Targeting fatty acid synthase suppresses tumor development in *NF2/CDKN2A*-deficient

malignant pleural mesothelioma

Sivasundaram Karnan[1*+], Akinobu Ota[1, 2*+ §], Muhammad Nazmul Hasan[1*, 3], Hideki Murakami[4],

Md. Lutfur Rahman[3, 5 §], Md Wahiduzzaman[3, 6 §], Md Towhid Ahmed Shihan[1,3], Nushrat

Jahan[1,3], Lam Quang Vu[7], Ichiro Hanamura[7], Akihito Inoko[4], Miho Riku[4], Hideaki Ito[4],

Yoshifumi Kaneko[4], Yinzhi Lin[8], Toshinori Hyodo[1], Hiroyuki Konishi[1], Shinobu Tsuzuki[1],

Yoshitaka Hosokawa[1]

[1]Department of Biochemistry, Aichi Medical University School of Medicine, Nagakute, Aichi,

Japan

[2]Department of Food and Nutritional Environment, College of Human Life and Environment,

Kinjo Gakuin University, Nagoya, Aichi, Japan

[3]EuGEF Research Foundation, Chattogram, Bangladesh

[4]Department of Pathology, Aichi Medical University School of Medicine, Nagakute, Aichi,

Japan

[5]Department of Biochemistry, Emory University School of Medicine, Atlanta, GA, USA

[6]Department of Foundations of Medicine, NYU Grossman Long Island School of Medicine, 101

Mineola Blvd, Mineola, NY-11501, United States

[7]Division of Hematology, Department of Internal Medicine, Aichi Medical University School of

Medicine, Nagakute, Aichi, Japan

[8]Department of Microbiology and Immunology, Aichi Medical University School of Medicine,

Nagakute, Japan.

[*]These authors contributed equally to this work.

[§]Current Address

[+]Correspondence:

Sivasundaram Karnan, Ph.D. Department of Biochemistry, Aichi Medical University School of

Medicine

1-1 Yazakokarimata, Building #2, Room 362, Nagakute, Aichi 480-1195, Japan.

Phone: +81-561-62-3311 (ex. 12304); Fax: +81-561-61-4056

E-mail: skarnan@aichi-med-u.ac.jp

https://orcid.org/ :0000-0003-2165-7565

Akinobu Ota, Ph. D., Professor, Department of Nutritional Environment, College of Human

Life and Environment, Kinjo Gakuin University, 2-1723, Moriyama-ku, Nagoya, Aichi 463-

8521, Japan.

Tel: +81- 52-798-0180 (ext. 415) Fax: +81-52-798-0370

E-mail: aota@kinjo-u.ac.jp

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Abstract

Malignant pleural mesothelioma (MPM) is an uncommon yet deadly cancer linked to asbestos

exposure. The lack of effective early diagnosis and treatment leads to reduced life expectancy

among patients with MPM. This study is aimed to identify a novel molecular target inhibitor to

develop more effective therapeutics for MPM. Our drug screening assay showed that the fatty

acid synthase (FASN) inhibitor cerulenin demonstrates strong and selective anti-proliferative

properties against *NF2/CDKN2A(p16)*-deficient MPM cells, surpassing the effects of cisplatin

or pemetrexed. FASN protein is frequently detected in *NF2/p16*-deficient MPM tumor-derived

tissues (15/15, 100%), but rarely in *NF2/p16*-intact MPM tumors (8/25, 32%). Notably,

cerulenin administration successfully reduced the growth of *NF2/p16*-deficient MPM tumors in

xenografted mice. Cerulenin inhibits mitochondrial fission by targeting dynamin-related protein

1 (DRP1) in *NF2/p16*-deficient cells. Moreover, the disruption of the FASN gene leads to

increased ubiquitination of DRP1. These findings suggest that FASN might play a role in the

tumorigenesis of MPM cells through the regulation of mitochondrial dynamics. This research

offers a novel perspective on the potential development of precision medicine for MPM.

Keywords: CRISPR/Cas9, FASN, p-Drp1, cerulenin, MPM

Abbreviations

MPM, malignant pleural mesothelioma; IHC, immunohistochemistry; CRISPR, clustered

regularly interspaced short palindromic repeats; Cas9, CRISPR-associated protein 9; FASN,

Fatty acid synthase; DKO, double knockout; TKO, FASN-knockout DKO; MTR, MitoTracker;

Drp1, dynamin-related protein 1; OPA1, optic atrophy-1; PARP, Poly (ADP-ribose) polymerase;

ROS, reactive oxygen species; FCM, flow cytometry.

Introduction

Malignant pleural mesothelioma (MPM) is a highly aggressive neoplasm originating from

pleural mesothelial cells, commonly linked to asbestos exposure after a latency period of 30–40

years (1-3). Diagnosis of MPM typically occurs in advanced stages, contributing to a grim

prognosis for patients (4). MPM generally responds poorly to radiation and conventional

chemotherapy (5). Recent advancements in the management of the disease, including diagnosis,

staging biomarkers, and treatment strategies have provided greater understanding of MPM;

however, the mortality rate remains high, partially due to late diagnosis and treatment resistance

(6, 7).

Recent studies have revealed that MPMs are associated with frequent genetic

alterations in the neurofibromatosis 2 (*NF2*), cyclin-dependent kinase inhibitor 2A (*CDKN2A*,

p16), and BRCA1-associated protein 1 (*BAP1)* tumor suppressor genes (8-11). Previously, we

have observed high expression levels of *FGFR2*, *CD24,* and *CAMK2D* in *NF2*-knockout (KO),

NF2/p16-double KO (DKO), and *BAP1*-KO mesothelial cell lines, respectively (12-14),

suggesting representation of diagnostic and therapeutic targets for MPM. However, a library

containing 364 anticancer drugs was screened using *NF2/p16*-DKO human mesothelial cells to

precisely understand the molecular determinants of MPM, and cerulenin—a fatty acid synthase

(FASN) inhibitor was identified.

FASN—a key catalytic enzyme regulating long-chain fatty acid synthesis—is highly

expressed in several human cancers, including MPM (15-17). FASN activity is necessary for

mitochondrial priming (18) and senescence in cancer cells (19). FASN amplifies mitochondrial

ATP synthesis (20) and promotes mitochondrial fission, key processes in the reprogramming of

fatty acid metabolism in colon cancer cells (21). Mitochondria are highly pleomorphic and

considered primary mediators of intracellular energy production (22, 23). Alterations in

mitochondrial dynamics are associated with disease progression and drug resistance in various

cancers (24-27); however, the precise role of FASN in mitochondrial biology in MPM cells

remains unknown.

Inhibiting FASN activity prevents cancer cell proliferation, migration, invasion, cell

cycle, signaling pathway, and energy metabolism in breast and colon cancers, diffuse large B-

cell lymphomas, melanomas, retinoblastomas, prostate cancers, and mesothelioma cells (17, 28-

35). Cerulenin, which is available as a naturally occurring or pharmacologically synthesized

antibiotic, is an effective apoptosis inducer, with mitochondria being the key player in

cerulenin-mediated apoptosis (36). This occurs by disrupting the mitochondrial membrane and

dysregulating the mitochondrial membrane proteins (37). The preferential activity of FASN and

its inhibitor cerulenin are attractive targets for anticancer therapy; however, the underlying

mechanism of cerulenin-mediated FASN inhibition and cancer cell suppression in MPM

remains unclear.

This study aimed to determine promising diagnostic and therapeutic targets for

NF2/p16-deficient MPM by FASN and its effect on mitochondrial dynamics. Additionally,

considering that cerulenin exhibits a selective antiproliferative effect on MPM cells, its role as

potential molecular-targeted anticancer drug was determined.

Results

The FASN inhibitor cerulenin selectively suppresses the proliferation of NF2-p16-deficient

MPM cells

Given that we have previously shown differential gene expression between control and

NF2/p16-double knockout (DKO) isogenic human mesothelial cell clones, we attempted to

identify an inhibitor that specifically suppresses the proliferation of *NF2/p16*-DKO cells, which

are frequently observed in MPM (38). To this end, we performed the MTT assay with the

Screening Committee of the Anticancer Drugs library, which comprises 364 chemical

compounds (Supplementary Table S1). Our drug screening assay showed that the FASN

inhibitor cerulenin, but not C75, exhibited the most potent antiproliferative activity against

NF2/p16-DKO cells (Fig. 1a). To further evaluate cerulenin's impact on MPM cell proliferation,

we conducted MTT assays using various mesothelial and MPM cell lines. These included

$NF2^{+/+}/p16^{+/+}$ (parental MeT-5A and HOMC-B1 cells), $NF2^{-/-}/p16^{+/+}$ (Y-MESO-14),

$NF2^{+/+}/p16^{-/-}$ (NCI-2452, ACC-MESO-4, Y-MESO-9, and MSTO-211H), and $NF2^{-/-}/p16^{-/-}$

cells (MeT-5A-DKO, HOMC-B1-DKO, NCI-H290, NCI-H2052, and MSTO-211H-DKO).

Interestingly, the average IC$_{50}$ values in the *NF2/p16*-DKO mesothelial cell lines and MSTO-

211H cells ranged from 5 μM to 7.5 μM, which is lower than that in the $NF2^{+/+}p16^{+/+}$ cell lines

(approximately 20 μM) (Fig. 1b). This outcome indicates that cerulenin selectively inhibits the

proliferation of *NF2/p16*-DKO cells. Compared with the antiproliferative effect of cerulenin,

treatment with pemetrexed or cisplatin was relatively ineffective even at higher doses against

both the $NF2^{+/+}p16^{+/+}$ and $NF2^{-/-}/p16^{-/-}$ MPM cell lines (Fig. 1c). Furthermore, cerulenin

treatment suppressed the proliferation of MPM cell lines NCI-H290 and NCI-H2052, both of

which spontaneously lacked *NF2/p16* expression (Fig. 1d). These findings indicate that

cerulenin holds potential as a valuable molecular target for anticancer therapy in MPM.

FASN expression is inversely associated with NF2/p16 expression in human MPM tissues

Immunohistochemistry was performed using 45 MPM tissue samples and 2 mesothelium

samples to assess FASN expression in mesothelioma (Supplementary Table S2). Microscopic

analyses revealed 3 strong (3^+), 14 moderate (2^+), and 11 weak (1^+) FASN-positive signals in the

MPM tissues (Fig. 2a; Supplementary Table S2), whereas no positive signal was observed in the

normal mesothelium (Fig. 2b). Additionally, the FASN positivity rate was higher in the

NF2/p16-negative cases (15/15 tissues, 100%) than in the NF2/p16-positive cases (8/25 tissues,

32%; Fig. 2b). Notably, MPM patients demonstrating elevated FASN expression levels

experienced notably shorter overall survival compared to those with lower FASN expression

levels (Fig. 2c). These findings strongly imply a close correlation between FASN expression and

poorer prognosis in MPM patients.

Cerulenin suppresses tumor growth of NF/p16-deficient MSTO-211H cells in vivo

The effect on the growth of NF2/p16-deficient MSTO-211H (NF/p16-DKO MSTO-211H)

tumors was examined in SCID mice to assess the potential of cerulenin for clinical application.

The intraperitoneal injection of cerulenin notably inhibited tumor growth in comparison to the

vehicle control (see Figs. 3a and 3b). Furthermore, cerulenin treatment did not result in any loss

of body weight (see Fig. 3c). Subsequent assessment of cerulenin's safety in normal BALB/c

mice revealed no noteworthy alterations in body weight (data not presented) or

histopathological changes in the heart, liver, or kidneys on Day 14 post-treatment (see Fig. 3d).

Furthermore, biochemical analyses showed no alterations in blood parameters, including levels

of aspartate aminotransferase (AST) and alanine aminotransferase (ALT), following cerulenin

administration (see Fig. 3e; Supplementary Table S3). These findings indicate the potential

safety and efficacy of cerulenin as a molecular-targeted anticancer medication for managing

patients with NF2/p16-deficient MPM.

Cerulenin accelerates the mitochondrial fusion processes and induces apoptosis in NF2/p16-

DKO cells

Growing evidence indicates FASN's role in tumor proliferation through the regulation of energy

metabolism. Consequently, we investigated cerulenin's impact on mitochondrial morphology in

NF2/p16-DKO cells. We assessed the morphology of the mitochondria using MitoTracker,

which permanently binds to mitochondria regardless of cell survival. Confocal microscopy

showed that mitochondrial hyperfusion (long tubular network structure) increased after

cerulenin treatment in *NF2/p16*-DKO MeT-5A and HOMC-B1 mesothelial cells, whereas no

obvious change was observed in the parental cells (Fig. 4a). Similarly, mitochondrial

hyperfusion increased after cerulenin treatment in parental MSTO-211H (spontaneously

CDKN2A/p16-deficient) cells, which was further enhanced in the *NF2/p16*-DKO MSTO-211H

cells (Fig. 4a). We examined whether cerulenin influences the phosphorylation status of

dynamin-related protein 1 (DRP1), a critical regulator of mitochondrial fission, in *NF2/p16*-

DKO cells. Immunofluorescence analysis revealed elevated levels of DRP1 phosphorylation in

all *NF2/p16*-DKO cells compared to parental cells; however, cerulenin treatment mitigated

these increases in DRP1 phosphorylation levels (see Fig. 4a). Additionally, Western blot

analysis demonstrated that cerulenin reduced the phosphorylation levels of both Akt and DRP1

(see Fig. 4b). We unexpectedly found that the FASN protein levels were relatively higher in all

the*NF2/p16*-DKO cells than in the parental cells tested (Fig. 4b). In fact, *NF2/p16* loss exhibited

high FASN expression levels in the MPM cells tested, as compared with NF2- and/or p16-

positive MPM cells (Supplementary Fig. S1). To assess cerulenin's impact on the apoptosis of

NF2/p16-double knockout (DKO) cells, we conducted flow cytometry analysis using Annexin V

(AxV) and propidium iodide (PI) double staining. The results revealed a significant increase in

the Ax^+/PI^+ population in NF2/p16-DKO mesothelial and MPM cells following cerulenin

treatment compared to parental cells (see Fig. 4c), suggesting a potential heightened sensitivity

of NF2/p16-DKO cells to cerulenin. Similarly, western blot analysis revealed that the cleaved

poly (ADP-ribose) polymerase (PARP) levels markedly increased, whereas both FASN protein

and phosphor-AKT levels decreased after cerulenin treatment in *NF2/p16*-DKO cells (Fig. 4b).

Furthermore, our gene set enrichment analysis (GSEA) demonstrated a significant suppression

of PI3K-AKT-MTOR signaling in NF2/p16-DKO cells treated with cerulenin (see Fig. 4d).

These findings strongly indicate that cerulenin selectively triggers apoptosis by targeting

oncogenic AKT signaling in NF2/p16-DKO cells.

FASN knockout (TKO) suppresses cell proliferation and DRP1 activity in NF2/p16-DKO

MeT-5A cells

FASN knockout (hereafter called triple knockout "TKO") cell clones #1 and #2 were generated

using previously established *NF2/p16*-DKO MeT-5A cell clones by targeting exon 3 of the

FASN gene to further clarify the role of FASN in *NF2/p16*-DKO mesothelial cells

(Supplementary Figs. 2a and b). As expected, the FASN protein expression levels were

undetected in the TKO #1 and #2 cells (Supplementary Fig. S2c). Further, effect on the

proliferation rate by the disruption of the *FASN* gene was tested. The MTT assay indicated a

notably reduced proliferation rate in the TKO cell clones (#1 and #2) compared to the DKO cell

clones (see Fig. 5a). Furthermore, Western blot analysis revealed a decrease in Akt and DRP1

phosphorylation levels, alongside elevated levels of cleaved PARP and caspase-3 in the TKO

cell clones relative to the DKO cell clones (see Fig. 5b). Additionally, OPA1, MFN1, and MFN2,

which positively regulate mitochondrial fusion, increased at the protein levels in the TKO cell

clones (Fig. 5b). Therefore, the effect of *FASN* knockout on the mitochondrial morphology

under *NF2/p16*-deficient conditions was examined. Confocal microscopy showed a significant

increase in the elongated and tubular structure of the mitochondria in the TKO cells as

compared with the DKO cells (Fig. 5c). The protein expression of DRP1 decreased consistently,

whereas that of OPA1 increased in the TKO cell clones (Fig. 5d). The effect of proteasome

inhibition on DRP1 protein expression was examined to uncover the molecular mechanism

underlying the DRP1 expression change in the TKO cells. Western blot analysis demonstrated

that both the phosphorylation and protein expression levels of DRP1 were reinstated following

treatment with the proteasome inhibitor MG-132 in the TKO cells (see Fig. 5e). Furthermore,

the immunoprecipitation assay revealed a higher DRP1 ubiquitin level in the TKO cells than in

the DKO cells (Fig. 5f). The intracellular reactive oxygen species (ROS), largely generated in

the mitochondria, increased in the TKO cells (Fig. 5g), suggesting involvement of FASN

expression in the mitochondrial activity, which might affect mitochondrial ROS generation in

NF2/p16-DKO cells.

Discussion

This study investigated the involvement of FASN in MPM cell proliferation and revealed the

selective antiproliferative effect of the FASN inhibitor cerulenin in *NF2/p16*-deficient human

MPM cells. The results revealed that loss of *NF2*/*p16* sensitizes the human mesothelial and

MPM cells to cerulenin as compared with the *NF2*- and/or *p16*-intact cells.

Immunohistochemical analysis also showed detection of FASN expression in *NF2*/*p16*-negative

human mesothelioma tissues. The analysis of public data revealed that the overall survival was

significantly shorter for patients with MPM exhibiting a higher *FASN* expression level.

Moreover, cerulenin suppressed the tumor growth of *NF2*/*p16*-deficient human MPM cells *in*

vivo without any relevant toxicities.

FASN has been reported as a therapeutic target and an oncogene in several cancers,

including breast, pancreatic, and colorectal cancers (38-43). FASN overexpression is correlated

with poor prognosis in HER2-positive ovarian and gastric cancers (44, 45). FASN

overexpression was observed in a subset of MPM cell lines and human MPM tissues in this

study. Additionally, FASN expression was preferentially detected in the *NF2*/*p16*-deficient

mesothelial and MPM cell lines as compared with the*NF2*/*p16*-intact mesothelial and MPM cell

lines. MPM patients with higher FASN expression exhibited significantly shorter overall

survival than those with lower FASN expression. Our previous study reported that the loss of

NF2 and *p16* genes significantly enhances anchorage-independent growth and epithelial–

mesenchymal transition phenotype in mesothelial cells, in which the cancer-stem cell marker

CD24 is upregulated in *NF2*/*p16*-deficient mesothelial and MPM cell lines (46, 13). Although

the association between *NF2/p16* deficiency and FASN overexpression remains unclear, the

retardation of the proliferation of *NF2/p16*-deficient cells by FASN disruption indicates the

possibility of important role of FASN in *NF2/p16*-deficient MPM cell survival.

In our investigation, we observed that the upregulation of FASN expression coincides with

the concurrent phosphorylation of oncogenic Akt in *NF2/p16*-DKO cells. Wagner et al.

previously reported that the FASN inhibitor impairs receptor-PI3K-mTORC1 signaling in

ovarian cancer cells (47). They also showed that FASN inhibitors impair the

phosphatidylinositol 3,4,5-trisphosphate (PIP3) levels, diacylglycerol (DAG), and subsequent

PI3K-AKT suppression (47). Another report showed that sensitivity to FASN inhibitors is

driven by DAG level reductions and DAG-PKC signaling pathway impairments (48). We found

that cerulenin significantly inactivates the PI3K–Akt–mTOR signaling pathway in *NF2/p16*-

DKO mesothelial cells. Although it is still unclear whether the membrane lipid composition

changes in the *NF2/p16*-DKO cells, the loss of *NF2/p16* may enhance the proliferation of MPM

cells via FASN-mediated PI3K-Akt signaling. Indeed, *FASN* knockout in *NF2/p16*-DKO cells

delays proliferation and decreases Akt phosphorylation as compared with the *FASN*-intact DKO

cells. Therefore, it is possible that cerulenin suppresses PI3K-Akt signaling by modulating lipid

membrane biogenesis.

The mitochondria are the main organs involved in the generation of cellular fuel ATP

through several metabolic processes, including lipid catabolism. Besides, the equilibrium

between mitochondrial fission and fusion occurs for the maintenance of mitochondrial functions,

which also plays an important role in both normal cells and cancer progression (49-56). In this

current study, the absence of FASN in the DKO (TKO) MeT-5A cells led to an increase in

elongated and tubular structured mitochondria, indicative of mitochondrial fusion. Similarly,

cerulenin treatment induces mitochondrial fusion formation in *NF2/p16*-deficient (DKO) MPM

cells. The absence of FASN, as well as FASN inhibition, notably elevated the count of apoptotic

cells in DKO MPM cells. These findings imply that FASN plays a crucial role in sustaining the

survival of MPM cells through its involvement in mitochondrial activity. At a molecular level,

both the expression and phosphorylation of DRP1 decreased in TKO MeT-5A cells and

cerulenin-treated DKO cells. Furthermore, the depletion of FASN in TKO cells resulted in

increased protein expression of OPA1, MFN1, and MFN2, all of which promote mitochondrial

fusion. Interestingly, proteasome inhibitor MG-132 restored DRP1 protein expression in the

TKO cells. Since the ubiquitinated DRP1 level is elevated in TKO cells compared to DKO cells,

it suggests a potential role of FASN in stabilizing DRP1 at the protein level. Given that FASN-

mediated fatty acids are converted to phospholipids (e.g., cardiolipin) that comprise the

mitochondrial membrane, it would be of interest to examine whether cerulenin affects the lipid

composition of mitochondrial membranes in MPM.

The present study has some limitations. First, the FASN protein expression was shown

more frequent in NF2- and/or p16-negative MPM tissues as compared in both positive tissues;

however, the somatic mutations of *NF2* and/or *p16* genes in the corresponding tissues was not

investigated. Therefore, further studies are required to clarify the association between FASN

expression and functional status of *NF2* and/or *p16* in MPM. Second, the antitumor effect of

cerulenin was demonstrated using only one human MPM cell line, MSTO-211H. Hence,

additional tests using primary human MPM-derived tumors are required for evaluating the

efficacy of targeting FASN therapy in MPM.

In conclusion, our genome-edited human mesothelial cell model identified that the FASN

inhibitor cerulenin preferentially exhibits an antiproliferative effect on MPM cells lacking NF2

and/or p16. These results underscore the potential clinical utility of cerulenin in crafting

molecular-targeted therapies for combating MPM.

Materials and methods

Cell culture

Two immortalized normal human mesothelial cell lines, MeT-5A (pleural mesothelial) and

HOMC-B1 (omental mesothelial; epithelioid type), along with eight human mesothelioma cell

lines—ACC-MESO-4, Y-MESO-12, Y-MESO-14, Y-MESO-9, NCI-H2452, MSTO-211H, NCI-

H290, and NCI-2052—were generously provided by Dr. Y. Sekido from the Division of

Molecular Oncology, Aichi Cancer Center Research Institute (Nagoya, Japan). The HOMC-B1

cell lines were maintained 18s according to previously described protocols. The ACC-MESO-4,

Y-MESO-12, Y-MESO-14, Y-MESO-9, NCI-H2452, MSTO-211H, NCI-H290, and NCI-2052

cell lines were cultured in RPMI-1640 medium (Wako Pure Chemical Industries, Ltd., Osaka,

Japan) supplemented with 10% fetal bovine serum (Sigma) and 1% penicillin-streptomycin

(Wako Pure Chemical Industries, Ltd.) at 37°C in a 5% CO_2 humidified atmosphere.

Gene KO using the CRISPR/Cas9 system

We employed the CRISPR/Cas9 system to disrupt NF2 expression in the MSTO-211H cell line

and FASN expression in the DKO cells, following established procedures (12). The

pSpCas9(BB)-2A-GFP (PX458) plasmid was generously provided by Feng Zhang (plasmid

#48138; Addgene, Watertown, MA, USA) (58). Briefly, sgRNA sequences were chosen using an

optimized CRISPR design tool (http://crispr.mit.edu/). The selected sgRNA sequences for NF2

and FASN were 5′ -AAACATCTCGTACAGTGACA-3′ in exon 8 and 5′ -

CCTTCAGCTTGCCGGACCGC-3′ in exon 3, respectively. Plasmids expressing hCas9 and

sgRNA were generated by ligating oligonucleotides into the BbsI site of PX458 (NF2/PX458 or

FASN/PX458). To establish a knockout (KO) clone, 1 μ g of NF2/PX458 plasmid was

transfected into the MSTO-211H cell line, and 1 µg of FASN/PX458 plasmid was transfected

into MeT-5A-DKO#1 cells (1×10^6 cells) using a 4D-Nucleofector instrument (Lonza Japan,

Tokyo, Japan). After 3 days, GFP-expressing cells were sorted using fluorescence-activated cell

sorting (BD FACSAria™ III Cell Sorter; BD Biosciences, San Jose, CA, USA). A single clone

was selected, expanded, and utilized for the biological assays.

Cell growth assay

The growth rate of the cells was assessed using the MTT assay (59). Briefly, cells (1×10^3

cells/well) were seeded into 96-well plates and cultured for the specified durations.

Subsequently, 10 µL of MTT solution (5 mg/mL; Sigma-Aldrich) was added to each well, and

the cells were incubated for 4 hours. Following this, cell lysis buffer was added to dissolve the

resultant colored formazan crystals. The absorbance at 595 nm was measured using a

SpectraMAX M5 spectrophotometer (Molecular Devices, Sunnyvale, CA, USA).

Western blot analysis

Western blotting was conducted following established protocols (13, 60). The antibodies utilized

are detailed in Table S4. Immune complexes were visualized using ImmunoStar LD (Wako Pure

Chemical Industries, Ltd.) and imaged with a LAS-4000 image analyzer (GE Healthcare, Tokyo,

Japan).

Annexin V assay

Cells were plated into six-well culture plates (5×10^5 cells/well) and treated with cerulenin

(7.5 µg/mL) for 48 hours. Subsequently, the cells were exposed to annexin V (Ax)-FITC and

propidium iodide (PI) (10 µg/mL) at 25°C for 15 minutes. The fluorescence intensities were

quantified using fluorescence-activated cell sorting (FACS) analysis (LSRFortessa X-20 Flow

Cytometer, BD Biosciences,, Franklin Lakes, NJ, USA).

Immunofluorescence

The cells were cultured on glass coverslips and fixed with a 4% paraformaldehyde solution for

20 minutes at 25°C. Subsequently, the cells were permeabilized with phosphate-buffered saline

(PBS) containing 0.1% Triton X-100, blocked in PBS containing 7% serum for 30 minutes, and

then incubated with primary antibodies followed by Alexa Fluor-conjugated secondary

antibodies (Invitrogen). Cell staining was conducted using MitoTracker (stock solution 1 mM;

diluted at 1:10,000) for 1 hour at 37°C to visualize the mitochondria. Following staining, the

cells were washed with PBS and fixed with cold paraformaldehyde (3.2% in PBS) for 20

minutes at room temperature. After additional washing steps, the samples were mounted using

PermaFluor, and images were captured using the FLUOVIEW FV3000 Series of Confocal Laser

Scanning Microscopes.

Immunohistochemistry

Immunohistochemical analysis was conducted following previously established protocols (61).

A human mesothelioma tissue array (MS-1001a; US Biomax, Rockville, MD, USA) was

utilized. The tissue sections were incubated with primary antibodies (NF2, p16, and FASN

antibody, 2 μg/mL). Negative controls were established using normal rabbit immunoglobulin G

or by omitting the primary antibody. Immunoreactivity was independently assessed by two

investigators (S.K. and H.M.), and staining intensity was graded as strong (+3), moderate (+2),

weak (+1), or negative (0).

Xenograft experiments

All animal experiments were conducted in accordance with the protocols (approval number-

2022-20) approved by the ethical committee of Aichi Medical University and followed

established guidelines. Female Fox Chase SCID mice (CB17/Icr-Prkdcscid/IcrIcoCrl) were

procured from CLEA Japan Inc. (Tokyo, Japan) and housed at the Institute of Animal

Experiments in Aichi Medical University under pathogen-free conditions. The mice, aged 6–8

weeks and weighing 17–18 g each, were utilized for the study. Subcutaneous injection of

MSTO-211H-DKO cells (6×10^6 cells) was performed in the SCID mice. Upon reaching a

tumor volume of approximately ~100 mm^3, the mice were randomly assigned to two groups

(treatment and control). Cerulenin (20 mg/kg, administered three times per week) was

intraperitoneally administered to mice in the treatment group, while PBS served as the vehicle

control in the control group. Tumor measurements were taken every 3–4 days, and tumor

volume was calculated using the modified ellipsoid formula ($1/2 \times$ length $\times$ width^2).

DCFH–DA-based DCF assay

Cells were plated into six-well culture plates at a density of 3×10^5 cells per well. The following

day, they were exposed to 10 μM DCFH–DA (2',7'-dichlorodihydrofluorescein diacetate) in the

medium for 45 minutes in the absence of light. Subsequently, the DCFH–DA solution was

removed, and the cells were washed with PBS. After detachment using trypsin, the cells were

suspended in media, centrifuged at 1,000 rpm for 5 minutes, and resuspended in PBS in 0.5-mL

tubes, which were then placed on ice. The samples were analyzed via FACS using LSRFortessa

X-20 Flow Cytometer (BD Biosciences).

Statistical analysis

The data are presented as mean ± SE values. Statistical significance among groups was assessed

using one-way analysis of variance followed by Dunnett's comparison. All statistical analyses

were conducted using SPSS 23.0 software (SPSS Inc., Chicago, Illinois, USA).

Competing interest

This publication has no conflicts of interest, and there has been no substantial financial support

for this work that could have influenced its outcome. The manuscript has been reviewed and

endorsed by all named authors, and there are no other individuals who meet the criteria for

authorship but are not listed. All authors have consented to the order in which they are listed in

the manuscript.

Availability of data and materials

All accessible data are provided either in the main manuscript or in the supplementary materials.

Complete and unaltered western blot data utilized in the study are available in the

supplementary information. Furthermore, specific inquiries, data, and materials can be obtained

upon reasonable request to the corresponding author.

Ethical standards

The research conducted adhered to the ethical standards outlined by the Japanese Ministry of

Health, Labour, and Welfare.

Author contributions

The study concept was devised by S.K. and A.O. oversaw project acquisition and supervision.

S.K., M.L.R., M.N.H., and M.W. formulated the statistical analysis plan and performed the

statistical analyses. Data and resources were acquired by S.K., H.M., L.Q.V., I.H., M.T.A.S.,

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reviewed and edited the manuscript draft and consented to the final version for publication.

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Figure legends

Fig. 1. Identification of FASN inhibitor cerulenin against the DKO-deficient cells and its

effect on MPM cell line survival

(**a**) Evaluation of compounds from the Screening Committee of Anticancer Drugs library. MeT-

5A cells (DKO and NF2/p16-WT [parental] cells) were exposed to 364 chemical compounds

(10 μM each). Cell survival rates were normalized to the mean optical densities of untreated

cells (set as 100%). Results are depicted as differences in cell survival percentages between

NF2/p16-WT and DKO cells. Red spots indicate >40% reduction in cell viability in DKO cells

compared to NF2/p16-WT cells. (**b**) Assessment of the impact of the FASN inhibitor cerulenin

on MPM cell line survival. Cell survival rates were calculated as described previously. (**c**)

Examination of cisplatin, pemetrexed, and cerulenin effects on the survival of various MPM cell

lines (MeT-5A, HOMC-B1, Y-MESO-14, Y-MESO-12, NCI-H2452, ACC-MESO-4, Y-MESO-

9, MSTO-211H, MeT-5A-DKO, HOMC-B1-DKO, NCI-H290, NCI-H2052, and MSTO-211H-

DKO) after incubation with indicated drug concentrations (20, 15, 10, 7.5, 5, 2.5, 1.25, 0.625,

and 0 μM) for 72 hours. MTT assays were conducted following the manufacturer's guidelines,

and absorbance was measured at 595 nm using a spectrophotometer. Cell survival percentages

were calculated accordingly. Cisplatin, pemetrexed, and cerulenin are denoted by red, black, and

green lines, respectively. Data are presented as mean ± standard error (n = 3).

Fig. 2. Immunohistochemical (IHC) analysis of FASN expression

(**a**) Illustrative IHC findings demonstrating FASN expression in two MPM tissues (top panels,

cases 5 and 10) and two normal mesothelial tissues (bottom panel, cases 46 and 47). (**b**)

Summary of IHC outcomes in MPM tissues. The bar graph indicates the percentage of total

MPM cases exhibiting FASN expression by NF2/p16-positive or NF2/p16-negative cases. (**c**)

Kaplan-Meier analysis was performed to assess the impact of FASN expression on overall

survival in TCGA mesothelioma patients, sourced from the UCSC Xena database. Fluorescence

values above and below the median were defined as high (red) and low (blue) FASN expression,

respectively. Scale bar = 60 μm.

Fig. 3. Effect of cerulenin on the growth of MSTO-211H-DKO tumor cells in vivo

The MSTO-211H-DKO cells (5×10^6 cells/mouse) were injected subcutaneously into SCID

mice. Following tumor establishment (day 0), cerulenin (20 mg/kg body weight) or PBS vehicle

was administered intraperitoneally on days 0, 2, 5, 8, 10, 12, 15, and 17. (**a**) A representative

image depicting tumor-bearing xenografted mice in each group. (**b–c**) Line graphs illustrating

(**b**) relative tumor volume and (**c**) mouse body weight (in grams) during cerulenin treatment.

Tumor volume is presented relative to the size at day 0 (defined as 100%). Data are presented as

mean ± SE (n = 5). *p < 0.05. (**d**) Representative histochemical images of the heart, liver, and

kidney from BALB/c mice after the 14-day observation period (Hematoxylin and Eosin staining,

magnification, ×100; scale bar = 100 μm). (**e**) Alterations in blood chemistry (AST, ALT, TG,

and LDH) following cerulenin administration compared with control data.

Fig. 4. Role of cerulenin in mitochondrial morphology and apoptosis in DKO-deficient

MPM cells

(**a**) The mitochondria were visualized using the MitoTracker probe (red). Nuclei were stained

with Hoechst (blue), in MeT-5A (upper left panel), HOMC-B1 (upper center panel), and MSTO-

211H (upper right panel). Cells were immunostained with Drp1 antibody (red) and Hoechst

(blue) in the mitochondria, as depicted in the lower left panels (MeT-5A), lower center panels

(HOMC-B1), and lower right panels (MSTO-211H). Two representative magnified view has

been illustrated in bottom part. (**b**) Protein expression of FASN, p-AKT, AKT, p-Drp1, Drp1, c-

PARP, and GAPDH analyzed by Western blotting in MeT-5A, MeT-5A-DKO, HOMC-B1,

HOMC-B1-DKO, MSTO-211H, and MSTO-211H-DKO cells treated with cerulenin (7.5 µM)

for 48 h. (**c**) Flow cytometry analysis. Representative results of AxV-PI-based staining are

presented on the left. The graphs on the right display the percentage of AxV^+/PI^+ apoptotic cells

following cerulenin treatment (7.5 µM) for 48 h measured using LSRFortessa X-20 Flow

Cytometer (BD Biosciences). Data are mean ± SE (n = 3). Asterisks denote significant

differences between the DKO-deficient cells (MeT-5A and HOMC-B1 cells and MSTO-211H

cells) (*p < 0.05). (**d**) Gene set enrichment analysis (GSEA). MeT-5A, MeT-5A-DKO, HOMC-

B1, and HOMC-B1-DKO cell clones were treated with cerulenin (7.5 µM) or control solvent for

48 h. A cDNA microarray analysis (Agilent) was conducted to obtain a comprehensive gene

expression profile. Raw data were analyzed using GSEA with HALLMARK gene sets (C1).

Fig. 5. Disruption of *FASN* has adverse effects on mitochondrial morphology and

dynamics in MPM cells

Cellular phenotype of MeT-5A-DKO/fatty acid synthase (DKO/FASN) triple knockout (TKO)

in MeT-5A cells. (**a**) MTT assay of DKO (#1 and #2) and TKO (#1 and #2) cell clones in MeT-

5A cells. The optical density (OD; 595 nm) at each time point (days 0, 1, 3, and 5) is presented

as the mean ± SEM (n = 6). Growth ratios are expressed relative to the optical densities detected

at day 0, arbitrarily defined as 1. (**b**) Western blot analysis of FASN, p-AKT, AKT, p-Drp1,

Drp1, Opa1, MFN1, MFN2, c-PARP, and c-caspase3 expression in the DKO and TKO cells. (**c**)

Mitochondria labeled with the MitoTracker probe (red; lower panel). Nuclei labeled with

Hoechst (blue; upper panel). DKO and TKO shown in the left and right panels, respectively. (**d**)

Cells immunostained with Opa1 antibody (green) and Hoechst (blue) in the mitochondria as

shown in the left (DKO) and right (TKO) panels. (**e**) Effects of the proteasome inhibitor MG-

132 on FASN, pDrp1, and Drp1 proteins observed in TKO and DKO cells. (**f**) DKO and TKO

cells transfected with ubiquitin expression plasmid followed by MG-132 (10 μM) treatment for

6 hours. Subsequently, each cell lysate immunoprecipitated with Drp1 and subjected to

immunoblot with anti-ubiquitin antibody (P4D1). (**g**) Effect of DCFH-DH (10 μM, 45 min) on

reactive oxygen species production in TKO cells (Red) compared to DKO cells (Blue) in clone

#1 (left panel) and #2 (right panel).

Fig. 2

a

Mesothelioma

Case 5   Case 10

NF2

p16

FASN

Normal Mesothelium

Case 46   Case 47

FASN

b

FASN Expression (%)

NF2 (+)/p16 (+) cases   NF2 (-)/p16 (-) cases

c

Survival Probability

FASN low (N=42)
FASN high (N=42)

P-value = 0.001317

days

Fig. 5