A/G Magnetic Beads in 500 µL 1× IP

buffer supplemented with RNase inhibitors at 4□ overnight. Methylated RNAs were

immunoprecipitated with beads, eluted via competition with free m^{6}A, and purified

using the RNeasy kit (Qiagen). Moreover, modification of m^{6}A toward particular genes

was determined using qPCR analysis with specific primers [primers for the positive

control region (stop codon, EEF1A1+) or NC region (exon 5, EEF1A1−) of human

EEF1A1 was included in the Magna MeRIP m6A kit]. To design primers for MeRIP

qPCR, m^{6}A sites of specific genes were predicted using the sequence-based RNA

adenosine methylation site predictor algorithm (http://www.cuilab.cn/sramp) (47). We

focused on the potential m^{6}A sites in the 3′ UTRs near the stop codon and designed

primers to ensure that the target sequences were present in these sites with a limited

length of 120 nt. Self-designed primers for MeRIP qPCR are listed in Table S1.

Statistical analysis

Discrete variables were expressed as numbers (percentages), whereas continuous

variables were expressed as means ± standard deviations (SDs) unless otherwise

specified. The Mann–Whitney U test was used to compare continuous individual

samples, whereas Student's t-test was applied to compare continuous experimental data.

Fisher's exact test for independence was used to compare categorical data between

groups. The Wilcoxon matched-pairs signed-rank test was used to compare two

corresponding groups. Spearman's correlation coefficient was used for correlation

analysis. Kaplan–Meier curves with log-rank tests were used to analyze survival.

Accordingly, OS was defined as the duration from baseline to the date of death, whereas

recurrence-free survival (RFS) was defined as the duration from baseline to the

recurrence date. Univariate and multivariate Cox proportional hazards models were

applied to generate hazard ratios (HRs) for death while adjusting for other potential

confounding factors. Cell proliferation and RNA stability assays were analyzed using

two-way analysis of variance. Statistical analyses were performed using GraphPad

Prism Version 8 (GraphPad Software, San Diego, CA, USA) and EZR software

(Saitama Medical Center, Jichi Medical University, Saitama, Japan), with P values of

<0.05 indicating statistical significance.

Results

High ALKBH5 expression was associated with a worse prognosis in patients with

NSCLC

To investigate the impact of ALKBH5 and FTO in NSCLC, we examined the mRNA

expression levels of ALKBH5 and FTO in non-cancerous lung tissues and NSCLC

tissues using TCGA data. Accordingly, our results showed no significant difference in

ALKBH5 mRNA expression between non-cancerous and cancerous tissues. By contrast,

our findings showed that NSCLC had a significantly lower FTO mRNA expression than

non-cancerous tissues (Fig. 1A). We subsequently investigated the protein expression

levels of ALKBH5 and FTO in non-cancerous lung alveolar tissue and corresponding

NSCLC tissues using TMA of patient samples. Furthermore, our results showed that

cancerous tissues had significantly higher H-scores for ALKBH5 and FTO than

non-cancerous tissues (Fig. 1B). ALKBH5 and FTO expression were evaluated in

immortalized bronchial epithelial cells (BEAS2B) and lung cancer cell lines.

Consequently, qPCR analysis demonstrated that ALKBH5 mRNA expression was

higher in lung cancer cell lines except for LC-2/ad and RERF-LC–MS, whereas FTO

mRNA expression was lower in lung cancer cell lines except for HLC-1, ABC1, and

PC3 (Fig. 1C). Western blot analysis demonstrated that ALKBH5 was endogenously

expressed in all lung cancer cell lines and FTO was expressed in almost all lung cancer

cell lines except HLC-1 (Fig. 1D). IHC analysis showed that ALKBH5 and FTO were

mainly localized in the nucleus of the cells (Fig. 1E). Furthermore, immunofluorescence

analysis showed that ALKBH5 was localized in the nucleus of PC9 cells overexpressing

ALKBH5 (Fig. 1F). We analyzed the clinical characteristics of 627 NSCLC cases used

in IHC of TMA in the context of ALKBH5 or FTO expression in tumors of the HUSM

cohort (Table S2). The median age was 68 (range, 23–88) years; 430 (68.6%) patients

were male and 184 (29.3%) had never smoked. The tumors were histologically

classified as adenocarcinoma (n = 413, 65.9%), squamous cell carcinoma (n = 170,

27.1%), or other histological types (n = 44, 7.0%). A total of 395 (63.0%) patients had

stage I disease, whereas 127 (20.3%) cases had EGFR mutations. Postoperative

adjuvant chemotherapy was prescribed to 258 (41.1%) patients. The median H-score

values for ALKBH5 and FTO expression were 110 (0–225, range) and 65 (0–281),

respectively, with high ALKBH5 protein expression being correlated with high FTO

protein expression (r = 0.41) (Fig. S1A). Based on the median value, cases were divided

into "high" and "low" expression groups, after which their association with clinical data

as well as prognostic significance was examined. Lymph node metastasis, chemotherapy,

and EGFR status significantly differed depending on ALKBH5 expression, whereas

tumor status, lymph node metastasis, pathological stage, chemotherapy, and EGFR

status significantly differed depending on FTO expression. Kaplan–Meier curves

showed that patients with high ALKBH5 expression had significantly worse survival

than those with low ALKBH5 expression (Fig. 1G: log-rank p = 0.0009 for OS; Fig.

S1B: log-rank p = 0.0008 for RFS). Conversely, Kaplan–Meier curves showed no

significant difference in survival between the low and high FTO expression groups (Fig.

1G: log-rank p = 0.20 for OS, Fig. S1C: log-rank p = 0.07 for RFS). Univariate analysis

revealed high ALKBH5 expression as a predictor of unfavorable OS (HR, 1.675; 95%

CI, 1.230–2.521). Moreover, multivariate analysis of age, sex, smoking status, histology,

pathological stage, and ALKBH5 expression revealed that ALKBH5 expression was an

independent prognostic factor associated with unfavorable OS (HR, 1.468; 95% CI,

1.039–2.073) (Table S3). To validate the prognostic value of ALKBH5 and FTO in

other cohorts of patients with NSCLC, the lung cancer database in the Kaplan–Meier

plotter was used. Accordingly, Kaplan–Meier curves showed that patients with high

ALKBH5 expression had a significantly worse survival than those with low ALKBH5

expression (Fig. S1D: log-rank $p = 0.014$ for OS). In contrast, Kaplan–Meier curves

showed that patients with high FTO expression had significantly favorable survival

compared with those with low FTO expression (log-rank $p < 0.0001$ for OS) (Fig. S1E).

These observations suggested that ALKBH5 played a critical role in the poor prognosis

of patients with NSCLC.

ALKBH5 knockdown suppressed cell proliferation in NSCLC

To investigate the impact of ALKBH5 and FTO deficiency in lung cancer cell function,

ALKBH5 and FTO were knocked down in PC9 and A549 cells using small interfering

RNA (siRNA). Based on knockdown efficacy, ALKBH5 siRNA no. 1 (siALKBH5#1)

and siRNA no. 3 (siALKBH5#3) and FTO siRNA no.1 (siFTO#1) and siRNA no. 3

(siFTO#3) were used in subsequent knockdown experiments (Fig. 2A, 2B, and S2A).

ALKBH5 knockdown significantly suppressed the proliferation of PC9 and A549 cells

(Fig. 2C). By contrast, FTO knockdown showed no significant suppressive effects on

the proliferation of PC9 and A549 cells (Fig. 2D). Thereafter, we assessed migration

abilities in ALKBH5-knockdown cells. Accordingly, the transwell migration assay

showed no significant reduction in the migratory PC9 and A549 cells (Fig. 2E).

Moreover, the wound-healing assay showed that ALKBH5 knockdown promoted no

significant reduction in the migration ability of PC9 and A549 cells (Fig. 2F and 2G).

Together with the prognostic value of ALKBH5 in NSCLC, these observations

suggested that ALKBH5 played a cancer-promoting role by regulating cell proliferation.

To subsequently examine the mechanism by which ALKBH5 knockdown

suppressed cell proliferation, cell cycle, and apoptosis analyses were performed using

flow cytometry. Accordingly, ALKBH5 knockdown significantly increased the number

of PC9 cells in the G1 phase and reduced the number of PC9 cells in the G2/M phase

with a consistent result of two different sequences of siRNAs (Fig.3A and 3B). On the

other hand, the number of A549 cells in the G1 phase did not show significant

differences by ALKBH5 knockdown with siALKBH5#1 and significantly increased by

ALKBH5 knockdown with siALKBH5#3. The number of A549 cells in the G2/M phase

did not show significant differences by ALKBH5 knockdown with a consistent result of

two different sequences of siRNAs (Fig. 3C, 3D). ALKBH5 knockdown increased the

number of apoptotic PC9 cells (Fig. 3E and 3F). Furthermore, under drug-induced

apoptosis via cisplatin and gefitinib administration, ALKBH5 knockdown also

increased the number of apoptotic PC9 cells (Fig. 3G and 3H). ALKBH5 knockdown

also increased the number of apoptotic A549 cells (Fig. 3I and 3J). Moreover, ALKBH5

knockdown increased the number of apoptotic A549 cells with cisplatin (Fig. 3K and

3L). Overall, the aforementioned data showed that ALKBH5 knockdown suppressed

cell proliferation through G1 phase arrest and/or apoptosis induction in NSCLC cell

lines.

ALKBH5 overexpression promoted cell proliferation in immortalized cells

To analyze whether ALKBH5 overexpression in immortalized cells promoted malignant

changes in cell function, BEAS2B and HEK293 cells, which are immortalized cells,

were infected with a doxycycline-inducible vector, pRetroX-TetOne puro-ALKBH5.

ALKBH5 overexpression was confirmed in HEK293 and BEAS2B cells (Fig. 4A) and

significantly enhanced HEK293 and BEAS2B cell proliferation (Fig. 4B and 4C). In

contrast, ALKBH5 overexpression showed no significant effects on the migration

ability of HEK293 (Fig. 4D and 4E) and BEAS2B cells (Fig. 4F and 4G). The

aforementioned results provided further evidence that ALKBH5 played a

cancer-promoting role by regulating cell proliferation.

ALKBH5 altered the abundance of m^{6}A modification in polyA-enriched RNA

To assess the amount of m^{6}A in cells, a quantitative evaluation of m^{6}A was performed

via LC–MS/MS using polyA-enriched RNA extracted from PC9 cells with altered

ALKBH5 gene expression (Fig. 5A). We investigated the technical variability that

occurs when adenosine and N^6-methyladenosine-d3 (m^{6}A-d3) are used as internal

standards. Although both adenosine (A) and m^{6}A-d3 showed a strong positive

correlation with m^{6}A (r = 0.92 and r = 0.90), the measurement with m^{6}A-d3 as the

internal standard showed less technical variability than that with A as the internal

standard (Fig. S3A–C). Hence, we used m^{6}A-d3 as the internal control for subsequent

experiments. ALKBH5 knockdown increased m^{6}A modification in PC9 and A549 cells

(Fig. 5B and 5C), whereas ALKBH5 overexpression reduced m^{6}A modification in a

doxycycline concentration-dependent manner in PC9 cells (Fig. 5D, S3D, and S3E).

Moreover, ALKBH5 overexpression reduced m^{6}A modification regardless of the time

that had elapsed after doxycycline addition (Fig. 5E). Furthermore, ALKBH5

overexpression reduced m^{6}A modification in BEAS2B and HEK293 cells (Fig. 5F). The

aforementioned results presented evidence suggesting that ALKBH5 alters the global

m^{6}A abundance in cells.

ALKBH5 regulated the expression of cell proliferation-related genes

An expression microarray analysis was herein performed to investigate gene expression

profiles in ALKBH5-knockdown PC9 cells with two different sequences of siRNA

(ALKBH5#1 and ALKBH5#3). Differentially expressed genes (DEGs) were defined as

those with a fold change of >1.5 or <0.67 ($P < 0.01$). A total of 697 DEGs were detected

for ALKBH5#1 comprising 392 upregulated and 305 downregulated genes (Fig. 6A),

whereas 1394 DEGs were detected for ALKBH5#3 comprising 803 upregulated and

591 downregulated genes (Fig. 6B). Moreover, 82 upregulated genes (Table S4) and 47

downregulated genes (Table S5) overlapped between ALKBH5#1 and ALKBH5#3 (Fig.

6C). Except for ALKBH5, genes associated with m^6A modification described in a

previous review (48) were not included in the overlapped DEGs (Table S6). GSEA with

the hallmark gene set revealed that the PC9 cells transfected with siALKBH5#1 and

siALKBH5#3 had a more enriched expression of genes involved in cell cycle, such as

MYC_TARGETS_V2, P53_PATHWAY, and G2/M_CHECKPOINT, than those

transfected with siNC (Fig. S4A and S4B). We selected 10 DEGs associated with cell

proliferation or apoptosis based on their description in the NCBI gene summary (49-54)

or by referring to previous literature (55-58) and confirmed the upregulation of E2F1,

GADD45A, TIMP3, and CDKN1A and downregulation of CASP14 and CCNG2 by

qPCR (Fig. 6D). The aforementioned results revealed that ALKBH5 regulated the

expression of genes associated with cell proliferation.

ALKBH5 altered the abundance of m^{6}A in the 3′ UTR and regulated protein

expression of target genes

We performed m^{6}A-specific methylated RNA immunoprecipitation microarray analysis

in PC9 cells on an Arraystar Human mRNA&lncRNA Epitranscriptomic Microarray to

comprehensively examine whether differentially regulated genes were associated with

m^{6}A modification using unfragmented total RNA. The median methylation level in

unfragmented total RNA was 50.4% (6.8%–94.5%) (Fig. S5A). A positive correlation

was observed between the methylation level in unfragmented total RNA and the RNA

length of each transcript (r = 0.35) (Fig. S5B). Moreover, a negative correlation was

noted between the rate at which ALKBH5 knockdown increased m^{6}A modification

(methylation level in siALKBH5 − methylation level in siNC) and methylation level at

baseline (methylation level in siNC) (r = −0.35) (Fig. S5C). The volcano plot showed

that 1 RNA was hypermethylated by ALKBH5#1 knockdown (fold change > 1.5, $P <$

0.01) (Fig. S5D), whereas 28 RNAs were hypermethylated by ALKBH5#3 knockdown

(fold change > 1.5; $P < 0.01$) (Fig. S5E). No hypermethylated genes overlapped

between ALKBH5#1 and ALKBH5#3 knockdown with a fold change threshold of >1.5

($P < 0.01$) (Fig. S5F). GSEA showed no common hallmark gene set with an FDR

q-value of < 0.25 for PC9 cells transfected with siALKBH5#1 and siALKBH5#3

compared with the control group (Fig. S5G).

Considering that the m^{6}A levels of unfragmented RNAs regulated by ALKBH5

are affected by the baseline RNA length and endogenous m6A level, we performed

methylated RNA immunoprecipitation (MeRIP) with m^{6}A antibody using fragmented

polyA-enriched RNA in ALKBH5-knockdown PC9 cells to investigate focal m^{6}A

alterations in the mRNA. The fragmentation conditions were optimized (Fig. S6A), and

the m^{6}A changes in the positive and NC were confirmed through qPCR using the

primers included in the Magna MeRIP m^{6}A Kit (Millipore) (Fig.S6B). To verify the

accuracy of the MeRIP experiment, we selected MFAP5 out of the 11 hypermethylated

genes (>1.5 fold change and $P < 0.05$) in the human mRNA&lncRNA Epitranscriptomic

Microarray (Table S7) and analyzed the m^{6}A target site via qPCR. Specific primers

were designed for the predicted m^{6}A-harboring regions, and MeRIP qPCR confirmed

that ALKBH5 knockdown increased m^{6}A levels in the 3′ UTR of MFAP5 (Fig. S6C).

Thereafter, MeRIP qPCR was performed in six DEGs verified using qPCR with

ALKBH5-knockdown PC9 cells. Our results showed increased m^{6}A levels in the 3′

UTRs of CDKN1A, TIMP3, E2F1, and CCNG2 in ALKBH5-knockdown PC9 cells

(Fig. 6E–6G). ALKBH5 knockdown with two different sequences of siRNAs also

increased the m^{6}A level in the 5'UTR of CDKN1A (Fig. 6F). The aforementioned

results of the MeRIP qPCR suggest that ALKBH5 targeted the 3′ UTRs of m^{6}A in these

four transcripts (Fig. 7A).

Next, the protein expression levels of the potential target transcript of ALKBH5

were quantified by western blot analysis. Accordingly, our results showed that

CDKN1A (p21) expression increased independent of p53 in ALKBH5-knockdown PC9

cells, whereas TIMP3 expression increased in ALKBH5-knockdown A549 cells (Fig.

7B).

To investigate the effect of both CDKN1A in PC9 and TIMP3 in A549 on cell

proliferation in ALKBH5-deficient lung cancer cell lines, we confirmed the reduced

expression using siRNA (Fig. 7C, 7D, S7A, and S7B). The knockdown of CDKN1A

partly rescues the decreased cell proliferation in ALKBH5-deficient PC9 cells (Fig. 7E).

The knockdown of TIMP3 also partly rescues the decreased cell proliferation in

ALKBH5-deficient A549 cells (Fig. 7F). These results suggest that CDKN1A and

TIMP3 are important targets for cell proliferation and are required for cell number

reduction by repression of ALKBH5.

Additionally, we evaluated the expression of ALKBH5 target mRNAs CDKN1A

and TIMP3 in lung cancer using the TCGA dataset. Accordingly, cancerous tissues

(high ALKBH5 expression) had lower CDKN1A and TIMP3 expression than

noncancerous tissue (low ALKBH5 expression; Fig. S7C and S7D). The results were

consistent with the experimental results of CDKN1A and TIMP3 knockdown described

above.

IGF2BPs were required for ALKBH5 regulation of target mRNA expression via

stabilization of mRNA and affected cell proliferation

IGF2BP1, IGF2BP2, IGF2BP3 (IGF2BPs), and YTHDF2 are well-known

m^6A-recognizing RNA-binding proteins and readers of m^6A that have been known to

stabilize or destabilize mRNA. The expression of proteins of IGF2BPs in a series of cell

lines was analyzed by western blotting, and the results showed differences in their

expression in lung cancer cells and immortalized bronchial epithelial cells according to

the cell lines (Fig.8A).

Thereafter, ALKBH5 and IGF2BPs were knocked down with siRNA to

investigate the association between ALKBH5 and IGF2BPs and the expression of

CDKN1A (p21) or TIMP3 (Fig. S8A–D). Western blot analysis revealed that IGF2BPs

knockdown sufficiently reduced the expression of IGF2BPs (Fig. 8B), although some of

them appeared to be weakly expressed as shown in Figure 8A. Accordingly, ALKBH5

knockdown increased the mRNA expressions of CDKN1A in PC9 cells and TIMP3 in

A549 cells. The knockdown of IGF2BPs alone did not significantly change the

expression of CDKN1A and TIMP3 (Fig. S8E), but that of both ALKBH5 and IGF2BPs

offset the increased expression of CDKN1A and TIMP3 (Fig. 8C). We further analyzed

the protein expression of YTHDF2 in lung cancer cell lines (Fig. 8D) and conducted

transfection of siRNA for YTHDF2 as previously described (59), which confirmed that

upregulated expression of CDKN1A by ALKBH5 knockdown was increased by

YTHDF2 knockdown in PC9, which suggested that m^6A of CDKN1A may be affected

by both IGF2BPs and YTHDF2 reversibly (Fig. 8E and S8F). Actinomycin D assay

showed that ALKBH5 knockdown stabilized CDKN1A mRNA in PC9 cells, and this

stabilization was offset by the knockdown of IGF2BPs. ALKBH5 knockdown also

stabilized TIMP3 mRNA in A549 cells, although not statistically significant, and this

stabilization was decreased by IGF2BP3 knockdown (Fig. 8F). These results suggest

that these alterations in mRNA expression were offset by a double knockdown of both

ALKBH5 and one of the IGF2BPs, and the decline of mRNAs was, at least partly,

owing to the destabilization of these mRNAs by one of the IGF2BPs.

Considering that the interaction between ALKBH5 and IGF2BPs was found to

regulate the expression of genes associated with cell proliferation, cell proliferation

assays were conducted using ALKBH5- and IGF2BPs-knockdown cells. The

knockdown of IGF2BPs did not cause a significant change in cell proliferation in PC9

cells, but the knockdown of IGF2BPs decreased cell proliferation in A549 cells (Fig.

S8G). Notably, ALKBH5 knockdown reduced cell proliferation in PC9 and A549 cells

and this reduction of cell proliferation was offset by IGF2BPs knockdown (Fig. 8G).

These results suggest that the increased effect of cell proliferation upon simultaneous

knockdown of IGF2BPs and ALKBH5 cannot be explained by the effect of IGF2BPs

alone. Overall, our results support the hypothesis that IGF2BPs are required for

ALKBH5 regulation of target mRNA expression and cell proliferation.

Discussion

The current study revealed that ALKBH5 promoted poor survival and cell

proliferation in patients with NSCLC. Mechanistically, ALKBH5 knockdown had been

found to increase the expression of CDKN1A (p21) and TIMP3 by altering mRNA

stability in PC9 and A549 cells via m^{6}A change. Moreover, these changes in mRNA

stability were counteracted by IGF2BPs knockdown. The aforementioned results

suggest that the recognition of target transcripts by IGF2BPs stabilizes the mRNA of

CDKN1A (p21) or TIMP3 and subsequently increases their expressions, thereby

regulating cell proliferation, cell cycle, and apoptosis in lung cancer cell lines.

Over the last decade, considerable progress has been made on research

regarding the molecular mechanism for m^6A-mediated carcinogenesis of ALKBH5.

Nevertheless, previous studies on ALKBH5 have shown conflicting results regarding

the carcinogenic mechanisms of ALKBH5 across several cancers (28-36). Several

previous studies have reported contradictory results regarding ALKBH5, suggesting that

it acts as either an oncogenic factor or a tumor suppressor in NSCLC (40-42). The

current study concluded that ALKBH5 exerted cancer-promoting effects in NSCLC by

suppressing CDKN1A (p21) or TIMP3. On the other hand, although both ALKBH5 and

FTO are classified as m^6A demethylases, there was a discrepancy in survival between

ALKBH5 and FTO (Fig. 1G). Indeed, there was a trend toward a worse prognosis in the

FTO high-expression group, but the difference was not significant (Fig. 1G).

Furthermore, the knockdown of FTO did not suppress the proliferation of lung cancer

cells, but the knockdown of ALKBH5 inhibited it. Thus, ALKBH5 appears to have a

more effective impact on carcinogenesis. Certainly, our immunostaining results also

revealed a weak correlation between ALKBH5 and FTO expression, but some cases had

different intensities of expression among proteins (Fig. S1A). A possible background

mechanism is that each eraser protein may regulate a different target demethylated gene.

Independent changes of ALKBH5 and FTO expression would allow for complex

regulation of downstream gene expression via m^6A.

687   CDKN1A (p21) functions as a cell growth suppressor by inhibiting cell cycle

progression. Multiple transcription factors, ubiquitin ligases, and protein kinases

regulate the transcription, stability, and cellular localization of CDKN1A (p21) (60). A

previous study showed that ALKBH5 knockdown increased m^6A modification and

mRNA stability of CDKN1A, which subsequently increased p21 protein expression and

acted as a tumor suppressor in esophageal cancer (32). Similarly, our findings showed

that ALKBH5 knockdown in PC9 cells acted as a tumor suppressor by the upregulation

of CDKN1A (p21) via m^6A alteration. We also showed that p21 upregulation was

p53-independent and reduced cell proliferation in ALKBH5-deficient PC9 cells was

rescued by CDKN1A knockdown, which indirectly reinforced our finding that

CDKN1A (p21) upregulation was critical for an m^6A-mediated response. Our results

further indicated a novel mechanism wherein changes in CDKN1A expression via

ALKBH5 knockdown were rescued by IGF2BPs knockdown, which supports our

finding that alterations in CDKN1A (p21) expression were mediated by m^6A.

The current study identified TIMP3 as another important target molecule

downstream of ALKBH5. A previous study showed TIMP3 had several anticancer

properties, including apoptosis induction and antiproliferative, antiangiogenic, and

antimetastatic activities. The expression of TIMP3 is regulated by transcription factors

and histone acetylation (61). Several studies have shown that TIMP3 acts as a tumor

suppressor in lung cancer (62, 63). Indeed, TIMP3 knockdown increased cell

proliferation in A549 cells and rescued cell proliferation in ALKBH5-deficient A549

cells. Moreover, a previous report using A549 cell lines showed that ALKBH5

knockdown increases TIMP3 mRNA stability and TIMP3 expression via m^{6}A

modification (41). Similarly, the current study also confirmed that ALKBH5

knockdown increased mRNA stability, which increased TIMP3 protein expression and

acted as a tumor suppressor in A549 cells. Furthermore, our experimental data for the

first time showed that the ALKBH5 knockdown-induced increase in TIMP3 was

rescued by IGF2BPs, strongly suggesting that alterations in TIMP3 expression were

mediated by m^{6}A.

IGF2BPs are known as m^{6}A-recognizing RNA-binding proteins that stabilize

m^{6}A-containing RNA. Previous studies have reported that IGF2BPs have oncogenic

properties. Studies on lung cancer have associated IGF2BPs with cancer progression

and poor prognosis (64-69). Notably, a previous report showed that ALKBH5-mediated

m^6A modification of LY6/PLAUR Domain Containing 1 (LYPD1) is recognized by

IGF2BP1 and enhances the stability of LYPD1 mRNA in hepatocellular carcinoma (35).

Moreover, recent RNA-binding protein immunoprecipitation-sequencing analysis using

HEK293T showed that the binding site of IGF2BPs is mainly distributed in the 3′ UTRs

and that the target of IGF2BPs preferentially binds to the consensus sequence of

UGGAC in the target mRNA (26). These findings support our experimental hypothesis

that IGF2BPs recognize the m^6A in the 3′ UTRs of CDKN1A or TIMP3 because

UGGAC is present within three locations in the 3′ UTRs of CDKN1A and two locations

in the 3′ UTRs of TIMP3. In addition, IGF2BPs regulate RNA expression by

recognizing m^6A to affect mRNA stability. Their binding sites for m^6A modification are

enriched in the 3'UTR. On the other hand, the distribution of binding peaks differs

somewhat depending on the subclass of IGF2BPs, and nearly 50% of the targets in each

IGF2BP subclass are different in the other subclass (26). Our findings also showed that

the expression of IGF2BPs significantly differed between cell lines. It is possible that

IGF2BP subclasses with different m^6A targets play a role in the more complex

regulation of the expression of various target genes by changing their expression levels

depending on cell types. As a result, although PC9 and A549 are both lung

adenocarcinoma cell lines, the protein expression of their target genes such as CDKN1A

(p21) or CCNG2 may have been different (Fig. 7B).

In our epitranscriptomic microarray, site-specific changes in m^6A modification

could not be determined since sample RNAs were not fragmented. Considering the

correlation between RNA length and the ratio of m^6A-modified transcripts, the

epitranscriptomic microarray analysis using unfragmented RNA does not allow the

evaluation of multiple m^6A modifications occurring within a single transcript. As such,

we conducted MeRIP q-PCR with fragmented RNAs to evaluate site-specific

differential m^6A modification. Nevertheless, the epitranscriptomic microarray with

unfragmented RNAs provided a holistic view of the degree of m^6A modification for

each transcript, establishing a landscape for m^6A modification by ALKBH5 knockdown

(Fig. S5A–E and S5G).

FTO inhibitors have been shown to suppress the progression of acute myeloid

leukemia and glioblastoma *in vivo* (70, 71). In contrast, the antitumor effects of

ALKBH5 inhibitors, which enhanced the efficacy of cancer immunotherapy, have only

been confirmed in melanomas (72). Furthermore, several experimental facts have

shown that ALKBH5 is associated with the malignant transformation of cancer (28-34),

indicating that ALKBH5 inhibitors can be a target of tumor-agnostic therapy. However,

it should be noted that ALKBH5 inhibitors may cause unexpected side effects in

unknown target genes given that ALKBH5 inhibition alters the m6A modification of

numerous transcripts and the expression of several genes.

Although the current study provided abundant evidence to conclude the

remarkable role of the m^6A-regulated ALKBH5 and IGF2BPs axis in NSCLC, several

limitations warrant consideration. First, the possibility that off-target effects of siRNAs

may have affected the results cannot be ruled out because the number of nonoverlapping

DEGs was not small in the expression microarray results (Fig. 6C). To maximally

eliminate the influence of the off-target effect, we used two different sequences of

siRNA. Secondly, our epitranscriptomic microarray findings showed that

ALKBH5-knockdown reduced m^6A methylation levels in approximately half of the

transcripts. Although the detailed mechanism remains unclear, hypomethylation may

occur when some of the m^6A-rich transcripts bind to YTHDF2 and YTHDC2, reducing

the stability of RNA containing m^6A. Consequently, the m^6A-modified transcript then

undergoes degradation over time. In other words, the target's transcript may also differ

depending on the elapsed time after the perturbation of ALKBH5. However, the current

study did not investigate the chronological alteration of the m^6A abundance of each

transcript following ALKBH5 knockdown. Third, as mentioned earlier, CDKN1A and

TIMP3 are also regulated by transcription factors or miRNA, and we cannot deny the

possibility that mechanisms other than m^6A promoted changes in CDKN1A (p21) and

TIMP3 expression. Nonetheless, the finding that IGF2BPs knockdown rescued the

CDKN1A and TIMP3 expression supports our proposition that the changes in CDKN1A

(p21) and TIMP3 expression were mediated via m^6A.

Conclusions

The current study revealed that increased ALKBH5 expression was an independent

unfavorable prognostic factor in NSCLC. Moreover, upregulation of ALKBH5 in

NSCLC reduced m^6A modifications on the 3′ UTR of specific genes. The loss of m^6A

decreased the opportunity for recognition by IGF2BPs and destabilized the target

transcripts such as CDKN1A (p21) and TIMP3. Downregulation of CDKN1A (p21) and

TIMP3 induced cell cycle alteration and inhibited apoptosis. Our results suggest that the

ALKBH5–IGF2BPs axis promotes cell proliferation and tumorigenicity, which in turn

causes the unfavorable prognosis of NSCLC. Our findings provide a novel insight into

the pathophysiological mechanisms of m^6A epitranscriptomic modification in NSCLC

(Fig. 8H). Further *in vivo* studies are nonetheless required to determine whether

ALKBH5 inhibitors can be incorporated in the treatment of NSCLC in the near future.

List of abbreviations

m^{6}A: N^6-methyladenosine; NSCLC: non-small-cell lung cancer; MeRIP: Methylated

RNA immunoprecipitation; CI: Confidence interval; HR: Hazard ratio; UTRs: 3'

untranslated regions; METTL3: methyltransferase-like 3; METTL14:

Methyltransferase-like 14; WTAP: Wilms tumor 1-associated protein; RBM15:

RNA-binding motif protein 15; FTO: fat mass and obesity-related protein, ALKBH5:

AlkB homolog 5; YTHDC: YT521-B homology domain containing; HNRNPG:

heterogeneous nuclear ribonucleoprotein G; YTHDF: YT521-B homology domain

family; eIF3: eukaryotic initiation factor3; IGF2BP: insulin-like growth factor 2

mRNA-binding protein; m^{6}Am: N^6,2'-O-dimethyladenosine; TMA: Tissue microarray;

IHC: immunohistochemistry; TCGA: the Cancer Genome Atlas; RSEM: RNA-seq by

Expectation Maximization; DAPI: 4',6-diamidino-2-phenylindole; siNC: siRNA

control; NT: nontreated cells; DOX: doxycycline; OE: overexpression; NC: negative

control; CCK-8: Cell Counting Kit-8; SDS: sodium dodecyl sulfate; PI: propidium

iodide; LC–MS/MS: liquid chromatography–mass spectrometry/mass spectrometry;

m^{6}A-d3: N^6-methyladenosine-d3; A: adenosine; FDR: false discovery rate; GSEA:

Gene set enrichment analysis; GEO: Gene Expression Omnibus; NCBI: National Center

for Biotechnology Information; SD: standard deviation; OS: Overall survival; RFS:

recurrence-free survival; ANOVA: analysis of variance; DEGs: differentially expressed

genes; LYPD1: LY6/PLAUR Domain Containing 1

References

1.   WHO report on cancer: setting priorities, investing wisely and providing care

for   all   [Available   from:

https://www.who.int/publications/i/item/who-report-on-cancer-setting-priorities-investin

g-wisely-and-providing-care-for-all.

2.   Mok TS, Wu YL, Thongprasert S, Yang CH, Chu DT, Saijo N, et al. Gefitinib

or   carboplatin-paclitaxel   in   pulmonary   adenocarcinoma.   N   Engl   J   Med.

2009;361(10):947-57.

3.   Shaw AT, Kim DW, Nakagawa K, Seto T, Crino L, Ahn MJ, et al. Crizotinib

versus   chemotherapy   in   advanced   ALK-positive   lung   cancer.   N   Engl   J   Med.

2013;368(25):2385-94.

4.   Planchard D, Besse B, Groen HJM, Souquet P-J, Quoix E, Baik CS, et al.

Dabrafenib plus trametinib in patients with previously treated BRAFV600E-mutant

metastatic non-small cell lung cancer: an open-label, multicentre phase 2 trial. The

Lancet Oncology. 2016;17(7):984-93.

5.   Shaw AT, Ou SH, Bang YJ, Camidge DR, Solomon BJ, Salgia R, et al.

Crizotinib in ROS1-rearranged non-small-cell lung cancer. N Engl J Med.

2014;371(21):1963-71.

6.   Gandhi L, Rodriguez-Abreu D, Gadgeel S, Esteban E, Felip E, De Angelis F, et

al. Pembrolizumab plus Chemotherapy in Metastatic Non-Small-Cell Lung Cancer. N

Engl J Med. 2018;378(22):2078-92.

7.   Carroll SM, Narayan P, Rottman FM. N6-methyladenosine residues in an

intron-specific region of prolactin pre-mRNA. Mol Cell Biol. 1990;10(9):4456-65.

8.   Dominissini D, Moshitch-Moshkovitz S, Schwartz S, Salmon-Divon M, Ungar

L, Osenberg S, et al. Topology of the human and mouse m6A RNA methylomes

revealed by m6A-seq. Nature. 2012;485(7397):201-6.

9.   Liu J, Yue Y, Han D, Wang X, Fu Y, Zhang L, et al. A METTL3-METTL14

complex mediates mammalian nuclear RNA N6-adenosine methylation. Nat Chem Biol.

2014;10(2):93-5.

10.   Ping XL, Sun BF, Wang L, Xiao W, Yang X, Wang WJ, et al. Mammalian

WTAP is a regulatory subunit of the RNA N6-methyladenosine methyltransferase. Cell

Research. 2014;24(2):177-89.

11.   Yue Y, Liu J, Cui X, Cao J, Luo G, Zhang Z, et al. VIRMA mediates

preferential m(6)A mRNA methylation in 3'UTR and near stop codon and associates

with alternative polyadenylation. Cell Discov. 2018;4:10.

12.   Patil DP, Chen CK, Pickering BF, Chow A, Jackson C, Guttman M, et al.

m(6)A RNA methylation promotes XIST-mediated transcriptional repression. Nature.

2016;537(7620):369-73.

13.   Jia G, Fu Y, Zhao X, Dai Q, Zheng G, Yang Y, et al. N6-methyladenosine in

nuclear RNA is a major substrate of the obesity-associated FTO. Nat Chem Biol.

2011;7(12):885-7.

14.   Zheng G, Dahl JA, Niu Y, Fedorcsak P, Huang CM, Li CJ, et al. ALKBH5 is a

mammalian RNA demethylase that impacts RNA metabolism and mouse fertility. Mol

Cell. 2013;49(1):18-29.

15.   Mauer J, Luo X, Blanjoie A, Jiao X, Grozhik AV, Patil DP, et al. Reversible

methylation of m(6)Am in the 5' cap controls mRNA stability. Nature.

2017;541(7637):371-5.

16.   Meyer KD, Saletore Y, Zumbo P, Elemento O, Mason CE, Jaffrey SR.

Comprehensive analysis of mRNA methylation reveals enrichment in 3' UTRs and near

stop codons. Cell. 2012;149(7):1635-46.

17.   Tang C, Klukovich R, Peng H, Wang Z, Yu T, Zhang Y, et al.

ALKBH5-dependent m6A demethylation controls splicing and stability of long 3'-UTR

mRNAs in male germ cells. Proc Natl Acad Sci U S A. 2018;115(2):E325-E33.

18.   Xiao W, Adhikari S, Dahal U, Chen YS, Hao YJ, Sun BF, et al. Nuclear m(6)A

Reader YTHDC1 Regulates mRNA Splicing. Mol Cell. 2016;61(4):507-19.

19.   Liu   N,   Dai   Q,   Zheng   G,   He   C,   Parisien   M,   Pan   T.

N(6)-methyladenosine-dependent   RNA   structural   switches   regulate   RNA-protein

interactions. Nature. 2015;518(7540):560-4.

20.   Liu N, Zhou KI, Parisien M, Dai Q, Diatchenko L, Pan T. N6-methyladenosine

alters RNA structure to regulate binding of a low-complexity protein. Nucleic Acids Res.

2017;45(10):6051-63.

21.   Li A, Chen YS, Ping XL, Yang X, Xiao W, Yang Y, et al. Cytoplasmic m(6)A

reader YTHDF3 promotes mRNA translation. Cell Res. 2017;27(3):444-7.

22.   Choe J, Lin S, Zhang W, Liu Q, Wang L, Ramirez-Moya J, et al. mRNA

circularization by METTL3-eIF3h enhances translation and promotes oncogenesis.

Nature. 2018;561(7724):556-60.

23.   Wang X, Zhao BS, Roundtree IA, Lu Z, Han D, Ma H, et al.

N(6)-methyladenosine Modulates Messenger RNA Translation Efficiency. Cell.

2015;161(6):1388-99.

24.   Shi H, Wang X, Lu Z, Zhao BS, Ma H, Hsu PJ, et al. YTHDF3 facilitates

translation and decay of N(6)-methyladenosine-modified RNA. Cell Res.

2017;27(3):315-28.

25.   Wang X, Lu Z, Gomez A, Hon GC, Yue Y, Han D, et al.

N6-methyladenosine-dependent regulation of messenger RNA stability. Nature.

2014;505(7481):117-20.

26.   Huang H, Weng H, Sun W, Qin X, Shi H, Wu H, et al. Recognition of RNA

N(6)-methyladenosine by IGF2BP proteins enhances mRNA stability and translation.

Nat Cell Biol. 2018;20(3):285-95.

27.   Ma L, Chen T, Zhang X, Miao Y, Tian X, Yu K, et al. The m(6)A reader

YTHDC2   inhibits   lung   adenocarcinoma   tumorigenesis   by   suppressing

SLC7A11-dependent antioxidant function. Redox Biol. 2021;38:101801.

28.   Zhang S, Zhao BS, Zhou A, Lin K, Zheng S, Lu Z, et al. m(6)A Demethylase

ALKBH5 Maintains Tumorigenicity of Glioblastoma Stem-like Cells by Sustaining

FOXM1 Expression and Cell Proliferation Program. Cancer Cell. 2017;31(4):591-606

e6.

29.   Chen S, Zhou L, Wang Y. ALKBH5-mediated m(6)A demethylation of lncRNA

PVT1 plays an oncogenic role in osteosarcoma. Cancer Cell Int. 2020;20:34.

30.   Guo T, Liu DF, Peng SH, Xu AM. ALKBH5 promotes colon cancer

progression by decreasing methylation of the lncRNA NEAT1. Am J Transl Res.

2020;12(8):4542-9.

31.   Jiang Y, Wan Y, Gong M, Zhou S, Qiu J, Cheng W. RNA demethylase

ALKBH5 promotes ovarian carcinogenesis in a simulated tumour microenvironment

through stimulating NF-kappaB pathway. J Cell Mol Med. 2020;24(11):6137-48.

32.   Nagaki Y, Motoyama S, Yamaguchi T, Hoshizaki M, Sato Y, Sato T, et al. m(6)

A demethylase ALKBH5 promotes proliferation of esophageal squamous cell carcinoma

associated with poor prognosis. Genes Cells. 2020;25(8):547-61.

33.   Pu X, Gu Z, Gu Z. ALKBH5 regulates IGF1R expression to promote the

Proliferation   and   Tumorigenicity   of   Endometrial   Cancer.   J   Cancer.

2020;11(19):5612-22.

34.   Zhang X, Wang F, Wang Z, Yang X, Yu H, Si S, et al. ALKBH5 promotes the

proliferation of renal cell carcinoma by regulating AURKB expression in an

m(6)A-dependent manner. Ann Transl Med. 2020;8(10):646.

35.   Chen Y, Zhao Y, Chen J, Peng C, Zhang Y, Tong R, et al. ALKBH5 suppresses

malignancy of hepatocellular carcinoma via m(6)A-guided epigenetic inhibition of

LYPD1. Mol Cancer. 2020;19(1):123.

36.   Guo X, Li K, Jiang W, Hu Y, Xiao W, Huang Y, et al. RNA demethylase

ALKBH5 prevents pancreatic cancer progression by posttranscriptional activation of

PER1 in an m6A-YTHDF2-dependent manner. Mol Cancer. 2020;19(1):91.

37.   Liu J, Ren D, Du Z, Wang H, Zhang H, Jin Y. m(6)A demethylase FTO

facilitates tumor progression in lung squamous cell carcinoma by regulating MZF1

expression. Biochem Biophys Res Commun. 2018;502(4):456-64.

38.   Li J, Han Y, Zhang H, Qian Z, Jia W, Gao Y, et al. The m6A demethylase FTO

promotes the growth of lung cancer cells by regulating the m6A level of USP7 mRNA.

Biochem Biophys Res Commun. 2019;512(3):479-85.

39.   Ding Y, Qi N, Wang K, Huang Y, Liao J, Wang H, et al. FTO Facilitates Lung

Adenocarcinoma Cell Progression by Activating Cell Migration Through mRNA

Demethylation. Onco Targets Ther. 2020;13:1461-70.

40.   Jin D, Guo J, Wu Y, Yang L, Wang X, Du J, et al. m(6)A demethylase ALKBH5

inhibits tumor growth and metastasis by reducing YTHDFs-mediated YAP expression

and inhibiting miR-107/LATS2-mediated YAP activity in NSCLC. Mol Cancer.

2020;19(1):40.

41.   Zhu Z, Qian Q, Zhao X, Ma L, Chen P. N(6)-methyladenosine ALKBH5

promotes non-small cell lung cancer progress by regulating TIMP3 stability. Gene.

2020;731:144348.

42.   Zhang D, Ning J, Okon I, Zheng X, Satyanarayana G, Song P, et al.

Suppression of m6A mRNA modification by DNA hypermethylated ALKBH5

aggravates the oncological behavior of KRAS mutation/LKB1 loss lung cancer. Cell

Death Dis. 2021;12(6):518.

43.   Zhang C, Samanta D, Lu H, Bullen JW, Zhang H, Chen I, et al. Hypoxia

induces the breast cancer stem cell phenotype by HIF-dependent and

ALKBH5-mediated m(6)A-demethylation of NANOG mRNA. Proc Natl Acad Sci U S

A. 2016;113(14):E2047-56.

44.   Chao Y, Shang J, Ji W. ALKBH5-m(6)A-FOXM1 signaling axis promotes

proliferation and invasion of lung adenocarcinoma cells under intermittent hypoxia.

Biochem Biophys Res Commun. 2020;521(2):499-506.

45.   Inoue Y, Matsuura S, Kurabe N, Kahyo T, Mori H, Kawase A, et al.

Clinicopathological and Survival Analysis of Japanese Patients with Resected

Non-Small-Cell Lung Cancer Harboring NKX2-1, SETDB1, MET, HER2, SOX2,

FGFR1, or PIK3CA Gene Amplification. Journal of Thoracic Oncology.

2015;10(11):1590-600.

46.   Du C, Kurabe N, Matsushima Y, Suzuki M, Kahyo T, Ohnishi I, et al. Robust

quantitative assessments of cytosine modifications and changes in the expressions of

related enzymes in gastric cancer. Gastric Cancer. 2015;18(3):516-25.

47.   Zhou Y, Zeng P, Li YH, Zhang Z, Cui Q. SRAMP: prediction of mammalian

N6-methyladenosine (m6A) sites based on sequence-derived features. Nucleic Acids

Res. 2016;44(10):e91.

48.   Zhou Z, Lv J, Yu H, Han J, Yang X, Feng D, et al. Mechanism of RNA

modification N6-methyladenosine in human cancer. Mol Cancer. 2020;19(1):104.

49.   National   Center   for   Biotechnology   Information,   Gene,   E2F1.

https://www.ncbi.nlm.nih.gov/gene/1869.

50.   National   Center   for   Biotechnology   Information,   Gene,   CDKN1A.

https://www.ncbi.nlm.nih.gov/gene/1026.

51.   National   Center   for   Biotechnology   Information,   Gene,   CCNG2. https://www.ncbi.nlm.nih.gov/gene/901.

52.   National   Center   for   Biotechnology   Information,   Gene,   CASP14. https://www.ncbi.nlm.nih.gov/gene/23581.

53.   National   Center   for   Biotechnology   Information,   Gene,   PMAIP1. https://www.ncbi.nlm.nih.gov/gene/5366.

54.   National   Center   for   Biotechnology   Information,   Gene,   AKAP12. https://www.ncbi.nlm.nih.gov/gene/9590.

55.   Carrier F, Smith ML, Bae I, Kilpatrick KE, Lansing TJ, Chen CY, et al. Characterization of human Gadd45, a p53-regulated protein. J Biol Chem. 1994;269(51):32672-7.

56.   Xue X, Fei X, Hou W, Zhang Y, Liu L, Hu R. miR-342-3p suppresses cell proliferation and migration by targeting AGR2 in non-small cell lung cancer. Cancer Lett. 2018;412:170-8.

57.   Gan R, Yang Y, Yang X, Zhao L, Lu J, Meng QH. Downregulation of miR-221/222 enhances sensitivity of breast cancer cells to tamoxifen through upregulation of TIMP3. Cancer Gene Ther. 2014;21(7):290-6.

58.   Wang JL, Chen ZF, Chen HM, Wang MY, Kong X, Wang YC, et al. Elf3 drives

beta-catenin transactivation and associates with poor prognosis in colorectal cancer. Cell

Death Dis. 2014;5:e1263.

59.   Tsuchiya K, Yoshimura K, Inoue Y, Iwashita Y, Yamada H, Kawase A, et al.

YTHDF1 and YTHDF2 are associated with better patient survival and an inflamed

tumor-immune microenvironment in non-small-cell lung cancer. Oncoimmunology.

2021;10(1):1962656.

60.   Abbas T, Dutta A. p21 in cancer: intricate networks and multiple activities. Nat

Rev Cancer. 2009;9(6):400-14.

61.   Su CW, Lin CW, Yang WE, Yang SF. TIMP-3 as a therapeutic target for cancer.

Ther Adv Med Oncol. 2019;11:1758835919864247.

62.   Lei Y, Liu Z, Yang W. Negative correlation of cytoplasm TIMP3 with miR-222

indicates a good prognosis for NSCLC. Onco Targets Ther. 2018;11:5551-7.

63.   Garofalo M, Di Leva G, Romano G, Nuovo G, Suh SS, Ngankeu A, et al.

miR-221&222 regulate TRAIL resistance and enhance tumorigenicity through PTEN

and TIMP3 downregulation. Cancer Cell. 2009;16(6):498-509.

64.   Huang X, Zhang H, Guo X, Zhu Z, Cai H, Kong X. Insulin-like growth factor

2 mRNA-binding protein 1 (IGF2BP1) in cancer. J Hematol Oncol. 2018;11(1):88.

65.   Kato T, Hayama S, Yamabuki T, Ishikawa N, Miyamoto M, Ito T, et al.

Increased expression of insulin-like growth factor-II messenger RNA-binding protein 1

is associated with tumor progression in patients with lung cancer. Clin Cancer Res.

2007;13(2 Pt 1):434-42.

66.   Huang RS, Zheng YL, Li C, Ding C, Xu C, Zhao J. MicroRNA-485-5p

suppresses growth and metastasis in non-small cell lung cancer cells by targeting

IGF2BP2. Life Sci. 2018;199:104-11.

67.   Findeis-Hosey JJ, Yang Q, Spaulding BO, Wang HL, Xu H. IMP3 expression is

correlated with histologic grade of lung adenocarcinoma. Hum Pathol.

2010;41(4):477-84.

68.   Findeis-Hosey JJ, Xu H. Insulin-like growth factor II-messenger RNA-binding

protein-3 and lung cancer. Biotech Histochem. 2012;87(1):24-9.

69.   Zhao W, Lu D, Liu L, Cai J, Zhou Y, Yang Y, et al. Insulin-like growth factor 2

mRNA binding protein 3 (IGF2BP3) promotes lung tumorigenesis via attenuating p53

stability. Oncotarget. 2017;8(55):93672-87.

70.   Cui Q, Shi H, Ye P, Li L, Qu Q, Sun G, et al. m(6)A RNA Methylation

Regulates the Self-Renewal and Tumorigenesis of Glioblastoma Stem Cells. Cell Rep.

2017;18(11):2622-34.

71.   Huang Y, Su R, Sheng Y, Dong L, Dong Z, Xu H, et al. Small-Molecule

Targeting of Oncogenic FTO Demethylase in Acute Myeloid Leukemia. Cancer Cell.

2019;35(4):677-91 e10.

72.   Li N, Kang Y, Wang L, Huff S, Tang R, Hui H, et al. ALKBH5 regulates

anti-PD-1 therapy response by modulating lactate and suppressive immune cell

accumulation in tumor microenvironment. Proc Natl Acad Sci U S A.

2020;117(33):20159-70.

1025

1026   Declarations

1027   Acknowledgments

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1034   Author contributions

HS conceived this project, supervised all experiments and interpretations, and drafted

the manuscript. KT designed and performed all experiments, analyzed the data,

interpreted patient and experimental data, and drafted the manuscript. KY designed this

project, performed sample collection, histological examination, and a part of the

experiments, and drafted the manuscript. Yusuke Inoue performed sample collection and

histological examination. Yuji Iwashita designed this project, interpreted the

experimental data, and drafted the manuscript. TO performed molecular experiments,

interpreted the experimental data, and drafted the manuscript. HY and HW assisted part

of the experiments. AK, MT, HO, and KF performed sample collection. KS performed

sample collection and analyzed data. TS supervised this project. All authors have read

and approved the final manuscript.

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1051

1052   **Availability of data and materials**

1053 All data and supplementary information within the article are available from the

1054 published article (including supplementary information files) or available on published

1055 databases (TCGA or GEO). GEO accession numbers of our microarray data are

1056 GSE165453 and GSE165453.

1057

Ethics approval and consent to participate

This study was approved by the Ethics Committees of Hamamatsu University School of

Medicine (20-011) and Seirei Mikatahara General Hospital and was carried out in

accordance with approved guidelines. Written informed consent was obtained from all

patients. All analyses were conducted in compliance with the ethical standards

according to the Helsinki Declaration.

1064

1065 **Consent for publication**

1066 Not applicable.

1067

1068 **Competing interests**

1069 The authors declare no competing interests.

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Figure legends

Figure 1. High ALKBH5 expression was associated with a worse prognosis in

patients with non-small-cell lung cancer.

(**A**) ALKBH5 and FTO mRNA levels were analyzed in the paired non-cancerous and

NSCLC tissues using the TCGA database (n = 109 for each group). (**B**) ALKBH5 and

FTO protein levels were assessed in the paired non-cancerous lung alveolar tissue and

NSCLC tissues in the HUSM cohort via immunohistochemistry (IHC) using the

H-score (n = 77 for each group). (**C**) Relative ALKBH5 and FTO mRNA expression

levels were detected using qPCR in cell lines. Data were normalized to GAPDH and

adjusted to the expression of BEAS2B cells (ALKBH5: n = 2, FTO: n = 3). (**D**)

ALKBH5 and FTO protein expression levels were determined using western blot

analysis in cell lines. (**E**) IHC staining for ALKBH5 and FTO were assessed using the

TMA core of NSCLC tissues in the HUSM cohort. Staining intensity was categorized

into 0 (absent), 1 (weak), 2 (moderate), or 3 (strong). (**F**) Immunofluorescence

visualized subcellular localization in PC9 cells (×100). PC9 cells infected with

pRetroX-TetOne puro- ALKBH5 were transduced by 100 ng/mL of doxycycline and

used as ALKBH5 overexpression. PC9 cells without doxycycline were used as a

negative control. (**G**) A Kaplan–Meier survival curve with a log-rank test was utilized to

analyze the overall survival of the HUSM cohort. Patients were stratified into low (blue)

or high-expression groups (red) based on a cutoff determined by the median H-scores (n

= 627). Results were presented as the median (A and B) or mean ± SD (c). *****P* <

0.0001 indicates a significant difference between the indicated groups.

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Figure 2. ALKBH5 knockdown suppressed cell proliferation in non-small-cell lung

cancer

(**A, B**) Western blot analysis demonstrated ALKBH5 protein levels in cells transfected

with siRNA for ALKBH5 (siALKBH5), FTO (siFTO), control (siNC), or nontreated

cells (NT). (**C**) Cell proliferation relative to baseline in PC9 and A549 cells transfected

with siALKBH5 (#1 and #3) or siNC were assessed using the CCK-8 assay (n = 3). (**D**)

Cell proliferation relative to baseline in PC9 and A549 cells transfected with siFTO (#1

and #3) or siNC were assessed using the CCK-8 assay (n = 3). (**E**) The migration ability

of PC9 and A549 cells transfected with siALKBH5 (#1 and #3) or siNC were assessed

using transwell migration assay. The bar charts indicate the number of migratory cells

that passed through the chamber membrane (n = 3). (**F, G**) The migration ability of PC9

(**F**) and A549 (**G**) cells transfected with siALKBH5 (#1 and #3) or siNC was assessed

using wound-healing assay (n = 3). Results were presented as mean ± SD. **$P < 0.01$,

***$P < 0.001$, ****$P < 0.0001$ indicates a significant difference between the indicated

groups.

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Figure 3. ALKBH5 knockdown-induced G1 phase arrest of cell cycle and/or

apoptosis in non-small-cell lung cancer

(**A–D**) The cell cycle was examined via flow cytometry with PC9 (A) and A549 (C)

cells transfected with siALKBH5 (#1 and #3) or siNC. The bar charts indicate the

percentage of cells in each cell cycle phase [n = 6 for PC9 (B), n = 3 for A549 cells (D)].

(**E** and **F**) Apoptotic cells were determined using flow cytometric analysis of PC9 cells

transfected with siALKBH5 (#1 and #3) or siNC. (E) Percentage of the apoptotic cells

in which both propidium iodide and annexin V were positive are shown in a

representative scatter plot. (F) The apoptosis rate in ALKBH5 knockdown was

compared with siNC and shown as a bar chart (n = 3). (**G** and **H**) Cisplatin- or

gefitinib-induced apoptotic cells were determined via flow cytometry with PC9 cells

transfected with siALKBH5 or siNC. (G) Percentage of apoptotic cells shown in a

representative scatter plot. (H) The cisplatin- or gefitinib-induced apoptosis rate in

ALKBH5 knockdown was compared with siNC and shown as a bar chart (n = 3). (**I** and

J) Apoptotic cells were determined via flow cytometry with A549 cells transfected with

siALKBH5 or siNC. (I) Percentage of the apoptotic cells shown in a representative

scatter plot. (J) Apoptosis rate in ALKBH5 knockdown was compared with siNC and

shown as a bar chart (n = 6). (**K** and **L**) Cisplatin-induced apoptotic cells were

determined via flow cytometric analysis of A549 cells transfected with siALKBH5 or

siNC. (K) Percentage of the apoptotic cells shown in a representative scatter plot. (L)

The cisplatin-induced apoptosis rate in ALKBH5 knockdown was compared with siNC

and shown as a bar chart (n = 3). Results were presented as mean $\pm$ SD. *$P < 0.05$, **P

< 0.01, ***$P < 0.001$, ****$P < 0.0001$ indicates a significant difference between the

indicated groups.

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Figure 4. ALKBH5 overexpression promoted cell proliferation

Immortalized cells infected with pRetroX-TetOne puro empty vector (empty) or

pRetroX-TetOne puro-ALKBH5 (ALKBH5) were used to assess the function of

ALKBH5-overexpressed cells. The concentration of doxycycline (DOX) was 100

ng/mL. (**A**) Western blot analysis demonstrated ALKBH5 protein levels in

ALKBH5-overexpressed HEK293 and BEAS2B cells. (**B, C**) Cells infected with

pRetroX-TetOne puro-ALKBH5 with DOX were designated as ALKBH5

overexpression (OE), whereas those without DOX were designated as negative control

(NC). Cell proliferation relative to baseline in ALKBH5 OE HEK293 and BEAS2B

cells were assessed using the CCK-8 assay (n = 3). (**D–G**) The migration ability of

HEK293 and BEAS2B cells was assessed via wound-healing assay. Representative

images of the wound-healing assay for HEK293 (**D**) and BEAS2B (**F**) cells. Wound

areas relative to baseline at each time point were compared between ALKBH5 OE and

NC HEK293 (**E**) and BEAS2B (**G**) cells (n = 3). Results are presented as mean ± SD.

*$P < 0.05$ indicates a significant difference between the indicated groups.

1152

Figure 5. ALKBH5 altered the abundance of m^{6}A modification in polyA-enriched

RNA

(**A**) Representative chromatograms obtained using liquid chromatography–mass

spectrometry/mass spectrometry (LC–MS/MS) for adenosine (upper panel, 2.89 min),

N^6-methyladenosine (middle panel, 3.81 min), and N^6-methyladenosine-d3 (lower panel,

3.76 min) in polyA-enriched RNA extracted from PC9 cells. Peak areas were quantified

as the product of retention time (min) and count per seconds (cps). (**B** and **C**) The peak

areas of m^{6}A were normalized to that of m6A-d3. The amount of m^{6}A in PC9 (B) and

A549 (C) cells transfected with siALKBH5 was compared with that in cells transfected

with siNC for 48, 72, and 96 h (n = 3). (**D**) PolyA-enriched RNAs were extracted from

PC9 cells containing pRetroX-TetOne puro-ALKBH5 vector. m^{6}A/m^{6}A-d3 in the cells

incubated with various concentrations of DOX for 48 h were compared with that in cells

incubated with 0 ng/mL DOX (n = 3). (**E**) m^{6}A/m^{6}A-d3 in PC9 cells containing

pRetroX-TetOne puro-ALKBH5 vector (ALKBH5 OE) whose ALKBH5

overexpression was induced by 100 ng/mL DOX for 24, 48, 72, 96, 120 h was

compared with those without DOX (NC) (n = 3). (**F**) m^{6}A/m^{6}A-d3 in HEK293 and

BEAS2B (ALKBH5 OE) cells whose ALKBH5 overexpression was induced by 100

ng/mL DOX for 48 h were compared with those without DOX (NC) (n = 3). Results

were presented as mean ± SD. *$P < 0.05$, **$P < 0.01$, ***$P < 0.001$, ****$P < 0.0001$

indicates a significant difference between the indicated groups by Student's *t*-test.

1173

Figure 6. ALKBH5 knockdown regulated cell proliferation-related genes and m^{6}A

abundance in the 3ʹ untranslated regions of specific genes

PC9 cells were transfected with siNC, siALKBH5#1, or siALKBH5#3 for 96 h (n = 3

for each group). (**A, B**) Differentially expressed genes (DEGs) for siALKBH5#1 (A) or

siALKBH5#3 (B) were detected using expression microarray and shown using volcano

plots. Dashed lines indicate the threshold for the differential expression [fold change >

1.5 (log2 fold change = 0.5849) or < 0.67 (log2 fold change = –0.5849), $P < 0.01$ via

Student's t-test] for upregulated (pink dots) or downregulated (light blue dots) genes.

(**C**) Venn diagram indicating the number of common DEGs in ALKBH5-knockdown

cells with different siRNA sequences. (**D**) mRNA expression levels of genes related to

cell proliferation in ALKBH5-knockdown PC9 cells were analyzed using qPCR. Gene

expression was normalized to the GAPDH expression and was shown relative to the

expression with siNC. (**E**) m^6A level in the 3′ UTRs of target mRNA in PC9 cells

transfected with siALKBH5#1 or siALKBH5#3 was quantified via MeRIP qPCR using

anti-m6A antibody and was compared with that in cell transfected with siNC. The m^6A

level was normalized to that of the input fraction (n = 3). IgG was used to evaluate the

nonspecific binding of the target mRNA. (F; Upper panel) Prediction scores of m^6A

modification in the CDKN1A and TIMP3 genes were calculated using the SRAMP

algorithm. The combined scores were distributed through the full-length mRNA as

different levels of very high, high, moderate, and low confidence. Arrows show the

location of qPCR primers. Adenosines in consensus sequences for m^6A modification are

presented in red. (Lower panel) PolyA-enriched RNA extracted from PC9 cells

transfected with siALKBH5#1, siALKBH5#3, or siNC (n = 3) was immunoprecipitated

using anti-m^{6}A antibody or normal IgG. The m^{6}A level was calculated from transcript

abundance in input or MeRIP fraction quantified using qPCR. Results are presented as

mean ± SD. *$P < 0.05$, **$P < 0.01$, ***$P < 0.001$, ****$P < 0.0001$ indicates a

significant difference between the indicated groups.

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Figure 7. CDKN1A and TIMP3 were targets of m^{6}A modification via ALKBH5

(A) A schematic outline showing the workflow for the analysis of downstream targets of

ALKBH5. (**B**) Target protein levels in PC9 or A549 cells transfected with siALKBH5#1

or siALKBH5#3 were compared with those transfected with siNC via western blot

analysis. (**C**) Western blot analysis demonstrated CDKN1A (p21) or TIMP3 protein

levels in PC9 cells transfected with siALKBH5, siCDKN1A, both siALKBH5 and

siCDKN1A, or siNC. (**D**) Western blot analysis demonstrated TIMP3 protein levels in

A549 cells transfected with siALKBH5, siTIMP3, both siALKBH5 and siTIMP3, or

siNC. (**E** and **F**) Cell proliferation relative to baseline in PC9 (E) and A549 (F) cells

transfected with siALKBH5 was assessed via the CCK-8 assay and compared with that

in cells cotransfected with siALKBH5 and siCDKN1A or siTIMP3 (n = 3). ***$P <$

0.001, ****$P < 0.0001$ indicates a significant difference between the indicated groups.

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Figure 8. IGF2BPs was required for the ALKBH5-induced regulation of mRNA

expression and cell proliferation

(**A**) Expression levels of IGF2BP1, IGF2BP2, and IGF2BP3 (IGF2BPs) protein

determined using western blot analysis were compared between cell lines. (**B**) IGF2BP

protein levels in cells transfected with siALKBH5 (left end), those in cells transfected

with siIGF2BP1, siIGF2BP2, or siIGF2BP3 with or without siALKBH5 (middle two

lanes), or those with siNC (right end indicating both siALKBH5 and siIGF2BPs were

negative) were confirmed via western blot analysis. (**C**) Relative mRNA expression

levels of CDKN1A in PC9 cells or those of TIMP3 in A549 cells transfected with

siALKBH5 were analyzed via qPCR and compared with those in cells cotransfected

with siALKBH5 and one of the siIGF2BPs. Gene expression was normalized to the

GAPDH expression and was shown relative to the expression in siNC (n = 3). (**D**)

Expression levels of YTHDF2 protein determined using western blot analysis were

compared between cell lines. (**E**) Relative mRNA expression levels of CDKN1A in PC9

cells or those of TIMP3 in A549 cells transfected with siALKBH5 were analyzed via

qPCR and compared with those in cells cotransfected with siALKBH5 and siYTHDF2.

Gene expression was normalized to the GAPDH expression and was shown relative to

the expression in siNC (n = 3). (**F**) The remaining RNA level of CDKN1A in PC9 cells

or of TIMP3 in A549 cells after actinomycin D treatment for 0, 2, 4, and 6 h was

determined using qPCR and normalized to the expression at 0 h. RNA decay rate in

cells transfected with siALKBH5 and/or one of the siIGF2BPs and siNC were

compared with the stability of CDKN1A and TIMPs (n = 3). (**G**) Cell proliferation

relative to baseline in PC9 and A549cells transfected with siALKBH5 was assessed via

the CCK-8 assay and compared with that in cells cotransfected with siALKBH5 and one

of the siIGF2BPs (n = 3). (**H**) Schematic illustration for the proposed mechanism of

tumorigenicity via ALKBH5 in non-small-cell lung cancer. Upregulation of ALKBH5

in NSCLC reduces m^6A modifications on the 3′ UTR of specific genes. The loss of m^6A

decreases the opportunity for recognition by IGF2BPs and destabilizes the target

transcripts such as CDKN1A (p21) and TIMP3. Downregulation of CDKN1A (p21) and

TIMP3 induces cell cycle alteration and inhibits apoptosis. This ALKBH5–IGF2BPs

axis promotes cell proliferation and tumorigenicity, which, in turn, causes the

unfavorable prognosis of NSCLC. Results are presented as mean ± SD. *$P < 0.05$, **P

< 0.01, ***$P < 0.001$, ****$P < 0.0001$ indicates a significant difference between the

indicated groups.

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Figure 1

Figure 2

Figure 3

Figure 4

Figure 5

Figure 6

Figure 7

Figure 8