Repressing ABCB7 Potentiates Cisplatin Response in Pediatric Group 3 Medulloblastoma by Triggering Ferroptosis

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Abbreviations: ABC, ATP binding cassette; ANOVA, analysis of variance; BLC-2, B-cell lymphoma 2; BRCA1, breast cancer gene 1;CB, cerebellum; CD276, cluster of differentiation 276 (B7-H3); CDK6, cyclin-dependent kinase 6; c-Myc, c-myelocytomatosis oncogene; DDR, DNA damage repair; DCFDA, 2′,7′-Dichlorofluorescin diacetate; DFO, deferoxamine; FACs, fluorescence-activated cell sorting; FISH, fluorescence *in situ* hybridization; GPX4, glutathione peroxidase 4; GSH, glutathione; GSS, glutathione synthetase; IC_{50}, 50% inhibitory concentration; IHC, immunohistochemistry; i(17q), isochromosome 17q; KEGG, Kyoto encyclopedia of genes and genomes; KO, knock-out; LIP, labile iron pool; LPO, lipid peroxidation; MB, medulloblastoma; MDR, multiple drug resistance; miR, microRNA; miR-1253, microRNA 1253; MnTBAP, Mn(III)tetrakis(4-benzoic acid)porphyrin; mtROS, mitochondrial reactive oxygen species; MTT, 3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide; NC, negative control; NHA, normal human astrocytes; Non-SHH/WNT, non-Sonic Hedgehog/non-Wingless; PARP, poly ADP ribose polymerase; PCR, polymerase chain reaction; Ped, pediatric; PNET, primitive neuro-ectodermal tumor; ROS, reactive oxygen species; RSL3, RAS-selective lethal; SHH, Sonic Hedgehog; WNT, Wingless; XIAP, X-linked inhibitor of apoptosis; XTT, sodium 3′-[1-[(phenylamino)-carbony]-3,4-tetrazolium]-bis(4-methoxy-6-nitro)benzene-sulfonic acid hydrate

Abstract

Medulloblastomas (MB), the most common malignant pediatric brain tumor and a leading cause

of childhood mortality, are stratified into four primary subgroups. Deletions within chromosomal

locus 17p13.3, which houses multiple tumor suppressor genes including miR-1253, characterize

high-risk group 3 tumors. These aggressive tumors also enrich iron transport genes to satisfy

their high proliferative need. MiR-1253 targets iron transport by inhibiting the mitochondrial Fe-

S transporter, ABCB7. This study elucidated the impact of repressing ABCB7 on cisplatin

cytotoxicity in group 3 MB and whether these effects were mediated by ferroptosis. *In silico* and

in vitro analyses revealed specific enrichment of ABCB7 and GPX4, a critical regulator of

ferroptosis, in group 3 MB cell lines and tumors. MiR-1253 overexpression (miR-1253^{OE})

resulted in downregulation of both ABCB7 and GPX4, concurrently increasing mitochondrial

iron overload, mitochondrial oxidative stress, and lipid peroxidation, leading to cell death and

abrogation of medullosphere formation; repressing ABCB7 (si-ABC7 and ABCB7^{KO})

recapitulated these effects and abrogated GPX4 expression. Fractionation studies confirmed the

inhibitory impact of ABCB7 repression on GPX4 expression. Seahorse studies further revealed

mitochondrial dysfunction with ABCB7 repression. Cisplatin, a chemotherapeutic agent used in

group 3 MB treatment, induces cell death by DNA crosslinking; it also inhibits GPX4 expression

and may trigger ferroptosis. In ABCB7-repressed group 3 cancer cells, cisplatin IC$_{50}$ was

reduced 2-fold. Resultantly, cisplatin treatment augmented oxidative stress and lipid

peroxidation, depleted glutathione stores, and culminated in a higher index of cell death via

ferroptosis. In an orthotopic group 3 tumor model, ABCB7^{KO} potentiated cisplatin, prolonging

survival and reducing tumor burden. Taken together, the current study illustrates how targeting

iron transport can augment ferroptosis to potentiate cisplatin cytotoxicity in group 3 MB tumors.

68   Introduction

Of the primitive neuro-ectodermal tumors (PNET) afflicting the posterior fossa,

medulloblastoma (MB) is the most common malignant tumor of childhood, accounting for 85%

of PNETs and 20% of all posterior fossa tumors.[1-3] Based on high-throughput gene profiling

studies, MBs are stratified into four major molecular subgroups: WNT, SHH, group 3 and group

4.[4] Among these, patients with group 3 tumors suffer the worst prognosis (5-year overall survival

<50%) due to a highly aggressive phenotype punctuated by c-Myc amplification,

haploinsufficiency of chromosome 17p, presence of metastatic lesions at diagnosis, and high

rates of recurrence.[4-10] Recurrence can further reduce 5-year overall survival to <10% and is

partially fueled by the inability of young patients to tolerate effective chemo- and/or radiation

therapy.[4,11-13] For instance, systemic toxicity is an oft-cited justification for limitations in

cisplatin dosing, especially for group 3 disease, leading to <20% of treated patients receiving an

effective dose.[14-16] These facts underscore the urgent need to develop new strategies for high-risk

disease.

Recently, combining microRNAs with chemotherapy has garnered support in enhancing

therapeutic efficacy via targeting critical regulators of DNA damage repair (DDR), apoptosis, or

cell cycle.[17] In breast cancer, for example, miR-9 and miR-218 improved cisplatin

responsiveness by targeting BRCA1 and impeding DNA damage repair.[18,19] The miR-15 family

sensitized cisplatin-resistant cancer cells to apoptosis by targeting the G_2/M cell cycle

checkpoint.[20] In gastric and lung cancer cell lines, the miRNA cluster miR-200bc/429 sensitized

resistant cell lines to both vincristine and cisplatin by targeting BCL2 and XIAP.[21] In a

gemcitabine-resistant pancreatic xenograft model, miR-205 delivered with gemcitabine in

conjugated micelles resulted in significant tumor growth inhibition.[22] Most notably, miR-34a

replacement therapy (MRX34) has reached a phase 1 clinical trial (NCT01829971) in patients

with primary unresectable or metastatic liver cancer.[23]

Group 3 tumors have amongst the highest frequency of cytogenetic aberrations targeting the

short arm of chromosome 17 compared to the other subgroups, with high incidence reported on

locus 17p13.3.[24-27] We recently revealed strong tumor suppressive properties for miR-212 and

miR-1253, which reside on locus 17p13.3.[27,28] We showed that miR-1253 targets the cell cycle

checkpoint protein, CDK6, and CD276 (B7-H3), an immune checkpoint molecule implicated in

tumor aggressiveness. [27,29,30] Aside from reducing tumor cell viability, migration/invasion, and

colony formation, miR-1253 arrested cells at the G_0/G_1 phase, activated apoptotic pathways, and

triggered oxidative stress.[27] Numerous studies have recapitulated these strong tumor suppressive

properties in various cancers, including non-small cell lung carcinoma[31], osteosarcoma[32],

pancreatic cancer[33], male breast cancer[34], and colon cancer[35].

Amongst the putative targets of miR-1253 are the ATP-binding cassette (ABC) transporters

that confer multi-drug resistance to various tumors, including MB.[36,37] In metastatic breast

cancer, for example, miR-1253 was shown to inhibit the drug efflux pump, ABCB1, thereby

potentiating the cytotoxicity of doxorubicin.[38] However, this particular ABC transporter is not

amongst the deregulated ABC transporters reported in group 3 MB.[39] Another putative target of

miR-1253 is ABCB7, an iron transporter residing on the inner mitochondrial membrane involved

in iron homeostasis and Fe-S cluster biogenesis.[40] Deregulation of ABCB7 has been shown to

help cancer cells withstand apoptosis and ferroptosis.[41] Ferroptosis is a form of cell death

triggered by iron-mediated oxidative stress leading to lethal lipid peroxidation. This process is

tightly controlled by glutathione peroxidase 4 (GPX4), whose primary substrate is the anti-

oxidant, glutathione (GSH).[42-44] Recent studies have identified ferroptosis mitigation in tumor

progression and drug resistance.[45,46]

Of the standard chemotherapeutic agents used in the treatment of MB, cisplatin, a platinum-

based alkylating agent that induces DNA damage, has been shown to trigger cell death via

oxidative stress and ferroptosis.[45,47] Whether deregulation of ABCB7 leads to cisplatin resistance

in group 3 tumors or if miR-1253 can sensitize cisplatin response through inhibition of ABCB7

remains unstudied. Here, we show that targeting ABCB7 can potentiate cisplatin cytotoxicity in

group 3 MB by inducing iron overload, oxidative stress, and lipid peroxidation, which together

trigger ferroptosis.

Materials and Methods

Patient Samples

Formalin-fixed paraffin embedded tissue blocks and frozen tissues of normal cerebellum

(pediatric=12, adult=5) and pediatric MB specimens (WNT=1, SHH=9, grp 3=11, grp 4=16,

unknown=7) were obtained from the Children's Hospital and Medical Center, Omaha and the

University of Nebraska Medical Center after Institutional Review Board approval. Informed

consent was not required since the status of the study was exempted. For expression profiles of

ABCB7 and GPX4, we cross-analyzed two primary MB datasets (Kanchan *et al.*, GSE148390

and Weishaupt *et al.*, GSE124814).[48-50] For Spearman correlation, we used GSE148390. For

Kaplan-Meier Survival Analysis, we used the R2 database (Cavalli *et al.*, GSE85217).[9]

Cell Lines and Cell Culture

D283 and D341 were purchased from ATCC (Manassas, Virginia); D425 and D556 were kind

gifts from Darell Binger (Duke University Medical Center, Durham, NC); HDMB03 cells were a

kind gift from Till Milde (Hopp Children's Tumor Center, Heidelberg, Germany). Cell line

genotyping was verified using short tandem repeat (STR) DNA profiling (UNMC). D283, D341,

D425 and D556 cell line were maintained in DMEM supplemented with 10%-20% FBS and

100µg/ml penicillin/streptomycin. Normal human astrocytes (NHA) were purchased from Lonza

Bioscience (Walkersville, MD) and grown in ABM basal medium supplemented with growth

factors (Lonza Biosciences). All cell lines were maintained in 95% humidity, 37$\Box$C, 5% CO_2.

Transient Transfections

142   Cells at a density of 0.5 x 10^6 were seeded in 6-well plates for 24 h and subsequently serum

143   starved for 4 h prior to transfection. Cells were transfected with miR-1253 mimic (miRVanaTM

144   miRNA mimic, ThermoFisher, 100 nM) or scramble negative control (100 nM) with

145   Lipofectamine 2000 (Invitrogen) for 24 h.

CRISPR/Cas9 Knockouts

Lentiviral particles were prepared by transfection of plasmid expressing Cas9 or sgRNA of

ABCB7 (Addgene) co-transfected with pCMV-dR8.2 dvpr (Addgene) and pCMV-VSV-g

(Addgene) lentiviral packaging plasmids into HEK293T cells using polyethyleneimine (PEI)

transfection reagent. Virus-containing supernatant was collected and filtered 48 h after

transfection. HDMB03 cells in 6-well plates were infected with Cas9 viral supernatant

containing 4 µg/mL polybrene. Following blasticidin selection (10 µg/ml), the expression of

Cas9 was confirmed by Western blotting. Stable HDMB03 cells expressing Cas9 expression

were infected with the ABCB7 sgRNA viral supernatant containing 4 µg/ml polybrene. After 24

h of infection, cells were selected with 0.5 µg/ml puromycin. Single cell clones with Cas9

expression and ABCB7 knockout were amplified and used for subsequent experiments.

Cell Viability

After transfection, HDMB03 cells (5 x 10^3 cells/well) were re-seeded into 96-well plates and

treated with defined concentrations of cisplatin (1-50 μM) for 24-72 h. Subsequently, MTT (5

mg/mL) or XTT (0.3 mg/mL) was added to each well and incubated for 2 or 6 h, respectively, at

37 °C. MTT absorbance was measured at 570 nm; XTT absorbance was measured at 440 nm.

Data were analyzed using the SOFTMAX PRO software (Molecular Devices Corp., Sunnyvale,

CA, USA).

Colony Formation

165   After transfection, HDMB03 cells (1 x 10^3 cells/well) were re-seeded in 6-well plates. Cells were

166   treated with cisplatin (2 μM) and grown in complete medium for 9 days. Colonies were stained

167   with 0.25% crystal violet (dissolved in 50% methanol) for 30 min. Crystal violet was dissolved

168   in 10% acetic acid and absorbance read at 590 nm.

Luciferase Assay

Luciferase assay was performed as previously described.[27] Primers ABCB7 Forward: 5'-

TAAGCCTGACATAACGAGGA-3'; ABCB7 Reverse: 5'-GCATCTCAGTATTAACTCTAGC

-3') were purchased from Eurofins. 3'UTR Wild and 3'UTR-Mutant were incorporated into

XbaI restriction site of PGL3-control vector (Promega) expressing firefly luciferase. Dual

luciferase assay was done in HDMB03 cells (3 x 10^5 cells/well) in 12-well plates. Luciferase

activity was the measured using Dual-Luciferase Reporter Assay System (Promega) with a

Luminometer (Biotek).

Calcein AM Staining

Calcein-acetoxymethyl ester (Calcein AM) is a membrane permeable, non-fluorescent dye which

emits green fluorescence once internalized into the live cells and cleaved by cytoplasmic

esterase. Although calcein fluorescence is stable, it can be quenched by divalent metal ions such

as iron and cobalt. To estimate cytosolic labile iron pool (LIP), HDMB03 and D425 cells were

either transfected with scramble or miR-1253 or had ABCB7 knocked down. Cells were reseeded

on to glass coverslips treated with or without the iron chelator deferoxamine (DFO) for 6 h. Cells

were washed twice with 0.5 ml of PBS and incubated with 0.05 µM Calcein AM for 15 min at 37

°C. Cells were analyzed under confocal microscope. Ex/Em = 488 nm/525 nm.

Detection of Cytosolic and Mitochondrial Fe^{2+}

Scramble vs. miR-1253-transfected cells or wild-type vs. ABCB7^{KO} cells were seeded onto glass

coverslips and were treated with or without DFO (100 µM) for 6 h. For cytosolic LIP, 1 µmol/L

FerroOrange (Dojindo, Japan) and 100 nM MitoTraker^{TM} Deep Red FM were added to each

well; for mitochondrial LIP, 1 µM/L Mito-FerroGreen (Dojindo, Japan) and 100 nM MitoTraker

Deep Red FM were added to each well. Cells were incubated in a 37° C incubator equilibrated

with 95% air and 5% CO_2 for 30 min. After incubation cells were washed and counter-stained

with 4′,6-diamidino-2-phenylindole (DAPI). Cells were observed under a confocal fluorescence

microscope, $Ex/Em_{cytosolicLIP}$ = 561 nm/570-620 nm, $Ex/Em_{mitochondrialLIP}$ = 488 nm/500-550 nm.

Measurement of Intracellular Oxidative Stress

Intracellular ROS (H_2O_2) was measured using oxidation-sensitive fluorescent probe 2′,7′-

Dichlorofluorescin diacetate (DCFDA) (Sigma Aldrich, USA); mitochondrial $O_2^{\bullet-}$ was measured

using MitoSOX™ Red (Thermofisher, USA). Scramble vs. miR-1253-transfected cells or wild-

type vs. ABCB7^{KO} cells were treated with cisplatin or cisplatin and Ferrostatin-1 (Apexbio,

USA) for 24 h. Cells were incubated with 10 µM DCFDA or 5 µM MitoSOX™ Red for 30 min.

Oxidized DCFDA and MitoSOX™ Red were measured using at Ex/Em ~485/528 nm and

Ex/Em ~510/580, respectively.[51] Images were captured using EVOS FL Auto Imaging System

(EVOS FL Auto, Life Technologies). Oxidized DCFDA and MitoSOXRed were measured using

multimode plate reader at Ex/Em ~485/528 nm and Ex/Em ~510/580, respectively

Measurement of Lipid Peroxidation

The Image-iT® LPO kit was used to measure lipid ROS through oxidation of the C-11-

BODIPY® 581/591 sensor according to the manufacturer's instructions. Briefly, scramble vs.

miR-1253-transfected cells or wild-type vs. ABCB7^{KO} cells were treated with or without

cisplatin or a combination of cisplatin and Ferrostatin-1 for 24 h. Cells were then stained with

Image-iT® Lipid Peroxidation Sensor (10 μM) for 30 min and counter-stained with DAPI.

Images were captured by confocal microscopy.

Ferroptosis Assessment by Flow Cytometry

Scramble and miR-1253-transfected cells were treated with or without cisplatin or a combination

of cisplatin and Ferrostatin-1 for 24 h. After completion of treatment, cells were incubated with 5

µM of MitoSOX™ Red for 30 min. Cells were washed and stained with Annexin-V/Cy™5(BD

Biosciences). Cell populations were sorted and measured by flow cytometry.

Glutathione Estimation

Glutathione estimation was performed according to the manufacturer's instructions using GSH-

Glo™ Glutathione Assay kit (Promega, USA). Briefly, scramble vs. miR-1253-transfected cells

or wild-type vs. ABCB7^{KO} cells were seeded (5×10^3 cells/well) in the 96-well plates. Cells were

treated with or without cisplatin or in combination with cisplatin and Ferrostatin-1 for 24 h.

Plates were incubated in the dark for 30 min on a plate shaker with 100 µl of prepared 1x GSH-

Glo™ Reagent. Then, 100 µl of reconstituted Luciferin Detection Reagent was added to each

well and incubated in the dark for another 15 min. A standard curve was prepared using GSH

standard solution to facilitate the conversion of luminescence to GSH concentration.

Immunofluorescence Imaging

In cultured cells: scramble vs. miR-1253-transfected cells or wild-type vs. ABCB7^{KO} cells were

seeded onto coverslips, rinsed, and fixed using 4% paraformaldehyde (PFA) in PBS for 10 min

at room temperature. Cells were washed, incubated with 0.25% Triton X-100, and blocked with

3% BSA at room temperature. Cells were then incubated with primary antibody ABCB7 or

COXIV overnight. Following day, cells were incubated with Alexafluor 488 and Alexaflour 547

conjugated antibodies for 1 h. Cells were washed and counter stained with DAPI. Images were

captured at 63X using Carl Zeiss microscope (LSM 800 META).

In tissue: immunofluorescence was performed on surgically-resected, formalin-fixed, paraffin-

embedded sections of group 3 medulloblastomas. Deparaffinized tissue sections were blocked

with 5% BSA after heat induced epitope retrieval with citrate buffer (pH 6.0) and then incubated

with primary antibodies, ABCB7 rabbit monoclonal antibody (1:200), GPX4 rabbit monoclonal

antibody, or COXIV mouse monoclonal antibody (1:200). Following overnight incubation with

primary antibody, sections were incubated for 1 h with Alexa-488 or Alexa-547-conjugated,

mouse and rabbit secondary antibodies (1:200). Sections were counter-stained with DAPI.

Micrographs were captured at 20X using Carl Zeiss microscope (LSM 800 META).

PCR Primers

Total RNA extraction and quantitative PCR (qPCR) were performed according to manufacturer

protocol. The forward (F) and reverse (R) primer sequences were as follows: ABCB7 (F): 5'-

AAGATGTGAGCCTGGAAAGC-3' (R): 5'- AGAGGACAGCATCCTGAGGT-3'; GPx4 (F):

5'-ACAAGAACGGCTGCGTGGTGAA-3' (R): 5'-GCCACACACTTGTGGAGCTAGA-3'; β-

Actin (F): 5'-CACCATTGGCAATGAGCGGTTC-3'(R): 5'-

AGGTCTTTGCGGATGTCCACGT-3'.

Statistical Analysis

Data are presented as mean ± SD. All experiments were conducted at least in duplicates with 3-6 replicates per experiment. Statistical analyses were performed using Prism 9.2 (GraphPad Software). Differences between groups were compared using Student's t-test or one-way analysis of variance (ANOVA). Statistical significance was established at *p <0.05; **p <0.01; ***p <0.001; ****p <0.0001. Statistical analyses of high-throughput sequencing data were performed using R Statistical Software v4.1.1 (R Core Team), expression values were compared using a Mann-Whitney U test.

Results

ABCB7, a novel target of miR-1253, is enriched in group 3 medulloblastomas.

In our previous study, we identified miR-1253 as a novel tumor suppressor gene in MB, along with its multiple oncogenic targets.[27] Here, we sought to determine other targets of miR-1253, especially those that may regulate drug sensitivity in MB. Upon restoration of miR-1253, using transient overexpression in HDMB03 cells, we observed potent downregulation of the ABC transporter superfamily by KEGG pathways analysis (**Supplementary Figures 1A**). We wanted to then isolate specific targets of miR-1253 relevant to group 3 MB aggressiveness. We began by identifying ABC transporters enriched in group 3 MB (**Supplementary Figure 1B, column 1**). From this list, we isolated transporters whose high expression in group 3 MB conferred a poor prognosis (**Supplementary Figure 1B, column 2, red**). From this cohort, we selected transporters whose expression was inhibited by miR-1253 overexpression in HDMB03 cells (**Supplementary Figure 1B, column 3**). This comparative analysis revealed ABCB7 as the best putative miR-1253 target for further study.

ABCB7 resides on the inner mitochondrial membrane and plays a key role in Fe-S cluster

biosynthesis and export.[52-54] When we compared the differential gene expression of G3MB to

normal cerebellum in our local cohort of MB patients, we observed enrichment of genes

regulating iron homeostasis and transport, including ABCB7 **(Supplementary Figures 1C)**.

Moreover, upon querying the Molecular Signature Database (MSigDB, version 7.4), we

discovered an enrichment of Fe-S cluster assembly **(Supplementary Figures 1D)**. We also

discovered that in multiple MB cohorts, ABCB7 is enriched **(Supplementary Figure 2A)** and

that high expression is associated with a poorer prognosis **(Supplementary Figure 2B)**. We then

compared subgroup-specific ABCB7 expression in 3 recent MB cohorts and identified consistent

enrichment of ABCB7 in group 3 tumors **(Figure 1A; Supplementary Figures 2C and 2D)**.

High ABCB7 expression in these group 3 patients was associated with dramatically poorer

overall survival **(Figure 1B)**. These findings strengthened our premise to study ABCB7

enrichment as a possible mechanism for group 3 MB aggressiveness.

Now focusing on ABCB7, we first confirmed by confocal microscopy that ABCB7 co-

localizes to the mitochondria, as evidenced by co-staining with COXIV, an inner mitochondrial

membrane protein critical to electron transport **(Figure 1C)**. Additionally, we confirmed robust

expression of ABCB7 in a panel of aggressive group 3 MB cell lines compared to normal human

astrocytes **(Figure 1D)**.

To demonstrate that ABCB7 is inhibited by miR-1253, we first showed translational

repression via Western blotting in 2 group 3 MB cell lines, D425 **(Figure 1E)** and HDMB03

(Figure 1F). In the same cell lines, we showed co-localization of ABCB7 with COXIV to the

mitochondria and visualized the effect of miR-1253 on ABCB7 expression, as illustrated by a

dramatically reduced green fluorescence by confocal microscopy **(Figure 1G)**. Finally, we

showed direct binding of miR-1253 to ABCB7 via a dual-luciferase reporter assay **(Figures 1H)**.

Together, these data confirmed that i) ABCB7 expression is enriched in group 3 tumors, ii)

ABCB7 enrichment is a poor prognostic sign in group 3 patients, and iii) miR-1253 effectively

inhibits ABCB7 expression.

ABCB7 repression attenuates G3MB cancer cell aggressiveness.

While the pathogenic role of ABCB7 has yet to be elucidated in MB, in glioma cells, ABCB7

inhibition triggered both apoptotic and non-apoptotic cell death through iron overload and

ROS.[41] Given the promiscuous nature of miRs, we adopted additional strategies to repress

ABCB7 expression in G3MB cancer cells by using CRISPR/Cas9 knockdown (ABCB7^{KO}) or

small-interfering RNA (si-ABCB7) **(Figure 2A)**. Using these strategies, we observed potent

inhibition of primary medullosphere formation **(Figure 2B)**, reduced cancer cell viability by

MTT assay **(Figure 2C)**, and reduced calcein staining indicating loss of intracellular esterase

activity due to cell turnover **(Figure 2D)**, all evidencing that ABCB7 repression attenuates

aggressiveness of HDMB03 cells.

ABCB7 repression triggers iron overload.

Given its primary role as a Fe-S cluster exporter, we studied the impact of repressing

ABCB7 expression on iron balance in HDMB03 cells using ferric ammonium citrate (FAC),

which induces iron overload[55], as our positive control. We observed an accumulation of free iron

in the mitochondria (**MitoFerroGreen**) and the cytoplasm (**FerroOrange**) in HDMB03 cells

with repressed ABCB7 expression by miR-1253 and si-ABCB7; with iron chelation using

deferoxamine (DFO), the phenotype reverted to wild-type **(Figures 3A and 3B)**. These data

were recapitulated with ABCB7^{KO} in HDMB03 cells **(Supplementary Figure 3)**. Calcein AM is

a membrane-permeable dye that produces green fluorescence when internalized and can be

rapidly quenched by divalent metals like iron. Repression of ABCB7 by miR-1253 or ABCB7[KO]

led to quenching of Calcein AM in group 3 MB cell lines (**Supplementary Figure 5**), further

strengthening our observations of iron overload induced by ABCB7 inhibition.

ABCB7 repression enhances cellular ROS and induces lipid peroxidation.

Free iron generates reactive oxygen species (ROS) via the Fenton reaction and disrupts the

phospholipid bilayer resulting in lethal lipid peroxidation.[56-58] We subsequently quantified total

and mitochondrial ROS using DCFDA, which fluoresces green in the presence of hydrogen

peroxide (H_2O_2), and Mitosox, which fluoresces red in the presence of mitochondrial superoxide

(O_2^-). We also quantified lipid peroxidation through BODIPY-C11 staining, a membrane-

targeted lipid ROS sensor, using an Image-iT[TM] lipid peroxidation kit which provides a

ratiometric indication of fatty acid oxidation that can be quantified by microscopy and flow

cytometry (FACS). We observed that ABCB7 repression (miR, si) induced similar ROS levels to

positive controls, hydrogen peroxide and erastin, a known inducer of ferroptosis[59] (ERA)

(**Figures 3C and 3D**). Repressing ABCB7 also resulted in higher lipid peroxidation than erastin

(**Figure 4A**). We showed the same impact of ABCB7 repression by miR-1253 on oxidative

stress in D425 and HDMB03 (**Supplementary Figures 4A-D and 5D**).

Moreover, given that ABCB7 repression induces mitochondrial iron overload, we used a

Seahorse assay to study if ABCB7 repression also impacted mitochondrial function. ABCB7

repression by miR-1253[OE] significantly reduced the oxygen consumption rate (OCR) of

HMDB03 cells, a direct measure of mitochondrial ATP production. It concurrently increased the

extracellular acidification rate (ECAR), a measure of ATP production under anaerobic conditions

by glycolysis (**Figure 4B**).

Ferroptosis is defined as an iron-dependent form of regulated cell death resulting from lipid

peroxidation.[42] Ferrostain-1 (FER) scavenges ROS and lipid hyperoxides and prevents

ferroptosis[60]. Given our observations with iron accumulation, ROS generation, and lipid

peroxidation, we wanted to assess whether ABCB7 repression can, in fact, trigger ferroptosis.

D425 and HDMB03 cells transfected with miR-1253 were stained with MitoSOX™ Red (for

$O_2^{\bullet-}$) and Annexin-V/Cy™5 (marker of apoptotic cell death). Flow cytometry analysis revealed a

significant (~3-fold) rise in dual-stained cells (Q2), indicating oxidative stress-mediated cell

death **(Supplementary Figures 4E and 4F)**. Moreover, ferrostatin-1 rescued ABCB7-repressed

cells from both oxidative stress **(Figures 3C and 3D)** and lipid peroxidation **(Figure 4A)**. These

are the <u>first data</u> showing that ABCB7 repression can trigger events that culminate in ferroptosis.

ABCB7 repression inhibits G3MB tumor growth.

We next examined the impact of ABCB7^{KO} on tumor burden in a validated G3MB model[28].

We generated tumors in NOD *scid* gamma (NSG) mice by orthotopically injecting wildtype or

ABCB7^{KO} HDMB03 cells ($1x10^5$) into the cerebellum **(Figure 5A)**. At 2 weeks, mice from the

KO group had significantly smaller tumors compared to wildtype **(Figure 5B)**. Moreover, mice

in the wildtype arm (5) died by day 18; in contrast, mice in the KO arm (5) survived 10 days

longer **(Figure 5C)**. Histologically, we visualized reduced c-Myc expression, a defining high-

risk feature of group 3 MB, in tumors procured from KO mice. These data reveal that ABCB7^{KO}

attenuates G3MB tumor burden.

ABCB7 repression inhibits GPX4, the primary regulator of ferroptosis.

Cancer cells have the inherent ability to activate redox buffering systems to thrive in a highly

oxidative environment.[61] Glutathione (GSH) is a key player in this response and a critical

cofactor for glutathione peroxidase 4 (GPX4). GPX4 uses GSH to reduce toxic lipid

hydroperoxides to non-toxic lipid alcohols and is thus a central regulator of ferroptosis, found in

the nucleus, cytoplasm, and mitochondria **(Supplementary Figure 6A)**.[58] GPX4 overexpression

elevates aggressiveness in multiple cancers (breast, liver, GI, pancreatic).[62] In MB, we noted

significant enrichment of GPX4 in all MB tumor subtypes, with the highest expression in group

3 MB **(Supplementary Figures 6B and 6C)**; prognosis in high-expressing patients was poor

(Supplementary Figure 6D). In G3MB, glutathione metabolism and GPX4 are both enriched

(Supplementary Figures 1C and 1D). Immunofluorescence studies revealed high expression of

GPX4 in group 3 MB and co-localization of GPX4 to the mitochondria **(Supplementary Figure**

6E). In classic group 3 MB cell lines, GPX4 expression was significantly elevated compared to

normal human astrocytes **(Supplementary Figure 6F)**.

Given the pivotal role of GPX4 in ferroptosis mitigation, we studied the impact of ABCB7

repression on GPX4, expecting an upregulation to counter the oxidative stress induced by iron

overload. Instead, we observed the opposite. In D425 and HDMB03 cells, miR-1253[OE] reduced

GPX4 expression **(Figure 6A and 6B)**. However, ABCB7[KO] led to a near abrogation of GPX4

expression **(Figure 6C)**. In support, we noted a positive Spearman correlation (R=0.72, *p<0.001*)

between GPX4 and ABCB7 **(Figure 6D)**. We further explored this relationship using

fractionation studies. While miR-1253[OE] reduced GPX4 levels in the cytoplasm and

mitochondria **(Figure 6F)**, ABCB7[KO] **(Figure 6G)** and si-ABCB7 **(Figure 6H)** again showed

near abrogation of GPX4 expression from the cell. GSH, a main substrate of GPX4, was

concurrently reduced in miR-1253-overexpressing D425 and HDMB03 cells **(Figure 6E)**. This

is the <u>first time</u> a link has been proposed between ABCB7 and GPX4, providing us preliminary

insight into the impact of the miR-1253/ABCB7 axis on GPX4 and the cellular response to

ferroptosis.

ABCB7 repression potentiates cisplatin cytotoxicity in G3MB cells.

Cisplatin, a platinum-containing chemotherapeutic agent, induces DNA damage via various mechanisms, including (i) crosslinking DNA purine bases, (ii) inducing oxidative stress, and (iii) interfering with DNA repair machinery, that can eventually lead to cancer cell death.[63] Recent data purport that it can also inhibit GSH and GPX4.[45,47,64,65] In HDMB03 cells, we observed cisplatin to inhibit both ABCB7 and GPX4 expression **(Figure 7A)**. We next tested if ABCB7 repression potentiated cisplatin cytotoxicity. In HDMB03 cells with repressed ABCB7 expression, cisplatin elicited higher cytotoxicity compared to controls (**Figure 7B**). Moreover, in D425 **(Figure 7Ci)** and HDMB03 **(Figure 7Cii)** cells, ABCB7 repression via miR-1253^{OE} resulted in a ~2-fold reduction in the IC$_{50}$ of cisplatin, while si-ABCB7 showed the same effect in HDMB03 cells **(Figure 7Ciii)**. Colony formation of HDMB03 cells was nearly abrogated in miR-1253^{OE} cells treated with cisplatin. **(Figure 7D)**.

We next investigated whether cisplatin treatment enhanced mitochondrial (mtROS) and cytosolic ROS in group 3 MB cells. Using prior fluorescent probes for mtROS (MitoSOX™ Red) and cytosolic ROS (DCFDA), we studied ABCB7 repression by miR-1253^{OE}-transfected cells subjected to 10 µM cisplatin in D425 and 2 µM cisplatin in HDMB03 cells at 24 h; we concurrently examined cisplatin treatment (2 µM) of ABCB7^{KO} HDMB03 cells. As prior, ABCB7 repression by these methods induced significantly higher levels of mtROS and cytosolic ROS compared to control. Moreover, in all cases, ABCB7 repression potentiated cisplatin-mediated ROS (**Figures 8A-C**). Concurrent treatment with ferrostatin-1 returned ROS levels to that of untreated miR-1253^{OE} or si-ABCB7 (**Figure 8D and 8E**). These data suggest that a portion of cisplatin-induced cytotoxicity in group 3 MB cells is being induced by ferroptosis.

ABCB7 repression potentiates cisplatin toxicity through ferroptosis in G3MB cells.

We next wanted to confirm that ferroptosis was elicited by miR-1253 alone and potentiated

by combination with cisplatin. We systematically looked at mtROS and cytosolic ROS, lipid

peroxidation, GSH levels, and levels of apoptotic and ferroptotic cell death in miR-1253-

transfected or ABCB7^{KO} cancer cells treated with 1) cisplatin and 2) in combination with

ferrostatin-1 (a potent inhibitor of ferroptosis).

First, cisplatin alone induced oxidative stress; addition of ferrostatin-1 to cisplatin treatment

led to a dramatic reduction in H_2O_2 but not $O_2^{\bullet-}$. Second, miR-1253 expression or ABCB7^{KO} led

to a significant rise in oxidative stress, which was potentiated by the addition of cisplatin;

treatment with ferrostatin-1 substantially reduced the generation of both H_2O_2 and $O_2^{\bullet-}$ (**Figures**

9A and 9B; Supplementary Figure 7A and 7B). Similarly, while cisplatin alone had modest

effects on lipid peroxidation, combining it with miR-1253 expression or ABCB7 knockdown

resulted in the highest levels of lipid peroxidation; in turn, ferrostatin-1 significantly reduced

lipid peroxidation in ABCB7-repressed HDMB03 cells (**Figure 9C and Supplementary**

Figures 7C and 7D). Given the central importance of glutathione as an antioxidant, we observed

that cisplatin depleted GSH in miR-1253 transfected and ABCB7^{KO} HDMB03 cells with the

addition of ferrostatin having some recovery effects. As prior, cisplatin added to cells with

ABCB7 inhibition had the strongest effect in depleting GSH; ferrotstatin-1 catalyzed the

recovery of reduced glutathione levels in these cells (**Figure 9D** and **Supplementary Figure**

7E).

Finally, examining O_2-mediated cell death (as a proxy for ferroptosis) at 24 h, cisplatin

showed a small rise in ROS-mediated cell death and apoptosis, while miR-1253 led to a larger

rise in both. Treating miR-1253-transfected HDMB03 cells with cisplatin accomplished a

dramatic increase in both ROS-mediated and apoptotic cell death; ferrostatin-1 treatment rescued

the former, strongly implicating the important contribution of ferroptosis to the mechanism of

miR-1253-induced cell death **(Figure 9E)**. Together these data substantiate the cardinal role of

miR-1253 in inducing ferroptosis and its potentiating effects on cisplatin cytotoxicity.

Discussion

Amongst the most devastating diagnoses in a pediatric patient is a tumor of the central

nervous system, with medulloblastoma being the most common malignant tumor.[3,4,66,67]

Punctuated for group 3 MB, poor survival (5-year OS <50%) in these patients is attributable to a

combination of young age at diagnosis (peak age 3-5), metastases at diagnosis (up to 50%), and

c-Myc amplification.[9,28,68-71] Current treatment regimens have yet to impact the dismal prognosis

with stagnant survival rates seen over the last decade.[72] An inability to tolerate mainstay of

therapy especially for young patients fuels high relapse rates (~30%) which are universally fatal.

For example, in children under the age of 4 years relapse was noted in ~60% of patients who did

not receive upfront craniospinal irradiation. Moreover, relapse rates were highest in group 3 MB

tumors and those with i17q and c-Myc amplification.[73] In those that do manage to survive,

irreversible damage to the hypothalamic-pituitary axis is sustained from cytotoxic treatment

regimens resulting in short stature, cognitive impairments, and emotional lability.[74,75] Thus, the

need for novel therapeutic strategies that mitigate drug-related cytotoxicity yet accomplish

widespread tumor abstraction for this subgroup is dire.

Elevated recurrence rates have often been conjectured to be linked to mechanisms for drug

resistance in group 3 MB, which may include high expression of multi-drug resistance (MDR)

genes belonging to the ABC transporter family.[36,37,39,76,77] Cytotoxic drugs, in combination with

tumor suppressive miRNAs, have the potential for a more complex and profound effect on

tumorigenesis and may possess the ability to address drug resistance patterns, especially if they

can target MDR genes.[78] Here, we demonstrated a strong negative enrichment of the ABC

transporter family with miR-1253 expression restoration in group 3 MB cells. Of the multiple

transporters identified via our bioinformatics approach, we isolated ABCB7, whose deregulated

expression profile in group 3 tumors was strongly associated with poor prognosis, as a target of

miR-1253.

ABCB7 is an iron transporter residing on the inner mitochondrial membrane and involved in

Fe-S cluster biogenesis.[52,79] ABCB7 deficiency can lead to decreased expression of electron

transport chain (ETC) complex proteins I, II, IV and V, which can trigger impaired oxidative

phosphorylation and mitochondrial membrane integrity resulting in oxidative stress.[40,80-82] In

glioma cells, inhibition of ABCB7 resulted in disruption of iron transport and ROS generation

triggering apoptotic and non-apoptotic cell death.[41] Iron accumulation can trigger oxidative stress

and vice versa[56,83], resulting in lethal lipid peroxidation activating ferroptosis, which is distinct

from apoptosis, necrosis, autophagy, and pyroptosis.[84]

With a strong premise for exploring iron imbalance through miR-1253, our subsequent

results substantiated a ferroptotic role for miR-1253 in MB. First, miR-1253 induced intracellular

iron accumulation in D425 and HDMB03 cells, effectively abrogated by pre-treatment with an

iron chelator, DFO. ABCB7^{KO} resulted in a similar phenotype. This resulted in elevated

mitochondrial ROS ($O_2^{\bullet-}$) and cytosolic ROS (H_2O_2). We also recorded a high lipid oxidation

profile in these cell lines concurrent with miR-1253 expression. Finally, using AnnexinV and

MitoSOX™ Red staining, we revealed a significantly elevated dual staining population of cells

in miR-1253-expressing cells. Taken together, these results are highly indictive of ferroptosis

induction by miR-1253 in group 3 MB cells.

Ferroptosis can also be induced by disruption of glutathione synthesis or inhibition of

glutathione peroxidase 4.[85] Cancer cells have the capacity to activate redox buffering systems to

survive in a highly oxidative environment resulting from deregulated cellular functions.[61]

Glutathione is a key player in this response and a critical cofactor for glutathione peroxidase 4

(GPX4). GPX4, a central regulator of ferroptosis upregulated in various cancers, uses glutathione

to reduce ROS and lipid hydroperoxide levels thus facilitating tumor cell survival in an

environment with high oxidative stress.[86] Additionally, GSH binds Fe^{2+} to prevent iron oxidation

and is thus a critical component controlling the labile iron pool.[87] Of note, ABCB7 harbors a

GSH binding pocket, and GSH is a required substrate for cytosolic and nuclear Fe-S protein

biogenesis and iron homeostasis.[54,88] In group 3 tumors, we not only showed deregulated GPX4

expression but also a strong positive correlation with ABCB7. Resultantly, miR-1253 expression

or ABCB7[KO] strongly inhibited GPX4 expression and reduced glutathione levels. These data

demonstrate the contribution of disrupting GPX4 and glutathione metabolism in miR-1253-

mediated oxidative stress mechanisms resulting in ferroptosis.

MiRNA mimics have been shown to possess the capability of restoring the sensitivity of

cancer cells for chemotherapeutic agents and to thus subsequently enhance their effectiveness.

For example, miR-429, miR-383, miR-101-3p, miR-195, miR-634, and miR-1294 elicited a 2-5

fold reduction in the EC_{50} and IC_{50} values in combination with gemcitabine, temozolomide, and

paclitaxel.[78,89-94] Of the standard chemotherapies for medulloblastoma tumors, only cisplatin has

been shown to trigger both apoptosis and ferroptosis, via oxidative stress, GSH depletion, and

GPX4 inactivation.[45,47,64,65] Moreover, a microarray-based study of the IC_{50} of cisplatin in 60

NCI cell lines identified multiple ABC transporters, including 3 iron transporters, i.e. ABCB6,

ABCB7 and ABCB10, in conferring cisplatin drug resistance.[95]

Given the ferroptotic mechanism we elucidated for miR-1253, we studied whether miR-1253

expression can potentiate cisplatin cytotoxicity in group 3 MB cells. We report a 2-fold reduction

in the IC_{50} value of cisplatin with miR-1253 induction in D425 and HDMB03 cells. Combination

treatment had dramatic effects on the clonal potential of HDMB03 cells. We then demonstrated

the highest induction of mitochondrial and cytosolic ROS, lipid peroxidation, and GSH depletion

in miR-1253-expressing HDMB03 and $ABCB7^{KO}$ HDMB03 cells treated with cisplatin.

Consequently, combination therapy resulted in the highest degree of ferroptosis in these cell

lines. These effects were reversed by ferrostatin-1, a potent inhibitor of ferroptosis, lending

further validity to the central role of ferroptosis in the mechanism of miR-1253-mediated effects

and cisplatin potentiation.

Overall, our study has identified novel tumor suppressive properties for miR-1253. First,

miR-1253 directly inhibits ABCB7 expression, thus inducing labile iron pool within MB cancer

cells and stimulating ROS production. MiR-1253 can concurrently downregulate the expression

of GPX4 and deplete GSH, further exacerbating ROS. Together, the generation of lipid

hyperoxides progresses unabated, leading to cancer cell death via ferroptosis. We also leveraged

these properties by showing potentiation of cisplatin cytotoxicity and thus enhanced therapeutic

efficacy in group 3 MB cells. Together, our findings provide proof-of-concept for further

exploration of tumor suppressive microRNAs as therapeutic adjuncts to standard chemotherapy.

Such a strategy may mitigate the current limitations to treatment regimens in our youngest high

risk patients.

References

1. Taylor RE, Donachie PH, Weston CL, et al. Impact of radiotherapy parameters on outcome for patients with supratentorial primitive neuro-ectodermal tumours entered into the SIOP/UKCCSG PNET 3 study. *Radiother Oncol.* 2009; 92(1):83-88.
2. Udaka YT, Packer RJ. Pediatric Brain Tumors. *Neurol Clin.* 2018; 36(3):533-556.
3. Ostrom QT, Patil N, Cioffi G, Waite K, Kruchko C, Barnholtz-Sloan JS. CBTRUS Statistical Report: Primary Brain and Other Central Nervous System Tumors Diagnosed in the United States in 2013-2017. *Neuro-oncology.* 2020; 22(12 Suppl 2):iv1-iv96.
4. Taylor MD, Northcott PA, Korshunov A, et al. Molecular subgroups of medulloblastoma: the current consensus. *Acta neuropathologica.* 2012; 123(4):465-472.
5. Zapotocky M, Mata-Mbemba D, Sumerauer D, et al. Differential patterns of metastatic dissemination across medulloblastoma subgroups. *J Neurosurg Pediatr.* 2018; 21(2):145-152.
6. Northcott PA, Korshunov A, Witt H, et al. Medulloblastoma comprises four distinct molecular variants. *Journal of clinical oncology : official journal of the American Society of Clinical Oncology.* 2011; 29(11):1408-1414.
7. Ellison DW, Kocak M, Dalton J, et al. Definition of disease-risk stratification groups in childhood medulloblastoma using combined clinical, pathologic, and molecular variables. *Journal of clinical oncology : official journal of the American Society of Clinical Oncology.* 2011; 29(11):1400-1407.
8. Kool M, Koster J, Bunt J, et al. Integrated genomics identifies five medulloblastoma subtypes with distinct genetic profiles, pathway signatures and clinicopathological features. *PloS one.* 2008; 3(8):e3088.
9. Cavalli FMG, Remke M, Rampasek L, et al. Intertumoral Heterogeneity within Medulloblastoma Subgroups. *Cancer cell.* 2017; 31(6):737-754 e736.
10. Ramaswamy V, Remke M, Bouffet E, et al. Recurrence patterns across medulloblastoma subgroups: an integrated clinical and molecular analysis. *Lancet Oncol.* 2013; 14(12):1200-1207.
11. Rieken S, Mohr A, Habermehl D, et al. Outcome and prognostic factors of radiation therapy for medulloblastoma. *Int J Radiat Oncol Biol Phys.* 2011; 81(3):e7-e13.
12. Packer RJ, Goldwein J, Nicholson HS, et al. Treatment of children with medulloblastomas with reduced-dose craniospinal radiation therapy and adjuvant chemotherapy: A Children's Cancer Group Study. *Journal of clinical oncology : official journal of the American Society of Clinical Oncology.* 1999; 17(7):2127-2136.
13. Gajjar A, Chintagumpala M, Ashley D, et al. Risk-adapted craniospinal radiotherapy followed by high-dose chemotherapy and stem-cell rescue in children with newly diagnosed medulloblastoma (St Jude Medulloblastoma-96): long-term results from a prospective, multicentre trial. *The Lancet. Oncology.* 2006; 7(10):813-820.
14. Martin AM, Raabe E, Eberhart C, Cohen KJ. Management of pediatric and adult patients with medulloblastoma. *Curr Treat Options Oncol.* 2014; 15(4):581-594.
15. Enriquez Perez J, Fritzell S, Kopecky J, Visse E, Darabi A, Siesjo P. The effect of locally delivered cisplatin is dependent on an intact immune function in an experimental glioma model. *Sci Rep.* 2019; 9(1):5632.
16. Nageswara Rao AA, Wallace DJ, Billups C, Boyett JM, Gajjar A, Packer RJ. Cumulative cisplatin dose is not associated with event-free or overall survival in children with newly diagnosed average-risk medulloblastoma treated with cisplatin based adjuvant chemotherapy: report from the Children's Oncology Group. *Pediatr Blood Cancer.* 2014; 61(1):102-106.
17. Mognato M, Celotti L. MicroRNAs Used in Combination with Anti-Cancer Treatments Can Enhance Therapy Efficacy. *Mini Rev Med Chem.* 2015; 15(13):1052-1062.

18. He X, Xiao X, Dong L, et al. MiR-218 regulates cisplatin chemosensitivity in breast cancer by targeting BRCA1. *Tumour Biol.* 2015; 36(3):2065-2075.

19. Sun C, Li N, Yang Z, et al. miR-9 regulation of BRCA1 and ovarian cancer sensitivity to cisplatin and PARP inhibition. *J Natl Cancer Inst.* 2013; 105(22):1750-1758.

20. Pouliot LM, Chen YC, Bai J, et al. Cisplatin sensitivity mediated by WEE1 and CHK1 is mediated by miR-155 and the miR-15 family. *Cancer Res.* 2012; 72(22):5945-5955.

21. Zhu W, Xu H, Zhu D, et al. miR-200bc/429 cluster modulates multidrug resistance of human cancer cell lines by targeting BCL2 and XIAP. *Cancer Chemother Pharmacol.* 2012; 69(3):723-731.

22. Mittal A, Chitkara D, Behrman SW, Mahato RI. Efficacy of gemcitabine conjugated and miRNA-205 complexed micelles for treatment of advanced pancreatic cancer. *Biomaterials.* 2014; 35(25):7077-7087.

23. Hong DS, Kang YK, Borad M, et al. Phase 1 study of MRX34, a liposomal miR-34a mimic, in patients with advanced solid tumours. *British journal of cancer.* 2020; 122(11):1630-1637.

24. Hoff C, Seranski P, Mollenhauer J, et al. Physical and transcriptional mapping of the 17p13.3 region that is frequently deleted in human cancer. *Genomics.* 2000; 70(1):26-33.

25. McDonald JD, Daneshvar L, Willert JR, Matsumura K, Waldman F, Cogen PH. Physical mapping of chromosome 17p13.3 in the region of a putative tumor suppressor gene important in medulloblastoma. *Genomics.* 1994; 23(1):229-232.

26. Steichen-Gersdorf E, Baumgartner M, Kreczy A, Maier H, Fink FM. Deletion mapping on chromosome 17p in medulloblastoma. *British journal of cancer.* 1997; 76(10):1284-1287.

27. Kanchan RK, Perumal N, Atri P, et al. MiR-1253 exerts tumor-suppressive effects in medulloblastoma via inhibition of CDK6 and CD276 (B7-H3). *Brain Pathol.* 2020; 30(4):732-745.

28. Perumal N, Kanchan RK, Doss D, et al. MiR-212-3p functions as a tumor suppressor gene in group 3 medulloblastoma via targeting nuclear factor I/B (NFIB). *Acta neuropathologica communications.* 2021; 9(1).

29. Mao Y, Li W, Chen K, et al. B7-H1 and B7-H3 are independent predictors of poor prognosis in patients with non-small cell lung cancer. *Oncotarget.* 2015; 6(5):3452-3461.

30. Kang FB, Wang L, Jia HC, et al. B7-H3 promotes aggression and invasion of hepatocellular carcinoma by targeting epithelial-to-mesenchymal transition via JAK2/STAT3/Slug signaling pathway. *Cancer Cell Int.* 2015; 15:45.

31. Liu M, Zhang Y, Zhang J, et al. MicroRNA-1253 suppresses cell proliferation and invasion of non-small-cell lung carcinoma by targeting WNT5A. *Cell death & disease.* 2018; 9(2):189.

32. Mo J, Zheng T, Lei L, et al. MicroRNA-1253 Suppresses Cell Proliferation Migration and Invasion of Osteosarcoma by Targeting MMP9. *Technol Cancer Res Treat.* 2021; 20:1533033821995278.

33. Xu Y, Yao Y, Gao P, Cui Y. Upregulated circular RNA circ_0030235 predicts unfavorable prognosis in pancreatic ductal adenocarcinoma and facilitates cell progression by sponging miR-1253 and miR-1294. *Biochemical and biophysical research communications.* 2019; 509(1):138-142.

34. Merino MJ, Gil S, Macias CG, Lara K. The Unknown microRNA Expression of Male Breast Cancer. Similarities and Differences with Female Ductal Carcinoma. Their Role as Tumor Biomarker. *Journal of Cancer.* 2018; 9(3):450-459.

35. Yang D, Zhang D. miR-1253, a novel tumor suppressor gene in colon cancer, is associated with poor patients prognosis. *Clin Exp Med.* 2021.

36. Szakacs G, Paterson JK, Ludwig JA, Booth-Genthe C, Gottesman MM. Targeting multidrug resistance in cancer. *Nature reviews. Drug discovery.* 2006; 5(3):219-234.

37. Choi YH, Yu AM. ABC transporters in multidrug resistance and pharmacokinetics, and strategies for drug development. *Current pharmaceutical design.* 2014; 20(5):793-807.

38. Bao L, Hazari S, Mehra S, Kaushal D, Moroz K, Dash S. Increased expression of P-glycoprotein and
doxorubicin chemoresistance of metastatic breast cancer is regulated by miR-298. *The American*
journal of pathology. 2012; 180(6):2490-2503.
39. Morfouace M, Cheepala S, Jackson S, et al. ABCG2 Transporter Expression Impacts Group 3
Medulloblastoma Response to Chemotherapy. *Cancer research*. 2015; 75(18):3879-3889.
40. Maio N, Kim KS, Holmes-Hampton G, Singh A, Rouault TA. Dimeric ferrochelatase bridges ABCB7
and ABCB10 homodimers in an architecturally defined molecular complex required for heme
biosynthesis. *Haematologica*. 2019; 104(9):1756-1767.
41. Kim JY, Kim JK, Kim H. ABCB7 simultaneously regulates apoptotic and non-apoptotic cell death
by modulating mitochondrial ROS and HIF1alpha-driven NFkappaB signaling. *Oncogene*. 2020;
39(9):1969-1982.
42. Stockwell BR, Friedmann Angeli JP, Bayir H, et al. Ferroptosis: A Regulated Cell Death Nexus
Linking Metabolism, Redox Biology, and Disease. *Cell*. 2017; 171(2):273-285.
43. Friedmann Angeli JP, Schneider M, Proneth B, et al. Inactivation of the ferroptosis regulator
Gpx4 triggers acute renal failure in mice. *Nat Cell Biol*. 2014; 16(12):1180-1191.
44. Hirschhorn T, Stockwell BR. The development of the concept of ferroptosis. *Free Radic Biol Med*.
2019; 133:130-143.
45. Guo J, Xu B, Han Q, et al. Ferroptosis: A Novel Anti-tumor Action for Cisplatin. *Cancer Res Treat*.
2018; 50(2):445-460.
46. Jiang L, Kon N, Li T, et al. Ferroptosis as a p53-mediated activity during tumour suppression.
Nature. 2015; 520(7545):57-62.
47. Zhang X, Sui S, Wang L, et al. Inhibition of tumor propellant glutathione peroxidase 4 induces
ferroptosis in cancer cells and enhances anticancer effect of cisplatin. *J Cell Physiol*. 2020;
235(4):3425-3437.
48. Drusco A. A set of differentially expressed cerebro-spinal fluid (CSF) miRNAs can diagnose CNS
malignancies. 2015.
49. Kanchan RK, Perumal N, Atri P, et al. MiR-1253 exerts tumor-suppressive effects in
medulloblastoma via inhibition of CDK6 and CD276 (B7-H3). *Brain pathology (Zurich,*
Switzerland). 2020.
50. Weishaupt H, Johansson P, Sundstrom A, et al. Batch-normalization of cerebellar and
medulloblastoma gene expression datasets utilizing empirically defined negative control genes.
Bioinformatics. 2019; 35(18):3357-3364.
51. Kaushal JB, Bhatia R, Kanchan RK, et al. Repurposing Niclosamide for Targeting Pancreatic
Cancer by Inhibiting Hh/Gli Non-Canonical Axis of Gsk3beta. *Cancers (Basel)*. 2021; 13(13).
52. Pondarre C, Antiochos BB, Campagna DR, et al. The mitochondrial ATP-binding cassette
transporter Abcb7 is essential in mice and participates in cytosolic iron-sulfur cluster biogenesis.
Hum Mol Genet. 2006; 15(6):953-964.
53. Seguin A, Ward DM. Mitochondrial ABC Transporters and Iron Metabolism. *Journal of Clinical &*
Experimental Pathology. 2018; 08(01).
54. Srinivasan V, Pierik AJ, Lill R. Crystal structures of nucleotide-free and glutathione-bound
mitochondrial ABC transporter Atm1. *Science (New York, N.Y.)*. 2014; 343(6175):1137-1140.
55. Li SW, Liu CM, Guo J, et al. Iron overload induced by ferric ammonium citrate triggers reactive
oxygen species-mediated apoptosis via both extrinsic and intrinsic pathways in human hepatic
cells. *Hum Exp Toxicol*. 2016; 35(6):598-607.
56. Dixon SJ, Stockwell BR. The role of iron and reactive oxygen species in cell death. *Nat Chem Biol*.
2014; 10(1):9-17.
57. Bystrom LM, Guzman ML, Rivella S. Iron and reactive oxygen species: friends or foes of cancer
cells? *Antioxid Redox Signal*. 2014; 20(12):1917-1924.

58. Forcina GC, Dixon SJ. GPX4 at the Crossroads of Lipid Homeostasis and Ferroptosis. *Proteomics.* 2019; 19(18):e1800311.

59. Zhao Y, Li Y, Zhang R, Wang F, Wang T, Jiao Y. The Role of Erastin in Ferroptosis and Its Prospects in Cancer Therapy. *Onco Targets Ther.* 2020; 13:5429-5441.

60. Zilka O, Shah R, Li B, et al. On the Mechanism of Cytoprotection by Ferrostatin-1 and Liproxstatin-1 and the Role of Lipid Peroxidation in Ferroptotic Cell Death. *ACS Cent Sci.* 2017; 3(3):232-243.

61. Aboelella NS, Brandle C, Kim T, Ding ZC, Zhou G. Oxidative Stress in the Tumor Microenvironment and Its Relevance to Cancer Immunotherapy. *Cancers (Basel).* 2021; 13(5).

62. Li FJ, Long HZ, Zhou ZW, Luo HY, Xu SG, Gao LC. System X(c) (-)/GSH/GPX4 axis: An important antioxidant system for the ferroptosis in drug-resistant solid tumor therapy. *Front Pharmacol.* 2022; 13:910292.

63. Dasari S, Tchounwou PB. Cisplatin in cancer therapy: molecular mechanisms of action. *Eur J Pharmacol.* 2014; 740:364-378.

64. Zhou Y, Shen Y, Chen C, et al. The crosstalk between autophagy and ferroptosis: what can we learn to target drug resistance in cancer? *Cancer Biol Med.* 2019; 16(4):630-646.

65. Berndtsson M, Hagg M, Panaretakis T, Havelka AM, Shoshan MC, Linder S. Acute apoptosis by cisplatin requires induction of reactive oxygen species but is not associated with damage to nuclear DNA. *International journal of cancer. Journal international du cancer.* 2007; 120(1):175-180.

66. Gilbertson R, Wickramasinghe C, Hernan R, et al. Clinical and molecular stratification of disease risk in medulloblastoma. *British journal of cancer.* 2001; 85(5):705-712.

67. Gottardo NG, Hansford JR, McGlade JP, et al. Medulloblastoma Down Under 2013: a report from the third annual meeting of the International Medulloblastoma Working Group. *Acta neuropathologica.* 2014; 127(2):189-201.

68. Cho YJ, Tsherniak A, Tamayo P, et al. Integrative genomic analysis of medulloblastoma identifies a molecular subgroup that drives poor clinical outcome. *Journal of clinical oncology : official journal of the American Society of Clinical Oncology.* 2011; 29(11):1424-1430.

69. Tamayo P, Cho YJ, Tsherniak A, et al. Predicting relapse in patients with medulloblastoma by integrating evidence from clinical and genomic features. *Journal of clinical oncology : official journal of the American Society of Clinical Oncology.* 2011; 29(11):1415-1423.

70. Thompson EM, Hielscher T, Bouffet E, et al. Prognostic value of medulloblastoma extent of resection after accounting for molecular subgroup: a retrospective integrated clinical and molecular analysis. *The Lancet Oncology.* 2016; 17(4):484-495.

71. Menyhart O, Giangaspero F, Gyorffy B. Molecular markers and potential therapeutic targets in non-WNT/non-SHH (group 3 and group 4) medulloblastomas. *J Hematol Oncol.* 2019; 12(1):29.

72. Ward E, DeSantis C, Robbins A, Kohler B, Jemal A. Childhood and adolescent cancer statistics, 2014. *CA Cancer J Clin.* 2014; 64(2):83-103.

73. Hill RM, Richardson S, Schwalbe EC, et al. Time, pattern, and outcome of medulloblastoma relapse and their association with tumour biology at diagnosis and therapy: a multicentre cohort study. *The Lancet Child & Adolescent Health.* 2020; 4(12):865-874.

74. Hoff KV, Hinkes B, Gerber NU, et al. Long-term outcome and clinical prognostic factors in children with medulloblastoma treated in the prospective randomised multicentre trial HIT'91. *Eur J Cancer.* 2009; 45(7):1209-1217.

75. Ribi K, Relly C, Landolt MA, Alber FD, Boltshauser E, Grotzer MA. Outcome of medulloblastoma in children: long-term complications and quality of life. *Neuropediatrics.* 2005; 36(6):357-365.

76. Othman RT, Kimishi I, Bradshaw TD, et al. Overcoming multiple drug resistance mechanisms in medulloblastoma. *Acta Neuropathol Commun.* 2014; 2:57.

77.   Chou PM, Reyes-Mugica M, Barquin N, Yasuda T, Tan X, Tomita T. Multidrug resistance gene
expression in childhood medulloblastoma: correlation with clinical outcome and DNA ploidy in
29 patients. *Pediatric neurosurgery.* 1995; 23(6):283-291; discussion 291-282.
78.   Miroshnichenko S, Patutina O. Enhanced Inhibition of Tumorigenesis Using Combinations of
miRNA-Targeted Therapeutics. *Front Pharmacol.* 2019; 10:488.
79.   Cavadini P, Biasiotto G, Poli M, et al. RNA silencing of the mitochondrial ABCB7 transporter in
HeLa cells causes an iron-deficient phenotype with mitochondrial iron overload. *Blood.* 2007;
109(8):3552-3559.
80.   Miyake A, Higashijima S, Kobayashi D, et al. Mutation in the abcb7 gene causes abnormal iron
and fatty acid metabolism in developing medaka fish. *Dev Growth Differ.* 2008; 50(9):703-716.
81.   Gonzalez-Cabo P, Bolinches-Amoros A, Cabello J, et al. Disruption of the ATP-binding cassette B7
(ABTM-1/ABCB7) induces oxidative stress and premature cell death in Caenorhabditis elegans.
The Journal of biological chemistry. 2011; 286(24):21304-21314.
82.   Kumar V, A AK, Sanawar R, Jaleel A, Santhosh Kumar TR, Kartha CC. Chronic Pressure Overload
Results in Deficiency of Mitochondrial Membrane Transporter ABCB7 Which Contributes to Iron
Overload, Mitochondrial Dysfunction, Metabolic Shift and Worsens Cardiac Function. *Sci Rep.*
2019; 9(1):13170.
83.   Nunez MT, Nunez-Millacura C, Tapia V, et al. Iron-activated iron uptake: a positive feedback loop
mediated by iron regulatory protein 1. *Biometals.* 2003; 16(1):83-90.
84.   Mou Y, Wang J, Wu J, et al. Ferroptosis, a new form of cell death: opportunities and challenges
in cancer. *J Hematol Oncol.* 2019; 12(1):34.
85.   Abdalkader M, Lampinen R, Kanninen KM, Malm TM, Liddell JR. Targeting Nrf2 to Suppress
Ferroptosis and Mitochondrial Dysfunction in Neurodegeneration. *Front Neurosci.* 2018; 12:466.
86.   Yang WS, SriRamaratnam R, Welsch ME, et al. Regulation of ferroptotic cancer cell death by
GPX4. *Cell.* 2014; 156(1-2):317-331.
87.   Hider RC, Kong XL. Glutathione: a key component of the cytoplasmic labile iron pool. *Biometals.*
2011; 24(6):1179-1187.
88.   Gaschler MM, Andia AA, Liu H, et al. FINO2 initiates ferroptosis through GPX4 inactivation and
iron oxidation. *Nat Chem Biol.* 2018; 14(5):507-515.
89.   Fan P, Liu L, Yin Y, et al. MicroRNA-101-3p reverses gemcitabine resistance by inhibition of
ribonucleotide reductase M1 in pancreatic cancer. *Cancer Lett.* 2016; 373(1):130-137.
90.   Yu G, Jia B, Cheng Y, et al. MicroRNA-429 sensitizes pancreatic cancer cells to gemcitabine
through regulation of PDCD4. *Am J Transl Res.* 2017; 9(11):5048-5055.
91.   Chen H, Liu L, Li X, Shi Y, Liu N. MicroRNA-1294 inhibits the proliferation and enhances the
chemosensitivity of glioma to temozolomide via the direct targeting of TPX2. *Am J Cancer Res.*
2018; 8(2):291-301.
92.   Jiang J, Xie C, Liu Y, Shi Q, Chen Y. Up-regulation of miR-383-5p suppresses proliferation and
enhances chemosensitivity in ovarian cancer cells by targeting TRIM27. *Biomed Pharmacother.*
2019; 109:595-601.
93.   Tu MJ, Ho PY, Zhang QY, et al. Bioengineered miRNA-1291 prodrug therapy in pancreatic cancer
cells and patient-derived xenograft mouse models. *Cancer Lett.* 2019; 442:82-90.
94.   Wang M, Qiu R, Yu S, et al. Paclitaxelresistant gastric cancer MGC803 cells promote
epithelialtomesenchymal transition and chemoresistance in paclitaxelsensitive cells via
exosomal delivery of miR1555p. *Int J Oncol.* 2019; 54(1):326-338.
95.   Konkimalla VB, Kaina B, Efferth T. Role of transporter genes in cisplatin resistance. *In Vivo.* 2008;
22(3):279-283.

 Figure Legends

Figure 1. ABCB7, a target of miR-1253, is deregulated in group 3 MB. (A) Subgroup-

specific ABCB7 expression assessment by RNA sequencing (log$_2$ transcripts per million) of a

local medulloblastoma patient cohort (Kanchan *et al.*, GSE) showing specific deregulation in

group 3 tumors. *CB*, pediatric cerebellum (n=10); *SHH*, sonic hedgehog (n=6); *G3*, group 3

(n=7); *G4*, group 4 (n=12). **(B)** Poor prognostic profile demonstrable in high-expressing group 3

MB patients (Cavali *et al.* GSE85217). **(C)** Confocal microscopic images confirming high

ABCB7 expression in group 3 MB tumors (n=6) compared to pediatric cerebellum (n=6) and

colocalization to the mitochondria based on COXIV fluorescence. Images captured at 10X

magnification. **(D)** Western blotting analysis showing high ABCB7 expression in classic MB cell

lines (group 3: D341, D425, HDMB03, D556; group 3/4: D283) compared to normal human

astrocytes (NHA). Western blotting analysis showing downregulation of ABCB7 with miR-1253

overexpression in **(E)** D425 and **(F)** HDMB03 cells. **(G)** Confocal microscopic images in D425

and HDMB03 cells showing co-localization of ABCB7 to the mitochondria and downregulation

with miR-1253 overexpression. Images captured at 63X magnification. **(H)** Dual-luciferase assay

confirming direct binding of miR-1253 to ABCB7 in HDMB03 cells. Data presented as mean ±

SD from experiments done in triplicates and analyzed using Mann-Whitney U test **(A)** or

Student's t-test **(H)** (*p <0.05, **p <0.01, ***p <0.001, ****p <0.0001).

Figure 2. ABCB7 repression attenuates G3MB cancer cell aggressiveness. (A) ABCB7

repression by miR-1253^{OE} (100 nM), si-ABCB7 (50 nM), and ABCB7^{KO} (CRISPR). ABCB7

repression attenuates medullosphere formation **(B),** cancer cell viability by MTT **(C),** and calcein

staining **(D)**. **p<0.01, ***p<0.001, ****p<0.0001. *KO*, knockout; *NC*, negative control; *OE*,

overexpression; *WT*, wild-type;

Figure 3. MiR-1253 triggers iron imbalance and oxidative stress in group 3 MB cells. ABCB7 repression triggers mitochondrial **(A)** and cytoplasmic **(B)** iron overload, which was rescued by iron chelation (DFO). ABCB7 repression induces oxidative stress **(C, D)**, rescued by ferrostatin-1 (FER). *ns*, not significant, *$p<0.05$, **$p<0.01$, ****$p<0.0001$. *DFO*, deferoxamine; *ERA*, erastin; *FAC*, ferric ammonium citrate; *FER*, ferrostatin-1; *H_2O_2*, hydrogen peroxide; miR, miR-1253; *O_2^-*, superoxide; s*i*, si-ABCB7.

Figure 4. ABCB7 repression triggers lipid peroxidation and mitochondrial dysfunction. (A) ABCB7 repression induced lipid peroxidation in HDMB03 cells, reversible by ferrostatin-1. **(B)** Seahorse assay showing that ABCB7 repression disrupts oxidative phosphorylation, shifting energy (ATP) production to the cytoplasm via glycolysis **(B)**. **$p<0.01$, ***$p<0.001$, ****$p<0.0001$ compared to negative control.

Figure 5. ABCB7 repression reduces G3MB tumor burden. (A) We orthotopically injected luciferase-tagged wild-type or ABCB7^{KO} HDMB03 cells into NSG mice. The KO group had significantly smaller tumors **(B)**, longer survival **(C)**, and reduced c-Myc staining **(D)**. *KO*, ABCB7^{KO}; *WT*, wildtype.

Figure 6. ABCB7 repression inhibits GPX4 expression, a key regulator of ferroptosis. (A) ABCB7 repression by miR-1253^{OE} showing reduced GPX4 transcript levels by RT-PCR. **(B)** Western blotting analysis showing a strong inhibitory effect of miR-1253 on GPX4 expression in D425 and HDMB03 cells. **(C)** Near-abrogation of GPX4 expression with ABCB7 knockout in HDMB03 cells. **(D)** Spearman correlation showing positive correlation between ABCB7 and GPX4 expression. (Kanchan *et al.*, GSE148390). **(E)** Similar inhibitory effect noted on total glutathione (GSH) levels in miR-1253-transfected D425 and HDMB03 cells. **(F)** Fractionation studies delineating the inhibitory impact of ABCB7 repression on GPX4 expression. Data

presented as mean ± SD from experiments done in triplicates and analyzed using Student's t-test

(*$p < 0.05$, **$p < 0.01$, ***$p < 0.001$).

Figure 7. ABCB7 repression potentiates cisplatin toxicity in group 3 MB cells. (A) Cisplatin

(2.5 µM) represses ABCB7 and GPX4 expression in HDMB03 cells. **(B)** ABCB7 repression

potentiates cisplatin cytotoxicity in HDMB03 cells. **(C)** IC_{50} of cisplatin in D425 and HDMB03

cells transfected with scramble vs. miR-1253 for 24-72 h and HDMB03 cells transfected with si-

ABCB7 (50 uM). Tabulated results presented as fold-change in cisplatin IC_{50} between scramble

and miR-1253 in D425 and HDMB03 cells at different time points. **(D)** Colonogenic assay

demonstrating inhibitory effect of cisplatin vs. miR-1253 vs. combination on colony formation in

HDMB03 cells.

Figure 8. ABCB7 repression potentiates oxidative stress in cisplatin-treated G3MB cells.

MiR-1253-transfected **(A)** D425 and **(B)** HDMB03, and **(C)** ABCB7^{KO} HDMB03 cells treated

with cisplatin (D425 24-h IC_{25} ~10 µM; HDMB03 24-h IC_{25} ~2 µM) and stained with

MitoSOX™ Red (red) for mitochondrial superoxide anions ($O_2^{\bullet-}$) and DCFDA (green) for

cytosolic ROS (H_2O_2). **(D** and **E)** Cisplatin potentiates ROS in HDMB03 cells with repressed

ABCB7 expression; ferrostatin-1 rescues this effect. Representative images and graphs showing

the potentiating effect of combining miR-1253 with cisplatin. Images captured at 20X

magnification. Scale bar 400 µm. Data presented as mean ± SD from experiments done in

triplicates and analyzed using one-way analysis of variance (*$p < 0.05$, **$p < 0.01$, ***$p < 0.001$,

****$p < 0.0001$). *CIS*, cisplatin; *FER*, ferrostatin-1; *miR*, miR-1253; *NC*, negative control; *si*, si-

ABCB7.

Figure 9. ABCB7 repression potentiates cisplatin cytotoxicity in group 3 MB cells by

triggering ferroptosis. Oxidative stress measured by quantifying **(A)** mitochondrial $O_2^{\bullet-}$

(MitoSOX™ Red, **red**) and **(B)** cytosolic H_2O_2 (DCFDA, **green**) in miR-1253-transfected

HDMB03 cells showing potentiating effect of miR-1253 on cisplatin, and inhibited by a

ferroptosis inhibitor, ferrostatin-1 (FER). Images captured at 20X magnification. Scale bar 200

µm. **(C)** As measured by Image-iT® Lipid Peroxidation Kit, confocal images showing the

highest lipid peroxidation in combination treatment groups (miR + Cis), again rescued by

ferrostatin-1, in miR-1253-transfected HDMB03 cells. Images captured at 63X magnification.

(D) Evaluation of oxidized glutathione (GSH) showing punctuated effects in combination

treatment groups (miR + Cis) with rescue in the presence of ferrostatin in miR-1253-transfected

HDMB03 cells. **(E)** Analysis of cell death by flow cytometry showing significantly higher $O_2^{\bullet-}$

mediated cell death (representing ferroptosis) in miR-1253-expressing HDMB03 cells

demonstrable by quantifying cells staining for both Annexin V-Cy5 (apoptosis) and for $O_2^{\bullet-}$

(Mitosox) (Q2). Data presented as mean ± SD from experiments done in triplicates and analyzed

using one-way analysis of variance (*p <0.05, **p <0.01, ***p <0.001, ****p <0.0001).

Supplementary Figure 1. Iron homeostasis and glutathione metabolism are deregulated in

G3 tumors. (A) Enrichment plot by KEGG pathways analysis demonstrating a strong negative

enrichment score for the ABC transporter family with miR-1253 expression restoration in

HDMB03 cells. **(B)** Deregulated ABC transporters in group 3 MB (column 1), effect of

deregulated expression on survival (column 2), and transporters significantly downregulated by

miR-1253 expression (column 3). This analysis revealed ABCB7 as the best putative target for

miR-1253. **(C)** Key genes regulating iron homeostasis, glutathione metabolism, and ferroptosis

are enriched in G3MB (GSE148390, p<0.05 for all presented gene comparisons between normal

and G3MB). **(D)** Enriched pathways in G3MB include iron-sulfur cluster assembly and

glutathione metabolism. *Fe-S*, iron-sulfer; *GSH*, glutathione.

Supplementary Figure 2. ABCB7 is enriched in MB and portends a poor prognosis. (A) Expression profile for ABCB7 in multiple MB cohorts. *CB*, normal cerebellum, Roth *et al.* 2008 (n=9, GSE3526); *MB 1*, Gilbertson *et al.* 2012 (n=76, GSE37418); *MB 2*, Pfister *et al.* 2017 (n=223); *MB 3*, Delattre *et al.* 2012 (n=57); *MB 4*, Kool *et al.* 2009 (n=62, GSE10327). **(B)** Poor prognostic profile demonstrable in high ABCB7-expressing medulloblastoma patients (Cavali *et al.* GSE85217). Subgroup-specific ABCB7 expression in two separate medulloblastoma patient cohorts, i.e. **(C)** Weishaupt *et al.*, GSE124814; *CB*, normal cerebellum (n=291); *WNT*, wingless (n=118); *SHH*, sonic hedgehog (n=405); *G3*, group 3 (n=233); *G4*, group 4 (n=530); and **(D)** Luo *et al.*, GSE164677; *CB*, normal cerebellum (n=4); *WNT*, wingless (n=6); *SHH*, sonic hedgehog (n=20); *G3*, group 3 (n=14); *G4*, group 4 (n=19); Data normalized via RUV method **(C)** or DeSeq2 median of ratios (MoR) method **(D)** and both analyzed using Mann-Whitney U (*p <0.05, **p <0.01, ***p <0.001, ****p <0.0001).

Supplementary Figure 3. ABCB7 repression triggers iron overload. Escalation in both cytosolic and mitochondrial free Fe^{2+} demonstrable with miR-1253 expression **(A and B)** and ABCB7KO **(C and D)**, abrogated by iron chelation with DFO. Mitochondria stained with MitoTracker™ Deep Red FM (**red**); cytosolic Fe^{2+} stained with FerroOrange (**orange**); mitochondrial Fe^{2+} stained with Mito-FerroGreen (**green**). Images captured at 63X.

Supplementary Figure 4. ABCB7 repression by MiR-1253 triggers oxidative stress and lipid peroxidation leading to cell death in group 3 MB cells. Confocal images showing elevated mitochondrial $O_2^{\bullet-}$ (MitoSOX™ Red, **red**) and cytosolic H_2O_2 (DCFDA, **green**) following miR-1253 expression in **(A)** D425 and **(B)** HDMB03 cells. Higher lipid peroxidation (measured by Image-iT® Lipid Peroxidation Kit) also noted in miR-1253 transfected **(C)** D425 and **(D)** HDMB03 cells. Flow cytometry analysis showing significantly higher $O_2^{\bullet-}$ mediated cell

death (representing ferroptosis) in miR-1253-expressing **(E)** D425 and **(F)** HDMB03 cells

demonstrable by quantifying cells staining for both Annexin V-Cy5 (apoptosis) and for $O_2^{\bullet-}$

(Mitosox) (Q2). Data presented as mean ± SD from experiments done in triplicates and analyzed

using Student's t-test (*p <0.05, **p <0.01, ***p <0.001, ****p <0.0001). Images captured

either at 20X (**A** and **B**) or 63X (**C** and **D**) magnification. Scale bar 200 µm.

Supplementary Figure 5. ABCB7 repression triggers iron overload and oxidative stress.

Confocal images showing Calcein AM dye quenching in miR-1253-transfected **(A)** D425 and

(B) HDMB03 cells indicating high cytosolic labile iron compared to scramble (NC) transfected

cells. **(C)** Confocal images showing Calcein AM dye quenching in $ABCB7^{KO}$ HDMB03 cells

suggestive of high cytosolic labile iron compared to wild-type (WT) cells. Fe^{2+} stained with

Calcein AM (**green**) and nuclei stained with DAPI (**blue**). **(D)** Elevated oxidative stress

demonstrable in $ABCB7^{KO}$ HDMB03 cells as evidenced by higher mitochondrial $O_2^{\bullet-}$

(MitoSOX™ Red, **red**) and cytosolic H_2O_2 (DCFDA, **green**) compared to wild-type. Images

captured at 63X (**C-E**) or 20X (**F**) magnification. Scale bar 400 µm. Data presented as mean ±

SD from experiments done in triplicates and analyzed using Student's t-test (*p <0.05, **p

<0.01, ***p <0.001, ****p <0.0001).

Supplementary Figure 6. GPX4 is a central regulator of ferroptosis that is deregulated in

MB. (A) Schematic showing the important role of GPX4 in mitigating ferroptosis. Image created

with Biorender.com. **(B)** Subgroup-specific GPX4 expression assessment by RNA sequencing

($\log_2$ transcripts per million) of a local medulloblastoma patient cohort (Kanchan *et al.*,

GSE148390) showing deregulation in MB tumors, highest in group 3 MB. *CB*, pediatric

cerebellum (n=10); *SHH*, sonic hedgehog (n=6); *G3*, group 3 (n=7); *G4*, group 4 (n=12). **(C)**

Subgroup-specific GPX4 expression data from Weishaupt *et al.*, GSE124814; *CB*, normal

cerebellum (n=291); *WNT*, wingless (n=118); *SHH*, sonic hedgehog (n=405); *G3*, group 3

(n=233); *G4*, group 4 (n=530); Data normalized via RUV method and analyzed using Mann-

Whitney U (*p <0.05, **p <0.01, ***p <0.001, ****p <0.0001). **(D)** Poor prognostic profile

demonstrable in high-expressing MB patients (Cavali *et al*. GSE85217). **(E)** Confocal

microscopic images confirming high GPX4 expression in group 3 MB tumors (n=6) compared to

pediatric cerebellum (n=6) and colocalization to the mitochondria based on COXIV

fluorescence. Images captured at 10X magnification. **(F)** Western blotting analysis showing high

in vitro GPX4 expression in classic MB cell lines (group 3: D341, D425, HDMB03; group 3/4:

D283) compared to normal human astrocytes (NHA).

Supplementary Figure 7. ABCB7 knockout potentiates cisplatin cytotoxicity in group 3 MB

cells by ferroptosis. Oxidative stress measured by quantifying **(A)** mitochondrial $O_2^{\bullet-}$

(MitoSOX™ Red, red) and **(B)** cytosolic H_2O_2 (DCFDA, green) in miR-1253-transfected

HDMB03 cells showing potentiating effect of miR-1253 on cisplatin, and inhibited by a

ferroptosis inhibitor, ferrostatin-1 (FER). Images captured at 20X magnification. Scale bar 200

µm. **(C)** As measured by Image-iT® Lipid Peroxidation Kit, confocal images showing the

highest lipid peroxidation in combination treatment groups (ABCB7^{KO} + Cis), again rescued by

ferrostatin-1, in ABCB7^{KO} HDMB03 cells. Images captured at 63X magnification. **(D)**

Evaluation of oxidized glutathione (GSH) showing punctuated effects in combination treatment

groups (ABCB7^{KO} + Cis) with rescue in the presence of ferrostatin in ABCB7^{KO} HDMB03 cells.

Data presented as mean ± SD from experiments done in triplicates and analyzed using one-way

analysis of variance (*p <0.05, **p <0.01, ***p <0.001, ****p <0.0001).

Figure 1

Figure 2

Figure 3

A MitoFerroGreen

B FerroOrange

C H$_2$O$_2$ (DCFDA)

D O$_2^-$ (Mitosox)

Figure 4

Figure 5

Figure 6

Figure 7

Figure 8

Figure 9