Fatty acids are not a significant contributor to the TCA cycle in

cancer cell lines: evidence of incomplete fatty acid oxidation.

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ABSTRACT

Fatty acid (FA) oxidation (FAO) is upregulated in many cancers, which has been contextualised to thereby be significantly fuel the TCA cycle and generate vast amounts of ATP to support cancer cell viability. However, direct evidence of this is lacking. Here, we set out to determine the capacity of FAO in a pan-cancer setting and if this relates to the amount of carbon FAO contributes to the TCA cycle relative to other substrates. We profiled the baseline FAO rate and capacity of 27 cancer cell lines from 10 tissue origins, and then selected 6 cancer cell lines that represented the diversity of this panel. Despite the diverse range of FAO rates, we consistently found that exogenous long-chain FAs (LCFAs) were a minor (<10%) TCA cycle substrate in all cells compared to glucose and glutamine. Glucose withdrawal significantly increased FAO rates, while glucose and/or glutamine deprivation marginally increased incorporation of ^{13}C-palmitate into TCA cycle metabolites. Palmitate alone modestly assisted cataplerosis but did not sustain TCA cycle fluxes, leading to reduced cell viability. The low contribution of fatty acids to the TCA cycle in cancer cells may be explained by incomplete oxidation of LCFAs of varying chain lengths of saturations to produce shortened acyl-carnitines. Overall, our results provide significant insights into mitochondrial FA metabolism in cultured cancer cells and challenges the belief that the oxidation of FAs is a complete process, contributing significant fuel for the TCA cycle and ATP generation.

Keywords

Mitochondria, cancer, fatty acid oxidation, parallel stable isotope tracing, metabolomics

Introduction

Many cancers, including glioma[1], prostate[2] and lung cancers[3], exhibit increased expression of genes involved in fatty acid oxidation (FAO), and been reported to be associated with poor prognosis. Drugs targeting FAO reactions are effective against particular cancers and have been reported to reduce ATP production in pancreatic ductal adenocarcinoma[4], and sensitise leukemia cells to proapoptotic effects by increasing membrane permeability[5]. Of these, the inhibition of carnitine palmitoyltransferase 1 (CPT1)[6,7], the rate limiting enzyme in FAO[8], directly impacts ATP production and leads to reduced cell viability in various cancers including glioblastoma[9], prostate cancer[10], myeloma[11] and glioma[12]. Others have shown that CPT1 inhibition leads to altered mitochondria structure or morphology before impacting respiration[13,14]. A major limitation to these studies is that, in general, they assess FAO in the absence of measures of other mitochondrial fuels. As such, they fail to consider metabolic plasticity and flexibility that likely supports cancer cell viability and disease progression.

FAO is consistently framed through the lens of cellular respiration, as it produces NADH, $FADH_2$ and acetyl-CoA that are substrates for ATP production [15,16]. Inherent to this framework is the assumptions that arise from textbook biochemistry, whereby one molecule of palmitate generates eight acetyl-CoA units and 129-132 ATP, compared to only 36 ATP from one molecule of glucose. As such, any increase in FAO much equate to increased ATP production, irrespective of whether FAO is a major carbon source to the TCA cycle or not. Glucose and glutamine are significant sources of carbons to the TCA[17,18], yet are rarely assessed alongside FAs. We recently reported that exogenous long chain FAs (LCFAs) are minor carbon sources for the TCA cycle compared to glucose and glutamine in prostate cancers (PCa)[19], despite PCa known to possess high FAO rates[20]. In this study, we set out to examine the dynamic flexibility of FAO rates differ between cancer types and how these correlate to TCA cycle fluxes.

Results

Fatty acid oxidation in cancer cells showed diverse rates and spare capacity.

We measured FAO rates using $[1-^{14}C]$-palmitate derived CO_2 production in 27 cancer cells from 10 different origin sites (Figure 1A) with the aim of identifying a spectrum of phenotypes. We saw striking differences in baseline FAO rates within and between cancer types (Figure 1B). Notably, PCa cells, in general, had the highest FAO rates compared to other cancer types (Figure 1B).

We also sought to gain insights into the plasticity of FAO. As FAO increases in response to inhibition of glycolysis or low glucose uptake, including in glioblastoma and breast cancer cells[21,22], we quantified FAO rates in glucose-free conditions. As predicted, FAO was increased in all cell lines in glucose-free media, but the magnitude of increase was variable (1- to 8- fold). Interestingly, the magnitude of change in FAO from 5 mM glucose to glucose-free did not correlate with baseline values (Figure 1C and S1A). We further examined the relationship between FAO rates and media glucose levels and determined that FAO increased only when media glucose was 1 mM or below (Figure S1B and S1C). Conversely, we showed that FAO was not dependent on nutrient gradients since a 5-fold increase in media palmitate did not increase FAO rate in the presence of 5 mM glucose (Figure S1D).

Based on the fold change (FC) in FAO rates +/- 5 mM glucose as a measure of plasticity, we selected 6 cell lines that ranged from high (above 4-fold), mid (2-4-fold) and low (0-2-fold). These cells were ranked in terms of increasing fold changes of FAO rate (-glucose to +glucose): MDA-MB-231 and MCF-7 (breast), MIA PaCa-2 (pancreatic), DO4 (melanoma), HEPG2 (liver), and HT-29 (colorectal) (Figure 1D and S1A). Among these cell lines, CPT1a protein levels spanned 0.1-to-2.3-fold compared to MDA-MB-231 cells (Figure 1E), yet there was no correlation between CPT1a protein levels baseline (+ glucose; R^2=0.07, p=0.26) or

maximal FAO (-glucose; R^2=0.01, p=0.64) rates. Interestingly, there was a negative

correlation between the protein levels of CPT1a and FAO FC (R^2=0.34, p=0.01) (Figure 1F).

This suggested that cells with low CPT1a protein levels had greater FAO flexibility, whereas

cells with high CPT1a protein levels were already functioning close to their maximal FAO

capacity. We also questioned where the range of FAO rates were simply explained by the

cellular levels of active mitochondria. However, there was relationship between active

mitochondria and basal, maximal, or FC FAO (Figure S1E). Collectively, these results show

that glucose availability had the greatest influence on FAO rates, followed by factors intrinsic

to the cell lines rather than tissue types.

Figure 1. FAO in a panel of heterogeneous cancer cells from different tissue origin sites.

(A) Panel of 27 cancer cell lines from 10 tissue origin sites measured for FAO capacity.

(B) Basal [1-^{14}C]-FA 16:0 oxidation rates in the presence of glucose. Cells ordered by cancer origin site. N=1-5 per cell line.

(C) [1-^{14}C]-FA 16:0 oxidation rates in the presence (blue) or absence of glucose (red). N=1-5 per cell line.

(D) Selection of 6 cell lines based on a range of fold change (FC) differences (<2 to >7, left) of FAO -/+ glucose (right). N=3-4 per cell line.

(E) Quantification of CPT1a protein levels normalised to MDA-MB-231 cells. One of three immunoblot experiments is shown.

(F) Correlation between CPT1a protein levels and the fold changes of FAO -/+ glucose. Error bars represent ± SD. P and r^2 values by linear regression.

(G) Active mitochondria as a fraction of mitochondrial potential to mitochondrial content normalised to MDA-MB-231 cells. N=3-4 per cell line.

Graphs show mean ± SEM unless stated otherwise. *p<0.05 by One-way ANOVA with Dunnett's multiple comparisons test, unless stated otherwise. See also Figure S1.

Palmitate is a minor TCA cycle carbon source compared to glucose and glutamine.

FAO is commonly assumed to be a major contributing source to the TCA cycle via the production of acetyl-CoA to support ATP production[15,16]. Taking advantage of our panel of cancer cell lines diverse FAO activity (Figure 1), we sought to determine whether these FAO rates corresponded to FA-derived carbons arriving at the TCA cycle, in comparison to the major TCA cycle substrates glucose and glutamine. We used a parallel tracing strategy that consisted of feeding cells uniformly labelled ^{13}C-glucose, glutamine, or palmitate (FA 16:0) and quantifying the enrichment of TCA cycle intermediates in our panel of 6 cancer cell lines (Figure 2A). We first identified that 6 hours was the optimal tracing duration as media substrate levels were not fully depleted nor was there evidence of impaired substrate uptake (Figure S2A). This was critical as we showed that removal or very low levels of extracellular glucose has a striking effect on FAO rates (Figure 1). As such, the depletion of glucose from the media after 12 and 24 hours likely impacts ^{13}C-palmitate metabolism. This rapid rate of media glucose consumption can somewhat be avoided by doubling the media volume (Figure S2B).

Figure 2. Palmitate is a minor contributing substrate source to the TCA cycle compared
to glucose and glutamine.

(A) Schematic of [U-^{13}C]-glucose (5 mM), glutamine (1 mM), or FA 16:0 (150 μM) tracing into the TCA cycle
and precursor metabolites for 6 hours.
(B) Fractional contribution of [U-^{13}C]-glucose to pyruvate (red), [U-^{13}C]-glutamine to intracellular glutamine
(blue), [U-^{13}C]-FA 16:0 to palmitoyl-carnitine (orange) after 6 hours of labelling. N=9 per cell line. Level of
natural enrichment of metabolite standards indicated.
(C) Fractional contributions of [U-^{13}C]-glucose, glutamine, or FA 16:0 to citrate, oxoglutarate and malate. N=9
per cell line.

Graphs show mean ± SEM unless stated otherwise. See also Figure S2.

Next, we quantified the relative contributions of exogenous palmitate, glucose, and glutamine

to TCA cycle metabolites. We observed significant enrichments of key precursor pools; >80%

enrichment of pyruvate from ^{13}C-glucose, >60% enrichment of intracellular glutamine from

extracellular ^{13}C-glutamine, and >56% enrichment of palmitoyl-carnitine from ^{13}C-palmitate

(Figure 2B). Despite being taken up and activated by cells, palmitate minimally contributed

(<6%) to TCA cycle metabolites citrate, oxoglutarate and malate, compared to glucose (30-

50%) and glutamine (20-45%) (Figure 2C). Strikingly, this pattern was observed in all cell

lines, and there were no major distinctive patterns in cells with high (MDA-MB-231, MIA

PaCa-2) or low (MCF-7, HT-29) FAO activity (Figure 1D). Therefore, these results show that

exogenous palmitate is a minor contributing substrate to the TCA cycle in the presence of

physiological glucose and glutamine, irrespective of cellular FAO activity as measured by

$^{14}CO_2$ production (Figure 1).

Exogenous palmitate is insufficient to maintain TCA cycle activity in the absence of glucose and glutamine.

Several studies have shown that inhibiting FAO in glucose-deprived conditions or co-targeting with glycolysis inhibitors decreases respiration, cancer cell viability and tumour volume[21,23]. Since we observed that FAO rates increase in glucose-deprived conditions (Figure 1C and 1D), we reasoned that FAO becomes the primary carbon source for the TCA cycle in this setting. Firstly, we observed increased ^{13}C-palmitate enrichment into citrate in glucose-free, and glucose-/glutamine-free conditions in all cells except for the DO4 cells (Figure 3A and 3B). However, the contribution of palmitate to citrate broadly remained <13%. This increased fuelling of the TCA cycle by FAO in glucose-/glutamine-free conditions was also associated with other changes in metabolism. Specifically, we observed increased m+2 and, to a greater extent, m+4 labelling of citrate that correspond to the 1st and 2nd turns of the TCA cycle, respectively (Figure 3C). These results suggest that palmitate-derived carbons go through multiple rounds of the TCA cycle when glucose, or both glucose and glutamine are absent in culture media.

Another striking shift in palmitate metabolism in glucose-/ glutamine-free media conditions was the enrichment of the cataplerosis metabolites glutamate and aspartate (Figure 3A). Under glucose and glutamine replete conditions, the conversion of palmitate carbon into glutamate and aspartate was minimal (~2-6%) (Figure 3D). However, a shift in palmitate carbon utilisation was observed in glucose and glutamine-deprived medium (~10-19%) and to a lesser extent in glucose-deprived medium (~5-14%) (Figure 3D). Overall, these results indicate that cancer cells have the capacity to increase the catabolic conversion of palmitate into TCA cycle metabolites and amino acids, but this only occurs in extreme conditions when extracellular glucose and/or glutamine are unavailable.

Figure 3. Palmitate alone cannot maintain TCA cycle activity.

(A) Schematic tracing conversion of [U-^{13}C]-FA 16:0 to citrate m+2 and m+4, glutamate, aspartate.

(B) Fractional contribution of [U-^{13}C]-FA 16:0 to citrate +glucose/+glutamine, -glucose/+glutamine, or -glucose/-glutamine. N=9 per cell line.

(C) Enrichment fraction (%) of [U-^{13}C]-FA 16:0 to m+2 and m+4 citrate + glucose/+glutamine, -glucose/+glutamine, and -glucose/-glutamine. N=9 per cell line.

(D) Fractional contribution of [U-^{13}C]-FA 16:0 to glutamate and aspartate +glucose/+glutamine, -glucose/+glutamine, or -glucose/-glutamine. N=4-6 per cell line.

(E) Relative abundance (normalised to +glucose/+glutamine) of [U-^{13}C]-FA 16:0 to citrate. N=6-9 per cell line.

We observed increased incorporations of palmitate-derived carbons into TCA cycle metabolites

in glucose-/ glutamine-free settings, and next questioned whether this was sufficient to

maintain TCA cycle activity. By contrast to the enrichment results, the relative abundance of

citrate, oxoglutarate, and malate was significantly reduced in glucose-/ glutamine-deprived

conditions compared to nutrient-replete conditions (Figure 3E and S3B). These changes

preceded the decreased cell viability that occurs between 6 to 24 hours (Figure S3A). Taken

together, these findings demonstrate that palmitate remained insufficient to sustain TCA cycle

metabolite levels and activity and cell viability despite the dynamic changes in FA metabolism

of cancer cells cultured in glucose-/glutamine-free conditions.

186   Exogenous LCFAs are not major TCA cycle substrates.

One possible explanation for the minor contribution of palmitate-derived carbons to TCA cycle

metabolites is that there are differences in the utilisation of FAs based upon saturation (double

bonds) and carbon chain lengths. Palmitate (FA 16:0) was chosen first because it is the most

abundant circulating FA in humans[24]. Thus, we set out to test other LCFA species. Cells were

incubated in media containing physiological levels of glucose and glutamine, supplemented

with [U-^{13}C]-palmitate (FA 16:0), stearate (FA 18:0), oleate (FA 18:1), linoleate (FA 18:2), or

linolenate (FA 18:3). Each ^{13}C-FA enriched their direct acyl-carnitine counterpart species by a

fractional ratio of 0.5-0.95 (Figure 4A). Consistent with the results of our palmitate tracing

experiments, exogenous LCFAs contributed <10% of labelled carbons to citrate, oxoglutarate,

or malate (Figure 4B). Interestingly, cell lines with the smallest FAO shift in activity when

deprived of glucose (DO4, HEPG2, MCF-7, and HT-29 cells) had increased enrichments across

all labelled FAs to TCA cycle metabolites compared to an unlabelled control (Figure 4B).

However, these enrichment patterns (<10%) from LCFAs were substantially less than glucose

(30-50%) and glutamine (20-45%) (Figure 2). Collectively, these data further demonstrate that

exogenous LCFAs of different saturation and chain lengths are minor carbon sources to the

TCA cycle.

Figure 4. Extracellular LCFAs are minor contributing fuel sources to the TCA cycle in a
pan-cancer setting.

(A) Fractional contribution of acyl-carnitines associated with the [U-^{13}C]- 16:0, 18:0, 18:1, 18:2, 18:3 substrates.
N=9 per cell line.
(B) Fractional contribution of [U-^{13}C]-FA to citrate, oxoglutarate, malate. N=9 per cell line.

Graphs show mean ± SEM unless stated otherwise. P<0.05 by One-way ANOVA with Dunnett's multiple
comparisons test, *compared to unlabelled control (dotted line). See also Figure S4.

LCFAs are incompletely oxidised in cancer cells.

We observed substantial labelling from exogenous LCFAs directly into acyl-carnitines but a

minimal utilisation by the TCA cycle, and next questioned if this could be explained incomplete

oxidation of LCFAs to acetyl-CoA. Our results support this hypothesis by showing FA 16:0,

18:0, and 18:1 greatly enrich shortened acyl-carnitine species (Figure 5), a known read-out of

incomplete FAO[25,26]. Specifically, in all cancer cells, FA 16:0 enriched CAR 14:0 to CAR 12:0,

FA 18:0 enriched CAR 16:0 to CAR 12:0, and FA 18:1 enriched CAR 16:1 to CAR 12:1 (Figure

5). Together, these data provide evidence that LCFAs are not completely oxidised to the

maximal amount of acetyl-CoA for the TCA cycle. We propose that this evidence of enriched

shorted acyl-carnitine species from exogenous LCFAs could explain the minimal contribution

of LCFA-derived carbons to the TCA cycle in cancer cells as the maximal amount of acetyl-

CoA resulting from complete FAO is not reached.

Figure 5. LCFAs undergo incomplete FAO.

Fractional contributions of [U-^{13}C]-FA 16:0, 18:0, 18:2 to shorter chain acyl-carnitine species. N=9 per cell line.
Graphs show mean ± SEM.

Discussion

Although the convergence of glucose and glutamine at the TCA cycle has been a significant focus of the mitochondrial metabolism field in cancer, the contribution of FAO to the TCA cycle remains underappreciated. Here, we show that exogenous LCFAs were minor carbon sources to the TCA cycle compared to glucose and glutamine, irrespective of the FAO capacity of cancer cells, and this could be explained by the occurrence of incomplete oxidation.

Cancer cell metabolism is highly adaptable under nutrient-deprived conditions and can switch to alternative fuel sources to maintain tumour survival[27]. Notably, previous studies observed cells that are highly glycolytic can also upregulate FAO as a partial compensatory measure when glucose uptake is limited or deprived to maintain OXPHOS and ATP production[21,23]. Our results support these phenomena as we showed that cancer cells undergo a metabolic shift to increase FAO rates and the contribution of palmitate to the TCA cycle and cataplerosis metabolites when deprived of glucose and glutamine. These results were in striking contrast to the minor carbon fuelling from LCFAs to the TCA cycle in glucose and glutamine replete conditions. However, this adaptive role in fuelling the TCA cycle could not meet the levels sustained by glucose or glutamine, and most importantly, the TCA cycle metabolite pool sizes were markedly reduced in substrate-deprived settings. These results show that FAO is an insufficient carbon source to maintain TCA cycle activity and that this has no relationship to the intrinsic dynamic FAO capacity of cancer cells.

Others have shown that inhibiting CPT1a, the initiating step for LCFA entry to the mitochondria, leads to decreased respiration and cell viability[9-12,28]. The primary assumption made by these studies is that mitochondrial LCFAs are solely destined to undergo complete oxidation within the mitochondria and provide acetyl-CoA for the TCA cycle, and subsequent ATP production to support tumour growth. These studies presumptively couple CPT1a activity

to FAO and bioenergetics. A key example is a study that combined glycolysis and CPT1a

inhibitors that synergistically improved survival in a glioblastoma model and concluded that

co-targeting of glycolysis and FAO is a new therapeutic strategy[21]. Our findings demonstrated

here and in our recent study[19], directly challenge these assumptions by showing that LCFAs

are a minor carbon source to the TCA cycle. A logical explanation for this lack of effect was

that LCFAs entering the mitochondria via CPT1a are not completely oxidised for the TCA

cycle, nor are the sole intra-mitochondrial fate as evidenced by enriched shortened acyl-

carnitines from LCFAs.

Incomplete FAO, evidenced by the production of short and medium even-chained acyl-

carnitines, has previously been showed to occur in skeletal muscle in the surplus of fatty

acids[26]. Our findings are the first to clearly demonstrate that cancer cells from different lineages

also undergo incomplete oxidation of exogenous LCFAs and provide a solid foundation to

explore the role of shortened acyl-carnitines for cancer cell survival. In the setting of type 2

diabetes mellitus it was shown that there is an accumulation of shortened acyl-carnitines

concentrations in the plasma of patients due to incomplete FAO and that this was linked to low

levels of LCFA utilization by the TCA cycle[29] to ultimately promote proinflammatory pathways

necessary for insulin resistance. Interestingly, results from our pan-cancer study parallel this

phenotype of incomplete FAO and minor LCFA carbon contribution to the TCA cycle observed

in type 2 diabetic patients. We propose that future investigations into the fates of shortened

acyl-carnitines in cancer settings could provide novel insights into the roles of FAs for cancer

survival.

A limitation of these studies is that we only quantified the contribution of exogenous LCFAs,

glucose, and glutamine which totalled 40-80% of the TCA metabolite pools, but other

contributing carbon sources were likely at play. We could rule out the potential incorporation

of free fatty acids and lipids as we incubated our cells in serum-free medium. However,

endogenous FA sources, or amino acids in DMEM tracing medium, like branched chain amino

acids, can also contribute carbons to the TCA cycle[30-32].

Our study in multiple cancer cells provides quantitative evidence that LCFAs are minor carbons

sources to the TCA cycle compared to glucose and glutamine, irrespective of intrinsic FAO

activity. Fundamentally, we propose a new model that exogenous LCFAs undergo incomplete

oxidation within the mitochondria which challenges the assumption that the TCA cycle is the

sole fate of LCFAs entering the mitochondria in cancer cells. We expect that future

investigations into the occurrence of incomplete FAO in cancer cells will provide a basis for

exploring the role of shortened acyl-carnitines for cancer survival and tumour growth.

Methods

Key resources table

REAGENT or RESOURCE	SOURCE	IDENTIFIER
Antibodies		
Mouse monoclonal anti-CPT1A	Abcam	Cat#Ab128568; RRID: AB_11141632
Rabbit monoclonal anti-GAPDH	Cell Signalling Technology	Cat#2118; RRID: AB_561053
Chemicals, peptides, and recombinant proteins		
Enzalutamide	Selleckchem	Cat#S1250
Etomoxir	Sigma-Aldrich	Cat#C986W52
Lipofectamine RNAiMAX transfection reagent	Thermo Fisher Scientific	Cat#13778075
[1-^{14}C] Palmitic acid	Perkin Elmer	Cat#NEC075H250UC
Palmitic acid	Sigma-Aldrich	Cat#P0500
D-Glucose	Sigma-Aldrich	Cat#273053
L-Glutamine	Gibco	Cat#25030081
Fatty acid free BSA	Bovogen	Cat#BSAS0.10
L-carnitine hydrochloride	Sigma-Aldrich	Cat#C0283
Mitotracker Green	Thermo Fisher Scientific	Cat#M7514
Mitotracker Red	Thermo Fisher Scientific	Cat#M7512
FCCP	Sigma-Aldrich	Cat#SML2959
DTT	Sigma-Aldrich	Cat#D0632
Protease and Phophatase Inhibitor Cocktail, EDTA free	Astral Scientific	Cat#T-2496
Thiazolyl blue tetrazolium bromide MTT reagent	Sigma-Aldrich	Cat#M2128
Linoleic acid	Sigma Aldrich	Cat#L1012
D-Glucose (U-13C6, 99%)	Cambridge Isotope Laboratories, Inc.	Cat#CLM-1396
L-Glutamine (U-13C5, 99%)	Cambridge Isotope Laboratories, Inc.	Cat#CLM-1822-H
Palmitic acid (U-13C16, 98%)	Cambridge Isotope Laboratories, Inc.	Cat#CLM-409
Stearic acid (U-13C18, 98%)	Cambridge Isotope Laboratories, Inc.	Cat#CLM-6990
Linoleic acid (U-13C18, 98%)	Cambridge Isotope Laboratories, Inc.	Cat#CLM-10487
Linolenic acid (U-13C18, 98%)	Cambridge Isotope Laboratories, Inc.	Cat#8386
Critical commercial assays		
Pierce BCA Protein assay kit	Thermo Fisher Scientific	Cat#23225
Immobilon Crescendo Western HRP substrate	Merck Millipore	Cat#WBLUR0500
Experimental models: Cell lines		
MDA-MB-231	ATCC	ATCC HTB-26 RRID: CVCL_0062
MDA-MB-468	ATCC	ATCC HTB-132
MCF7	ATCC	ATCC HTB-22
MDA-MB-134	ATCC	ATCC HTB-23
C4-2B	ATCC	ATCC CRL-3315
PC-3	ATCC	ATCC CRL-1435

22Rv1	ATCC	ATCC CRL-2505 RRID: CVCL_1045
LNCaP	ATCC	ATCC CRL-1740 RRID: CVCL_1379
DU145	A/Prof. Luke Selth, Flinders University	ATCC HTB-81
CWR-AD1	A/Prof. Luke Selth, Flinders University	Nyquist 2013[33], Li 2013[34]
MR42D	Prof. Lisa Butler, SAHMRI	Bishop 2017[35]
HEPG2	A/Prof. Susan McLennan, University of Sydney	Nagarajan 2019[36]
Ishikawa	Prof. Kyle Hoehn, UNSW	RRID: CVCL_2529
MFE296	Prof. Kyle Hoehn, UNSW	RRID: CVCL_1406
MFE319	Prof. Kyle Hoehn, UNSW	RRID: CVCL_2112
U87	Prof. Lenka Munoz, University of Sydney	RRID: CVCL_3429
MIAPACA-2	A/Prof Thomas Grewal, University of Sydney	RRID: CVCL_0428
OVCAR3	A/Prof. David Croucher, Garvan Institute	RRID: CVCL_0465
SKOV3	A/Prof. David Croucher, Garvan Institute	RRID: CVCL_0532
A375	Dr. Lorey Smith, Peter MacCallum Cancer Centre	ATCC CRL-1619 RRIDL CVCL_0132
HT144	Dr. Lorey Smith, Peter MacCallum Cancer Centre	ATCC HTB-63 RRID: CVCL_0318
WM266.4	Dr. Lorey Smith, Peter MacCallum Cancer Centre	ATCC CRL-1676 RRID: CVCL_2765
DO4-M1	Dr. Lorey Smith, Peter MacCallum Cancer Centre	Parmenter 2014[37]
Detroit562	A/Prof Thomas Grewal, University of Sydney	RRID: CVCL_1171
HT29	A/Prof. Kellie Charles, University of Sydney	RRID: CVCL_A8EZ
SW-48	A/Prof. Kellie Charles, University of Sydney	RRID: CVCL_1724
SW-1417	A/Prof. Kellie Charles, University of Sydney	RRID: CVCL_1717
Software and algorithms		
GraphPad Prism V9	GraphPad Software	https://www.graphpad.com/
Image Lab 6.1	Bio-Rad	https://www.bio-rad.com/en-au/product/image-lab-software
FlowJo 2	FlowJo LLC	https://www.flowjo.com/
MATLAB	Mathworks	https://au.mathworks.com/products/matlab.html
MSConvert	N/A	Chambers 2012[38]
MSDial	Riken	http://prime.psc.riken.jp/compms/msdial/main.html
Biorender	Biorender	https://biorender.com/

Method details

Cell lines and culture conditions

A panel of 27 adherent cancer cell lines from 10 different origins were used in this study. Cell lines were obtained both from vendors and kindly provided by academic labs. Details of culturing media (Gibco) can be found in Supp Table 1. All culturing media were supplemented with 10% fetal bovine serum (Cytiva Hyclone) and 1% penicillin/streptomycin (Gibco). Cells were incubated at 37°C and 5% CO_2.

^{14}C-Radiolabelling

Cells were seeded in technical triplicates in 6-well plates. The next day, the cells were washed in warm PBS and incubated in 600 μL media containing 0.1 mmol/L cold palmitate, [1-^{14}C] palmitate (0.1 μCi/mL; Perkin Elmer) conjugated to 2% (wt/vol) FA-free BSA and 1 mmol/L -carnitine in RPMI or DMEM glucose-free medium (Gibco) for 4 hours. Fatty acid oxidation rates were determined from CO_2 production as previously described[19] in either 0 mM or 5 mM glucose to measure FAO flexibility. Protein content was measured by BCA protein assay and absorbances read at 540 nm using a Tecan infinite M1000 pro plate reader.

Radiolabelled glucose titration

MDA-MB-231 cells were treated as above for radiolabelled experiments, supplemented with 0, 1, 3, 5, 7, 9 11, 25 mM glucose +/- 10 μM etomoxir. In the selected panel of 6 cell lines, cells were treated as above for radiolabelled experiments, supplemented with 0, 1, 3, 5 mM glucose.

Mitotracker

Cells were seeded in 12-well plates at a density of $2x10^5$ cells/well in RPMI or DMEM HG medium. After 24 hours, cells were washed in warm PBS and obtained by trypsinisation and collected in serum-free RPMI medium. The cell suspension was centrifuged at 1500 rpm for

5min in fluorescence-activated cell sorting (FACS) tubes. Cells were subsequently stained with

200nM Mitotracker Red and Mitotracker Green at 37°C for 30 mins. Additionally, unstained,

red only, green only, and 2.5mM FCCP treated cells were included as experimental controls.

Cells were centrifuged at 1500 rpm for 5min and fixed with 4% paraformaldehyde at 37°C for

10 mins. Cells were washed with warm PBS and centrifuged at 1500 rpm for 5 mins and

resuspended in 150 mL PBS before the samples were read on a BD LSR Fortessa flow

cytometer. Data analysis was performed using FlowJo software.

Immunoblotting

Cells were seeded in 6-well plates (5×10^5). After 24 hours, cells were lysed in RIPA buffer

containing 1% DTT and 0.1% protease and phosphatase inhibitor cocktail. Protein content was

measured by BCA protein assay, and absorbances were read at 540 nm using a TECAN infinite

M1000 pro plate reader. Cell lysates were subjected to SDS-PAGE, and transferred to

polyvinylidene difluoride (PVDF) membranes (Merck Millipore). Ponceau staining was

performed on membranes as a loading control, and then membranes were immunoblotted for

CPT1a. Chemiluminescence was performed using Luminata Crescendo Western HRP

Substrate and imaged using the Bio-Rad ChemiDoc MP Imaging System and Image Lab

software 4.1 (Bio-Rad Laboratories).

Cell viability

Cells were seeded in 96-well plates in 6 well replicates (3×10^3 cells/well). After 24 hours the

media was removed and replaced with glucose- and glutamine free media (Gibco)

supplemented with 5 mM glucose, 1 mM glutamine and/or 150 µM FAs, conjugated to 2%

(wt/vol) FA-free BSA. For glucose-deprived conditions, DMEM no glucose, no glutamine

media was supplemented with 1 mM glutamine and 150 mM palmitate; for glucose and

glutamine-deprived conditions, media was supplemented with 150 µM palmitate only. Media

supplemented with 10% FBS was used as a control. At 6, 12 and 24 hours, 50 mL of MTT

reagent was added to wells. MTT reactions were incubated at 37°C and 5% CO_2 for 4 hours,

and then stopped by replacing media with 100mL DMSO (Sigma–Aldrich) per well.

Absorbances were read at 540 nm using a TECAN infinite M1000 pro plate reader. Cells were

seeded in 6-well plates at $5x10^5$ cells/well for live cell counts. After 24 hours, media was

replaced as described for the MTT assay, and cells counted by Trypan blue (Gibco) exclusion

at 6 and 24 hours.

[U-^{13}C]-stable isotope tracing

Cells were seeded in 6-well plates ($5x10^5$). After 24 hours, plates were washed with warm PBS

and media replaced with 600μL of DMEM no glucose, no glutamine media (Gibco)

supplemented with 5 mM glucose, 1 mM glutamine and/or 150 μM FAs, replaced with their

respective [U-^{13}]-C forms. [U-^{13}C]-FAs (Palmitate (16:0), Oleate (18:0), Stearate (18:1),

Linoleate (18:2), or Linolenate (18:3). For glucose-deprived conditions DMEM no glucose, no

glutamine media was supplemented with 1mM glutamine and [U-^{13}C]-150 μM palmitate; for

glucose and glutamine-deprived conditions media was supplemented with [U-^{13}C]-150 μM

palmitate only. FAs were conjugated to 2% (wt/vol) FA-free BSA-containing media for 24

hours at 37°C before treating cells. Cells were incubated in ^{13}C containing medium for 6 hours.

Extracellular substrate sampling

Cells were seeded in 6-well plates ($5x10^5$). After 24 hours, wells were washed with warm PBS

and media replaced with 1 mL or 2 mL of DMEM with no glucose, no glutamine media

supplemented with 5 mM glucose, 1 mM glutamine, and 150 μM FAs, conjugated to 2%

(wt/vol) FA-free BSA. 100 μL of extracellular media were collected from wells at 3, 6, 12, 24

hour timepoints for cells incubated in 1mL of media, and 12, 24 hours for cells incubated in 2

mL of media. Media samples were centrifuged at 16,000 x g for 5 mins at 4°C, and the

supernatant collected for subsequent LC-MS analysis.

Cell lysate extraction for LC-MS

Media was aspirated from plates and the cells washed with 2 mL ice-cold 0.9% (w/v) NaCl.

Cells were scraped with 300 µL of extraction buffer, EB, (1:1 LC/MS methanol:water (Optima)

+ 0.1x internal standards (non-endogenous polar metabolites) and transferred to a 1.5 mL

microcentrifuge tube. A further 300 µl of EB was added to the cells and combined in the tube.

600 µL of chloroform (Honeywell) was added before vortexing and incubating on ice for 10

mins. Tubes were vortexed briefly and centrifuged at 15,000g for 10 mins at 4°C. The aqueous

upper layer was collected and dried without heat using a Savant SpeedVac (Thermo Fisher) for

metabolomics LC-MS analysis. The lower layer was collected and dried under nitrogen flow

for lipidomics LC-MS analysis.

Measuring stable-isotope labelled metabolites by LC-MS

Dried aqueous upper phase samples were resuspended in 40 mL Amide buffer A (20mM

ammonium acetate, 20 mM ammonium hydroxide, 95:5 HPLC H_2O: Acetonitrile (v/v)) and

vortexed and centrifuged at 15,000g for 5 mins at 4°C. 20 mL of supernatant was transferred

to HPLC vials containing 20 mL acetonitrile for LCMS analysis of amino acids and glutamine

metabolites. The remaining 20 mL of the resuspended sample was transferred to HPLC vials

containing 20 mL LC-MS H_2O for LCMS analysis of glycolytic, pentose phosphate pathway,

and TCA cycle metabolites. Amino acids and glutamine metabolites were measured using

Vanquish-TSQ Altis (Thermo) LC-MS/MS system. Analyte separation was achieved using a

Poroshell 120 HILIC-Z Column (2.1x150 mm, 2.7 mm) (Agilent) at ambient temperature. The

pair of buffers used were Amide buffer A and 100% acetonitrile (Buffer B), flowed at 200

mL/min; injection volume of 5 mL. Glycolytic, pentose phosphate pathway and TCA cycle

metabolites were measured using 1260 Infinity (Agilent)-QTRAP6500+ (AB Sciex) LC-

MS/MS system. Analyte separation was achieved using a Synergi 2.5 mm Hydro-RP 100A LC

Column (100x2 mm) at ambient temperature. The pair of buffers used were 95:5 (v/v)

water:acetonitrile containing 10 mM tributylamine and 15 mM acetic acid (Buffer A) and 100%

acetonitrile (Buffer B), flowed at 200 mL/min; injection volume of 5 mL. Raw data from both

LC-MS/MS systems were extracted using MSConvert[38] and in-house MATLAB scripts.

Measuring extracellular substrates by LC-MS

20 μL of collected extracellular media was mixed with 80 μL water, vortexed. 10 μL of diluted

media was mixed with 90 μL of extraction buffer containing 1:1 (v/v) acetonitrile and methanol

+ 1x internal standards (non-endogenous standards) at -30°C. The mixture was centrifuged at

12,000xg for 5 min at 4°C and transferred into HPLC vials for LC-MS analysis measured using

the Vanquish-TSQ Altis as described above. Raw data from both LC-MS/MS systems were

extracted using MSConvert[38] and in-house MATLAB scripts.

Measuring stable isotope labelled lipids by LC-MS

Dried lower phase samples were resuspended in 100 μL 4:2:1 (v/v)

isopropanol:methanol:chloroform containing 7.5 mM ammonium formate. Acyl-carnitine

lipids were measured using a Thermo Scientific Q-Exactive-HF-X Hybrid Quadrupole

Orbitrap LC-MS/MS system. Analyte separation was achieved using an Agilent Poroshell 120,

HILIC, 2.1x100 mm, 2.7 μm column. The pair of buffers used were 0.1(v/v)% formic acid and

10 mM ammonium formate in H_2O and 0.1(v/v)% formic acid in acetonitrile, flowed at 200

μL/min on positive mode. MS1 data was acquired with the following settings: 3.5 kV,

capillarity temperature 300°C, 120,000, injection time 100 ms, AGC $1x10^6$, scan range 200-

1000. For ddMS2 data acquirement, the following settings were used: top 5, resolution 30,000,

200-2000, isolation 1.0m/z, nce 30, AGC target $1x10^3$, intensity threshold $5x10^3$, dynamic

exclusion 20s. Raw data from both LC-MS/MS systems were extracted using MSConvert[38]

and in-house MATLAB scripts.

Quantification and statistical analysis

Student's t-test, one- or two-way ANOVA with Dunnett's or Tukey's multiple comparisons,

and linear regression statistical tests were performed with GraphPad Prism 9.0 (GraphPad

Software). $P < 0.05$ was considered significant. Data are reported as mean ± standard error of

the mean (SEM), standard deviation (SD), or min-max values of at least three independent

determinations. Radiolabelling experiments for the expansive cell line panel were of at least

one independent determination (N=1-x as indicated in the respective figure legend) with at

least 3 technical replicates each. Schematic diagrams were created with Biorender.com.

Supplementary information

Supplementary Table 1: Cell line details

Cell line	Cancer type	Culture media (Gibco)
MDA-MB-231	Breast	DMEM HG
MDA-MB-468		RPMI
MCF7		DMEM HG
MDA-MB-134		RPMI
C4-2B	Prostate	RPMI
PC-3		RPMI
22Rv1		RPMI
LNCaP		RPMI
DU145		RPMI
CWR-AD1		RPMI
MR42D		RPMI + 10μM enzalutamide
HEPG2	Liver	DMEM HG
Ishikawa	Endometrial	DMEM HG
MFE296		DMEM HG
MFE319		DMEM HG
U87	Glioblastoma	DMEM HG
MIAPACA-2	Pancreatic	DMEM HG
OVCAR3	Ovarian	RPMI
SKOV3		RPMI
A375	Melanoma	RPMI
HT144		RPMI
WM266.4		RPMI
DO4-M1		RPMI
Detroit562	Head and Neck	DMEM/F12
HT29	Colorectal	DMEM HG
SW-48		DMEM HG
SW-1417		DMEM HG

Supplementary figures

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Figure S1, related to figure 1. FAO increases most dramatically under complete glucose
deprivation.

(A) Fold change (FC) difference of ^{14}C-FA 16:0 oxidation rates -/+ glucose. Cell lines ranked by fold change
difference magnitude. N=1-5 per cell line.
(B) [1-^{14}C]-FA 16:0 oxidation rates in the presence of 5 mM, 3 mM, 1 mM, or 0 mM glucose. N=3 per cell line.
Statistically significant differences to ^{14}C-FA 16:0 oxidation experiments in 5mM glucose shown.
(C) [1-^{14}C]-FA 16:0 oxidation rates in MDA-MB-231 cells in the presence of 0 to 25 mM glucose +/- etomoxir
in 0.1mM ^{14}C-FA 16:0. N=1, 3 technical replicates.
(D) [1-^{14}C]-FA 16:0 oxidation rates in MDA-MB-231 cells in the presence of 0 to 25 mM glucose +/- etomoxir
in 0.1mM ^{14}C-FA 16:0 compared to 0.5 mM ^{14}C-FA 16:0. N=1, 3 technical replicates.
(E) Correlations between active mitochondria content and basal (+glc), maximal (-glc), and fold change (-/+)
FAO rates. N=3 per cell line.

Graphs show mean ± SEM. *$p<0.05$ by One-way ANOVA with Dunnett's multiple comparisons test.

Figure S2, related to figure 2. Substrate uptake and production of cancer cells over 24
hours.

(A) Percentage of substrate starting concentration glucose, glutamine, and FA 16:0, and intensity of lactate
uptake over 24 hours. N=3 per cell line.
(B) Percentage of substrate starting concentration glucose or glutamine at 1 mL (blue) or 2 mL (red) medium.
N=3 per cell line.
Graphs show mean ± SEM.

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Figure S3, related to figure 3. Palmitate cannot completely maintain TCA cycle activity
under glucose and glutamine deprivation.

(A) Impact of glucose- or glucose and glutamine- deprivation on metabolic activity (top) assessed by MTT assay
absorbance results to 48hours normalised to day 0 results (Dotted line at 24 hours indicates replenishment of
media); or Cell viability (bottom) assessed by live cell counts at 0, 6 and 24 hours normalised to day 0 results.
N=3 per group.
(B) Relative abundance (normalised to +glucose/+glutamine) of [U-^{13}C]-FA 16:0 to oxoglutarate or malate. N=5-
9 per cell line.

Graphs show mean ± SEM. P<0.05 by One-way ANOVA with Dunnett's multiple comparisons test. *compared
to +glucose/+glutamine, ^compared to -glucose/+glutamine

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Author contributions

Conceptualisation by A.J.H. and L.E.Q. Project administration, visualisation, writing-original draft by N.T.S. Investigation by N.T.S., M.F.H.S., M.G., and A.W. Methodology by L.E.Q. Software by N.T.S., and L.E.Q. Formal analysis by N.T.S and L.E.Q. Writing-editing & reviewing by N.T.S., L.E.Q., and A.J.H. Funding acquisition, resources by A.J.H. Supervision by A.J.H., and L.E.Q.

Declaration of interests

The authors declare that they have no competing interests.

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