**The Orphan G Protein-Coupled Receptor GPR52 is a Novel Regulator of Breast Cancer Multicellular Organization**

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**Running title:** Role of GPR52 in breast cancer

**Statement of Significance:**

We showed that loss of the orphan G protein-coupled receptor GPR52 in human breast

cell lines leads to increased cell clustering, hybrid/partial EMT, and increased tumor

burden in zebrafish.

**Abstract:**

Background: G protein-coupled receptors (GPCRs) are the largest class of membrane-

bound receptors that transmit critical signals from extracellular to intracellular spaces.

Transcriptomic data of resected breast tumors show that low mRNA expression of orphan

GPCR GPR52 correlates with reduced overall survival in patients with breast cancer,

leading to the hypothesis that loss of GPR52 supports breast cancer progression.

Methods: CRISPR-Cas9 was used to knockout GPR52 in the human triple-negative

breast cancer (TNBC) cell lines MDA-MB-468 and MDA-MB-231, and in the non-

cancerous breast epithelial cell line MCF10A. 2D and 3D *in vitro* studies, electron

microscopy, Matrigel culture, and a zebrafish xenograft model were used to assess the

morphology and behavior of GPR52 KO cells. RNA-sequencing and proteomic analyses

were also conducted on these cell lines, and transcriptomic data from The Cancer

Genome Atlas (TCGA) database were used to compare GPR52-null and wild-type (WT)

signatures in breast cancer.

Results: Loss of GPR52 was found to be associated with increased cell-cell interaction in

2D cultures, altered 3D spheroid morphology, and increased propensity to organize and

invade collectively in Matrigel. Furthermore, GPR52 loss was associated with features of

EMT in MDA-MB-468 cells, and zebrafish injected with GPR52 KO cells developed a

greater total cancer area than those injected with control cells. RNA sequencing and

proteomic analyses of GPR52-null breast cancer cells revealed an increased cAMP

signaling signature. Consistently, we found that treatment of wild-type (WT) cells with

forskolin, which stimulates the production of cAMP, induces phenotypic changes

associated with GPR52 loss, and inhibition of cAMP production rescued some GPR52

KO phenotypes.

Conclusion: GPR52 is an orphan GPCR and its role in cancer progression has not been

previously characterized. We found that GPR52 loss in breast cancer cells can lead to

increased cell clustering, collective invasion, and EMT *in vitro*. These are features of

increased cancer aggression. Our results reveal that GPR52 loss is a potential

mechanism by which breast cancer progression may occur and support the investigation

of GPR52 agonism as a therapeutic option for breast cancer.

**Graphical Abstract:**

**Keywords:** breast cancer, clustering, adhesion, collective invasion, cAMP, metastasis

**Background:**

Metastasis is the primary cause of death in breast cancer patients (1). The process

required for cancer cells of solid tumors to metastasize is intensive, and cells undergo

several adaptive processes to enhance their metastatic potential. These include changes

in cell-cell and cell-matrix adhesion, transitions between epithelial and mesenchymal cell

states, and the ability to degrade and invade tissues (2, 3). However, the upstream

regulators of these processes are not well characterized, which limits mechanistic

understanding and therapeutic intervention.

G protein-coupled receptors (GPCRs) are the largest protein family encoded by the

human genome (4). These receptors consist of an extracellular N-terminus followed by

seven transmembrane α-helices, which are connected by three intracellular and three

extracellular loops and a cytoplasmic C-terminal tail (5). Their transmembrane structure

enables the transmission of critical signals between extracellular and intracellular spaces.

Dissociation of the heterotrimeric G protein upon GPCR activation can regulate a diverse

array of downstream molecules, allowing for the regulation of various cell processes,

including proliferation, migration, adhesion, and metabolism (6, 7).

GPR52 is a structurally unique GPCR that is enriched in the basal ganglia and its

endogenous ligand remains unknown, rendering it an orphan receptor (8). It has garnered

increased attention in recent years owing to its potential as a neurotherapeutic target for

schizophrenia and Huntington's disease (9, 10). We examined GPR52 mRNA levels in

19 solid tumor types and determined that GPR52 is significantly downregulated in tumor

samples (11). However, the role of GPR52 in cancer progression has not been reported.

In patients with breast cancer, we found that GPR52 expression was further reduced in

metastases compared with that in the primary tumor (11). Low GPR52 mRNA expression

in resected breast tumors is also associated with a reduction in overall survival (12).

We generated GPR52 KO cancerous and non-cancerous breast epithelial cells from the

widely used MDA-MB-468, MDA-MB-231, and MCF10A lines. Loss of GPR52 led to an

increase in cell-cell interactions in 2D cultures, with the formation of cell clusters in each

cell line. Transmission electron microscopy (TEM) of WT and GPR52 KO cells revealed

differences in cell-cell adhesion properties, including the length of the cell-cell interface

and the proximity of cells along this interface. In 3D Matrigel cultures, GPR52 KO was

associated with changes in the organization and morphology of MDA-MB-468 and MDA-

MB-231 spheroids. Furthermore, GPR52 loss increased the propensity of breast cancer

cells to organize and invade collectively when cultured in Matrigel. Lastly, we found that

the culture of GPR52 KO cells on poly-D-lysine led to partial EMT.

RNA-sequencing and proteomic studies of GPR52-null cells demonstrated the

upregulation of several pathways implicated in breast cancer, including cAMP signaling

(13). Furthermore, we found that phosphorylation of CREB was increased in GPR52 KO

cells and that treatment of WT cells with forskolin, which stimulates the production of

cAMP, promotes features associated with GPR52 loss, whereas inhibition of cAMP

production rescued some of the GPR52 KO phenotypes.

Overall, our results revealed that GPR52 loss is a potential mechanism by which

important processes in breast cancer progression, such as EMT and changes in

multicellular organization, may occur. These processes have long been implicated in

many solid tumors; however, critical and targetable upstream regulators have not been

identified. As GPCRs are the targets of more than 1/3 of FDA-approved small-molecule

drugs, these data support the investigation of GPR52 agonism as a viable therapeutic

approach in breast cancer (14).

**Results:**

**GPR52 expression is reduced in cancerous tissue compared to normal, and**

**inversely associated with breast cancer prognosis and metastatic potential**

To date, there have been no reports on the physiological role of GPR52 in any type of

cancer. However, GPR52 mRNA expression levels have been reported in many

transcriptome profiles of resected cancerous and noncancerous tissues. We compared

GPR52 mRNA expression levels in normal and tumor samples from the tissues from

which solid tumors arose (Fig. 1A) using the TNMplot webtool (11). We found that, in the

majority of these tissue types, GPR52 mRNA expression levels were lower in tumors than

in non-cancerous samples (Fig. 1A, $P<0.05$, indicated with an asterisk). Importantly, low

tumor GPR52 mRNA expression was found to be associated with a reduction in overall

survival in patients with breast cancer (Fig. 1B), with the impact of low GPR52 on survival

being more pronounced for triple-negative breast cancer (TNBC) (Fig. 1C) (12). GPR52

mRNA expression was also lower in metastatic nodes than in the primary resected tumor

(Fig. 1D, p=4.45e-17) (11), which is consistent with GPR52 the differentially expressed in

several human breast cell lines with varying metastatic potentials (Fig. 1E).

**GPR52 regulates cell-cell adhesion properties of cancerous and non-cancerous**

**breast epithelial cells**

We used CRISPR-Cas9 to generate indels in *GPR52* in two human breast cancer cell

lines (MDA-MB-231 and MDA-MB-468) and one non-cancerous breast epithelial cell line

(MCF10A), using two different guide RNAs (Supplementary Fig. S1). The morphology of

GPR52 KO cells was notably different from that of control cells. GPR52 KO MDA-MB-

231, MDA-MB-468, and MCF10A cell lines generated from both guide RNAs formed

clusters of tightly packed cells with clearly defined borders in the monolayer culture (Fig.

2A). To further investigate the effect of GPR52 loss on the interactions between cells, we

performed TEM of vector control and GPR52 KO MDA-MB-468 cells cultured in

suspension (Fig. 2B). GPR52 KO cells had a shorter cell-cell interface than WT cells (Fig.

2C), but they interacted more closely with one another along the length of their interface

than WT cells did (Fig. 2D). The cell diameter was not significantly different between the

groups, suggesting that the reduction in cell interface length in the GPR52 KO group was

not due to a reduction in cell size (Fig. 2E).

**GPR52 loss is associated with EMT, collective invasion, and an altered pattern of**

**ECM digestion in breast cancer**

Given the rounded property of GPR52 KO cells, we sought to improve their adherence to

2D culture by coating tissue culture plates with poly-D-lysine (Fig. 3A). The culture of

GPR52 KO MDA-MB-468 cells on plastic coated with poly-D-lysine led to their elongation

and a mesenchymal phenotype. This was not observed in WT cells. Western blotting of

GPR52 KO MDA-MB-468 cells revealed upregulation of mesenchymal cell markers, such

as Snai1 and vimentin, but the cells continued to express E-cadherin (Fig. 3B).

Compared to WT cells, 3D culture of GPR52 KO MDA-MB-468 cells led to the formation

of disorganized spheroids with irregular borders (Fig. 3A-B, top rows; 3C). To further

define the impact of GPR52 loss on this invasive phenotype, we plated cells as a

monolayer and evaluated their invasion through a layer of Matrigel (Fig. 3E). Interestingly,

GPR52 KO cells tended to organize and invade collectively in large clusters (MDA-MB-

468) or sheets (MDA-MB-231) (Fig. 3F). We categorized all cancer foci with an area ≥

3140 $\mu m^2$ at z=10 $\mu m$ as Class B structures (yellow outline). This threshold was selected

because the diameter of MDA-MB-468 and MDA-MB-231 cells was found to range from

to 10-20 $\mu m$, therefore, the cross-sectional area of approximately 10 cells was 10 × π ×

$r^2$ = 10 × π × $10^2$=~3140). We then calculated the sum of the areas of all Class B

structures and divided this by the sum of the areas of all cancer foci at z=10 $\mu m$. We found

that the fraction of the area occupied by Class B structures was increased in the MDA-

MB-468 and MDA-MB-231 GPR52 KO groups, suggesting an increased propensity to

organize collectively (Fig. 3G-H).

Although collective invasion has been investigated previously, the effect of this behavior

on the ECM through which cells invade has not been well characterized. To assess the

pattern of ECM degradation, we incorporated dye-quenched (DQ)-collagen IV, which

contains sequestered fluorophores that are released following proteolysis of collagen IV,

a major component of the basement membrane that breast cancer cells invade (18). At

the 24-hour timepoint, the DQ signal was found to colocalize strongly with the GPR52 KO

cells, while it was more diffuse and less colocalized with the vector control cells for both

MDA-MB-468 and MDA-MB-231 cells (Fig. 3I). Furthermore, we normalized the area of

the DQ signal to the area occupied by cancer cells and found that it tended to be lower

for the GPR52 KO groups than for the vector control, suggesting a focal area of matrix

degradation (Fig. 3L-M).

**Proteomic and transcriptomic analyses of GPR52 KO breast cell lines and resected**

**breast tumors**

Next, we conducted proteomic analyses of the WT and GPR52 KO MDA-MB-468, MDA-

MB-231, and MCF10A cell lines. Using Ingenuity Pathway Analysis (IPA, Qiagen), we

observed upregulation of signatures associated with cellular homeostasis, viability,

survival, proliferation, and migration in all three cell lines, whereas the signatures

associated with organismal death and cell death of tumor cell lines were both significantly

reduced (Fig. 4A). Several upstream regulators were predicted to be similarly altered

across the GPR52 KO lines (Fig. 4B). We were particularly intrigued by the signature

associated with the cAMP analog 8-bromo-cAMP, as GPR52 activation and function have

been associated with its regulation of intracellular cAMP levels (9, 10).

The TCGA-BRCA dataset reports RNA sequencing data of resected breast tumors from

a cohort of patients. Normalized GPR52 mRNA expression in TCGA-BRCA tumors was

visualized (Fig. 4C), and it was determined that 45.7% did not express GPR52, whereas

the remainder expressed non-zero levels of GPR52 (Fig. 4D). The RNA-sequencing

datasets were compared for the GPR52 non-expressing and -expressing cohorts and the

differentially expressed genes (DEGs) were imported into IPA. We also conducted RNA

sequencing of GPR52 KO and WT MDA-MB-468 cells that were cultured in a monolayer

and imported the DEGs into IPA. We identified several common signatures in both

datasets. Notably, upregulation of the signature associated with cAMP response element-

binding protein (CREB1), a transcription factor that is activated downstream of cAMP

signaling, was increased in both datasets (Fig. 4E) (19). Based on phosphoproteomic

analyses of MDA-MB-468, MDA-MB-231, and MCF10A cells, we identified kinases

predicted to be active in the vector control (Fig. 4F) and GPR52 KO (Fig. 4G) datasets

(20). The rank of each of the top kinases in the GPR52 KO cell lines was then compared

to that in the vector control group (Fig. 4H). This revealed the greatest increase in the

rank of VRK1, which regulates cell cycle progression via phosphorylation and activation

of CREB (21).

**cAMP production is regulated by GPR52 and mediates phenotypes associated with**

**GPR52 loss**

Next, we explored whether cAMP could modulate the phenotypes observed following

GPR52 loss in MDA-MB-468 cells. GPR52 KO cells exhibited less rounding and were

able to spread on plastic with adenylyl cyclase inhibitor (ACi) treatment (Fig. 5A; arrows).

Interestingly, the expression of Snai1 was induced by forskolin (FSK, a direct activator of

adenylyl cyclase) treatment of WT cells, whereas vimentin expression was reduced in

GPR52 KO cells treated with ACi (Fig. 5B). ACi treatment of GPR52 KO MDA-MB-231

cells also increased the area of DQ normalized to the area of tdTomato without affecting

the degree of colocalization of DQ and tdTomato (Fig. 5C-E).

To further explore the relationship between GPR52 and cAMP signaling, we next

determined whether GPR52 activation led to a change in intracellular cAMP levels, as

described by other groups (8, 9). To do this, we used a bioluminescence resonance

energy transfer 2 (BRET2)-based EPAC sensor, GFP10-EPAC-RlucII (Supplementary

Fig. S2A) (22). This modified form of EPAC contains a luminescent donor and a

fluorescent acceptor that are in proximity to one another when EPAC is not bound to

cAMP. However, the binding of cAMP induces a conformational shift that leads to an

increased distance between the donor and acceptor, and a reduction in energy transfer.

We found that increasing the amount of GPR52 and/or the concentration of FTBMT, a

synthetic GPR52 agonist, led to a reduction in the BRET ratio in HEK293 cells

(Supplementary Fig. S2B). Next, we introduced FTBMT and the EPAC sensor into MDA-

MB-468 cells and found that BRET values tended to increase at higher doses

(Supplementary Fig. S2C). To investigate whether GPR52 couples with $G_{aq}$, we also

quantified intracellular $Ca^{2+}$ levels over a similar range of FTBMT doses using the $Ca^{2+}$-

sensitive dye Fluo-4. Despite observing a robust response to the sarcoendoplasmic

reticulum calcium ATPase (SERCA) inhibitor thapsigargin, we observed no change in

baseline or thapsigargin-induced cytoplasmic $Ca^{2+}$ levels (Supplementary Fig. S2D).

**Expression of the melanoma cell adhesion molecule (MCAM) is inversely related to**

**GPR52 in breast cancer and is regulated by cAMP**

RNA-sequencing analysis of MDA-MB-468 cells demonstrated that GPR52 loss is

associated with differential expression of many cell adhesion molecules (CAMs) (Fig. 6A),

including melanoma cell adhesion molecule (MCAM). MCAM is highly expressed in large

blood vessels, but recent studies have also described increased MCAM expression in

certain cancer types and its promotion of cancer progression (23-25). In breast cancer,

increased MCAM mRNA expression in resected tumors was associated with a reduction

in overall survival (Fig. 6B) (12). The expression of MCAM and GPR52 mRNA was

inversely correlated in resected breast tumors (Fig. 6C). We found that MCAM protein

expression was increased in GPR52 KO MDA-MB-468 cells and that 1.4 mM ACi

treatment reduced MCAM expression (Fig. 6D). This was consistent with the effects of

GPR52 loss in MCF10A cells (Supplementary Fig. S3).

**Loss of GPR52 is associated with increased TNBC burden in zebrafish**

As we observed that loss of GPR52 led to changes in organization, cell-cell adhesion,

and invasiveness of breast cancer cells, we wanted to determine whether these changes

were associated with an increase in breast cancer burden *in vivo.* To enable close

monitoring of cancer cell organization and distribution, we used a zebrafish xenograft

model (Fig. 7A) (26, 27). The TG(flk1:EGFP-NLS) zebrafish strain, which constitutively

expresses a green fluorescent protein in endothelial cells, allows cancer cells to be

monitored in relation to the zebrafish vasculature (28).

Two independent studies were performed to compare the behavior of the vector

control MDA-MB-468 cells with GPR52 sgRNA1 and sgRNA2 cells. We found that WT

and GPR52 KO MDA-MB-468 cells were detectable throughout the body of the zebrafish

at 30 h post-injection (hpi) (Fig. 7B). We also observed that WT and GPR52 KO cells

circulated collectively in the zebrafish bloodstream and identified endothelial cells

between cancer cells, suggesting an interaction between the two cell types (Fig. 7C). The

number of cancer foci did not differ significantly between groups at 30 hpi (Fig. 7D-E).

However, the total cancer area, which was calculated as the sum of the area of cancer in

the head (superior to the otolith) and trunk (distal to the injection site, not including the

yolk sac) (Fig. 7F-I),) was significantly greater in zebrafish injected with GPR52 KO cells

(Fig. 7J-K).

Increased clustering of cancer cells is associated with reduced sensitivity to

cytotoxic chemotherapeutic drugs, particularly when used as a single agent (2, 29).

Doxorubicin is one of the most potent chemotherapeutic drugs approved by the Food and

Drug Administration and is used in breast cancer treatment (30, 31). Therefore, we

designed a zebrafish xenograft therapeutic study that incorporated 8 $\mu$M doxorubicin or

the vehicle control (Milli-Q water) in E3 water maintained at 5 hpi and then quantified the

cancer area at 30 hpi (32). At 30 hpi, there was a trend towards reduced total cancer area

in doxorubicin-treated animals for both WT and GPR52 KO groups (Fig. 7L-M).

Doxorubicin caused a significant reduction in the breast cancer cell area in the head of

the zebrafish for both WT and GPR52 KO cells, with noticeable residual disease in

animals xenografted with GPR52 KO cells (Fig. 7N-O).

**Discussion**

The data presented herein demonstrate that GPR52 is a novel regulator of

multicellular organization in breast cancer and its loss can promote features of cancer

progression. First, we observed an increase in cell-cell interactions and cell clustering in

2D cultures with GPR52 loss in MCF10A, MDA-MB-468, and MDA-MB-231 cell lines.

TEM demonstrated that GPR52 loss in MDA-MB-468 cells is associated with a reduction

in the length of the interface between the two cells, but that GPR52 KO cells are more

juxtaposed with one another than WT cells, which exhibit more intercellular space along

their interface. Multicellular aggregation and increased cell-cell adhesion are mechanisms

by which cancer cells can increase their metastatic potential (2). Moreover, the increase

in disorganization and number of MDA-MB-468 spheroids with GPR52 loss are two

hallmarks of cancer progression, with the latter suggesting a potential increase in

stemness due to an increased propensity to survive and proliferate in Matrigel (33).

Furthermore, collective organization and invasion provide mechanisms for cancer

cells to transmit survival signals and invade directionally, in some cases featuring a

distinct leading front of cells that tends to be more mesenchymal and invasive (34). We

also found that GPR52 loss affected the pattern and extent to which cancer cells. A

computational model has previously suggested that collective invasion requires less ECM

digestion than single-cell invasion (35). Linearization and alignment of collagen tracts

have been hypothesized to promote the directed migration of cancer cells, and the

alignment of ECM fibers has been associated with a reduction in proteolytic degradation

of the ECM (35, 36).

Many upstream regulators of EMT have been identified; however, to our

knowledge, induction of EMT or partial EMT with the loss of a GPCR has not been

previously described. Importantly, partial EMT has been documented in circulating tumor

cells (37). The exclusivity of our observations of cell elongation and the development of

mesenchymal morphology on poly-D-lysine, but not tissue culture-treated plastic,

suggests that integrin activity can influence the extent of EMT in this cell line and is an

interesting area for further exploration.

Our finding that GPR52 loss was associated with an increase in the total cancer

area in zebrafish at 30 hpi suggests increased survival and/or growth of GPR52 KO MDA-

MB-468 cells. Our data also suggested a reduction in the sensitivity of cancer cells in the

head to doxorubicin with GPR52 loss. Notably, the blood-brain barrier starts to develop 3

days post-fertilization (dpf) in zebrafish (38). As doxorubicin has a limited capacity to

cross the blood-brain barrier, its efficacy has historically been limited to its effects outside

the CNS (39). However, blood-brain barrier-permeable forms of doxorubicin have been

developed and may have notable utility against head or brain metastases for certain

molecular subtypes of breast cancer, as demonstrated in this study (39).

We identified an increased cAMP signaling signature in GPR52 KO groups based

on RNA sequencing and proteomic studies and found that modulation of cAMP levels

could induce or attenuate some, but not all, phenotypes associated with GPR52 loss.

Increased intracellular cAMP levels have previously been associated with increased

proliferation in 3D cultures, increased invasiveness of breast cancer, and deposition of

ECM components  (13, 40). However, the role of cAMP in regulating ECM degradation

has not been previously characterized. Therefore, these mechanistic studies not only

provide some insight into how GPR52 loss may influence breast cancer cell biology but

also identify the role of cAMP in regulating breast cancer cell adhesion and ECM

digestion. Treatment of HEK293 cells with FTBMT led to an increase in intracellular

cAMP, as previously reported, but MDA-MB-468 cells demonstrated a lack of change or

possible decrease in intracellular cAMP with FTBMT treatment and no change in calcium

levels (41). The coupling of GPCRs to G proteins is promiscuous, and one study

estimated that 73% of GPCRs can activate multiple G proteins (42). Therefore, the

interaction between GPR52 and different G proteins, particularly in different cell types,

warrants further investigation.

Furthermore, we found that the melanoma cell adhesion molecule (MCAM), which

is considered a potential biomarker and promoter of the progression of many cancers,

was increased in MCF10A and MDA-MB-468 cells, and that its expression could be

reduced in GPR52 KO cells with adenylyl cyclase inhibitor treatment (43, 44). Thus, we

identified a mechanism by which MCAM is upregulated in breast cancer and a method to

reduce the expression of this driver of cancer aggression.

**Conclusion:**

Our study identified GPR52 as a regulator of cancer cell clustering, collective

organization, invasion, and EMT. Using a zebrafish xenograft model, we demonstrated

that loss of GPR52 is associated with increased tumor burden. RNA sequencing and

proteomic analyses of WT and GPR52-null breast cancer cells demonstrated differences

in many gene and protein signatures, including increased cAMP signaling in GPR52-null

groups. We showed that inhibition of cAMP production can rescue some phenotypes

associated with GPR52 loss. Thus, we provide a rationale for investigating the therapeutic

effect of GPR52 agonism in breast cancer and encourage investigation of the role of

GPR52 in the progression of additional cancer types. Furthermore, our work identifies

novel features of cell biology that can be regulated by GPCR and broadens the scope of

significance of this class of proteins in cancer biology.

**Figures:**

# FIGURE 1

**Figure 1. Low GPR52 expression is associated with increased breast cancer**

**progression and reduced survival probability of breast cancer patients.** A) The

median GPR52 mRNA expression, interquartile range, minimum value, and upper

whisker are plotted for normal (black) and tumor (red) tissues. Mann-Whitney U tests were

conducted to determine statistical significance. *$P$ <0.05. AC=adenocarcinoma,

SC=squamous cell, CC=clear cell, PA=papillary cell, EC=endometrial carcinoma. B)

KMplot breast cancer overall survival curves for patients with low versus high GPR52

mRNA expression in resected tumors for (B) all breast cancer subtypes and (C) triple

negative breast cancer. D) GPR52 mRNA expression collected from a gene chip dataset

of non-cancerous breast tissue, primary tumor, and metastases of individuals with breast

cancer (un-paired). Data are presented as median with upper and lower quartiles and

minimum and maximum values. One-way ANOVA, p<0.05. E) GPR52 mRNA expression

was determined by QPCR and normalized to the housekeeping gene RPL32. The

normalized GPR52 expression was then divided by the average expression of GPR52

across the cell lines. n=3, line=median. One-way ANOVA, P-value<0.05; ****$P$ <0.00005,

ns=not significant.

**FIGURE 2** A

**Figure 2. GPR52 regulates cell-cell adhesion properties of cancerous and non-**

**cancerous breast epithelial cells.** A) Human breast cell lines were grown on tissue

culture-treated plastic under standard cell culture conditions and imaged at 50-60%

confluency with light microscopy. Scalebar=100 μm. B) MDA-MB-468 cells cultured in

suspension were visualized with TEM from 2500-20,000x magnification. Scalebars:

2500x=10 mm; 12,000x=2 mm, 20,000x=1 mm. C) The length of the interface between

cells, D) fraction of the cell-cell interface that was occupied by free space, and E) cell

diameter were determined using 2500x images. Student's t-test, P-value<0.05; *$P$ <0.05,

ns=not significant. Line=median. VC=vector control.

**FIGURE 3**

**Figure 3. GPR52 loss is associated with EMT, collective invasion, and an altered**

**pattern of ECM digestion in breast cancer.** A) Vector control and GPR52 KO (sgRNA2)

MDA-MB-468 cells were cultured on tissue-culture treated plates that were untreated (top

row) or treated with 1mg/mL poly-D-lysine coated plastic (bottom row). Scalebar=100

mm. B) Western blotting of MDA-MB-468 cells cultured on poly-D-lysine. C) Cells were

cultured in Matrigel for 10 days under complete media conditions. Cytoplasmic tdTomato

(red) and 1:1000 nuclear Hoechst 33342 stain (blue) allow visualization of MDA-MB-468

WT (vector control) and GPR52 KO (GPR52-1, GPR52-2) spheroids. Scalebar=100 mm.

D) The roundness of spheroids was determined based on the tdTomato signal. E)

Schematic of invasion assay. FBS=fetal bovine serum, DMEM= Dulbecco's Modified

Eagle Medium. F) Z-stacks obtained at t=24 hours were assessed at z=10 mm. All Class

B structures are outlined in yellow. Scalebar=150 μm. The fraction of the area occupied

by Class B structures for (G) MDA-MB-468 and (H) MDA-MB-231. VC=vector control.

n=3, One-way ANOVA, P-value<0.05. *$P$ <0.05, **$P$ <0.005, ns=not significant.

Line=median. I) Representative images are shown of tdTomato-tagged cancer cells (red)

and DQ-collagen (green) at t=24 hours at z=10 μm. Scalebar=100 mm. The fraction of

DQ co-localized with tdTomato at z=10 mm (J-K) and area of DQ normalized to the area

of tdTomato (J-K) were determined for MDA-MB-468 and MDA-MB-231, respectively.

n=3, One-way ANOVA, P-value<0.05. *$P$ <0.05, **$P$ <0.005, ***$P$ <0.0005, ns=not

significant. Line=median.

# FIGURE 4

**A**

| Top Diseases and Functions | MDA-MB-468 | MDA-MB-231 | MCF10A |
|---|---|---|---|
| *Organismal death* | -4.044 | -2.366 | -5.462 |
| *Cellular homeostasis* | 1.523 | 1.453 | 3.127 |
| *Cell survival* | 2.153 | 0.957 | 2.91 |
| *Cell viability* | 2.07 | 1.038 | 2.89 |
| *Cell viability of tumor cell lines* | 1.642 | 1.303 | 2.547 |
| Connective or soft tissue tumor | -1.607 | -2.369 | -1.316 |
| Cell proliferation of tumor cell lines | 2.485 | -0.816 | 1.927 |
| Growth of tumor | 2.408 | -0.385 | 2.368 |
| *Cell movement* | 0.301 | 1.173 | 3.479 |
| Cell spreading | -1.419 | 2.43 | 0.988 |
| Leukopoesis | N/A | 2.008 | 2.732 |
| Cell movement of endothelial cells | -0.8 | N/A | 3.873 |
| Cardiopathy | -1.654 | -0.252 | -2.743 |
| Non-malignant disorder | -2.472 | 1.577 | -0.58 |
| Migration of endothelial cells | -0.61 | N/A | 3.966 |
| Pancreaticobiliary cancer | -2.204 | -1.964 | 0.329 |
| Pancreaticobiliary carcinoma | -2.204 | -1.964 | 0.329 |
| Hepato-pancreato-biliary cancer | -2.103 | -1.492 | 0.892 |
| *Migration of cells* | 0.444 | 0.657 | 3.358 |
| Migration of tumor cell lines | -0.608 | -0.643 | 3.145 |
| *Cell proliferation of breast cancer cell* | 1.719 | 0.797 | 1.865 |
| *Cell death of tumor cell lines* | -1.691 | -1.021 | -1.644 |
| *Necrosis of epithelial tissue* | 0.993 | 1.573 | 1.743 |
| *Infection of cells* | 1.859 | 1.466 | 0.966 |
| Upper abdominal cancer | -2.085 | -1.105 | 1.034 |
| Abdominal cancer | -2.409 | -1.093 | 0.699 |

negative z-score — positive z-score

**B**

| Upstream Regulators | MDA-MB-468 | MDA-MB-231 | MCF10A |
|---|---|---|---|
| ST1926 | -3.86 | -1.195 | -1.726 |
| beta-estradiol | 2.087 | 2.078 | 2.373 |
| CD437 | -3.559 | -1.134 | -1.667 |
| medroxyprogesterone acetate | 1.511 | 2.034 | 2.183 |
| Z-LLL-CHO | 2.647 | N/A | 2.77 |
| HRAS | -2.538 | -1.026 | 1.693 |
| HGF | 0.441 | -2.209 | 2.583 |
| MEK | 1.203 | -1.521 | 2.169 |
| topotecan | -2.429 | -1.5 | -0.894 |
| INFG | 0.758 | 0.287 | 3.673 |
| TNF | 0.843 | 0.075 | 3.775 |
| tetradecanoylphorbol acetate | 0.368 | 0.857 | 3.393 |
| NUPR1 | -1.414 | 1.069 | -2.117 |
| LEP | N/A | 2.556 | 1.938 |
| 8-bromo-cAMP | 1.604 | N/A | 2.846 |
| cisplatin | 1.787 | 0.878 | 1.718 |
| miR-30a-3p (and others with seed UUUCAGU) | -2.423 | -1.131 | -0.49 |
| miR-16-5p (and others with seed AGCAGCA) | -2.496 | -1.221 | 0.295 |
| CNTF | 1.667 | 1.066 | 1.238 |
| IL4 | 2.054 | 0.297 | 1.602 |
| XBP1 | 0.664 | 2.041 | 1.211 |
| STAT3 | 1.25 | N/A | 2.644 |
| miR-1-3p (and others with seed GGAAUGU) | -2.177 | -0.711 | -0.99 |
| ASPSCR1-TFE3 | 1.89 | 1.982 | N/A |
| SYVN1 | 1.732 | 0 | 2.111 |

negative z-score — positive z-score

**C / D**

TCGA-BRCA

GPR52 Normalized Expression

Total=138

■ GPR52 non-expressing
▢ GPR52 expressing

**E**

| Upstream Regulators | MDA-MB-468 | TCGA-BRCA |
|---|---|---|
| epicatechin | 2.07E+00 | 2.701 |
| FOXA2 | 2.685 | 2.008 |
| N-CoR | 1.698 | -2.646 |
| TNC | 1.941 | -2.219 |
| CDC20 | -1.89 | -2.236 |
| propylthiouracil | -1.769 | -2.331 |
| 10E-12Z-octadecadienoic acid | 1.681 | -2.275 |
| TNF | -1.014 | -2.937 |
| REST | -1.42 | -2.487 |
| PDPK1 | -1.924 | -1.944 |
| NR2F2 | 2.592 | 1.236 |
| beta-estradiol | 2.192 | 1.615 |
| CFI-402257 | 2.36 | -1.432 |
| SOX11 | 1.809 | -1.943 |
| cycloheximide | 1.103 | -2.576 |
| ciprofibrate | 1.421 | 2.241 |
| bexarotene | 1.621 | 2.007 |
| insulin | 1.444 | 2.179 |
| PAF1 | 2.2 | -1.4 |
| PPARG | -0.649 | 2.913 |
| NGF | 2.324 | 1.193 |
| BDNF | 1.946 | 1.518 |
| rosiglitazone | 1.13 | 2.331 |
| EFNA3 | 1.414 | 2 |
| EFNA4 | 1.414 | 2 |
| MALAT1 | 1.026 | -2.387 |
| CREB1 | 2.939 | 0.468 |
| CTNNB1 | 2.493 | -0.894 |
| ritonavir | -1.254 | -2.111 |
| TEAD4 | -0.967 | -2.376 |

negative z-score — positive z-score

**F**

**G**

**H**

| Phosphoprotein Upstream Regulator | ΔRank(GPR52 KO-VC) |
|---|---|
| VRK1 | 240 |
| HIPK2 | 79 |
| PRKCA | 31 |
| MAPK8 | 29 |
| SRC | 24 |
| CDK9 | 23 |
| MAPK1 | 23 |
| AKT1 | 21 |
| PRKDC | 19 |
| EIF2AK2 | 13 |
| ATM | 10 |
| ATR | 9 |
| MAPK3 | 8 |
| CHEK2 | 6 |
| PLK1 | 4 |
| ABL1 | 3 |
| CSNK2A1 | 2 |
| GSK3B | 2 |
| SRPK1 | 1 |
| CDK1 | -1 |
| AURKA | -2 |
| CDK2 | -5 |
| CSNK2A2 | -5 |
| SRPK3 | -13 |
| AURKB | -13 |

Increase in rank — Decrease in rank

**Figure 4. Proteomic and transcriptomic analyses of GPR52-null breast cell lines**

**and resected breast tumors.** (A-B) Differentially expressed proteins in the GPR52 KO

cell lines with P-value <0.05, FDR<0.05, and fold-change greater than two were imported

into IPA for each of the three cell lines. The common predicted upstream regulators (A)

and top diseases and functions (B) with a P-value <0.05 are depicted. Pathways are

marked N/A (not-applicable) if the z-score is not determined. (C) Normalized expression

of GPR52 in TCGA-BRCA cohort resected breast tumors D) Graphical representation of

proportion of patients with undetected (black) and detected (grey) GPR52 mRNA in

resected breast tumors. E) DEGs in GPR52 KO MDA-MB-468 cells and the GPR52-null

TCGA-BRCA cohort with P-value <0.05, FDR<0.05, and fold-change greater than two

were imported into IPA for pathway analysis. Upstream regulators predicted to be

responsible for the DEGs observed in both datasets with a P-value <0.05 are depicted.

(F-H) Phosphoproteomic analysis was conducted on the groups outlined in Fig 5A. KEA3

software was used to rank kinases that were predicted to be active in the vector control

(F) and GPR52 KO (G) cell lines. H) The difference in rank of kinases which were reported

for both the GPR52 KO and vector control groups.

**FIGURE 5**

**Figure 5. cAMP partially mediates phenotypes associated with GPR52 loss.** A)

GPR52 KO (sgRNA2) MDA-MB-468 cells were cultured in monolayer and treated with

1.4 µM ACi or the vehicle control. Treatment was replaced every 72 hours over 6-8 days.

Scalebar=100 mm. B) Western blotting of MDA-MB-468 cells treated for 24 hours. C)

GPR52 KO MDA-MB-231 cells were plated to confluency in monolayer and treated the

next day with 1.4 mM ACi or vehicle control. Invasion assays were conducted as in **Fig.**

**3**. Scalebar=100 mm. The fraction of DQ co-localized with tdTomato (D) and area of DQ

normalized to the area of tdTomato (E) at z=10 mm at t=24 hours. n=3, Student's t-test,

P-value<0.05; *$P$ <0.05, **$P$ <0.005, ns=not significant. Line=median.

**FIGURE 6**

**Figure 6. Expression of the melanoma cell adhesion molecule (MCAM) is inversely**

**related to GPR52 in breast cancer and is regulated by cAMP.** (A) CAMs that were

differentially expressed in GPR52 KO MDA-MB-468 cells based on RNA-sequencing. P-

value<0.05. n=3. (B) KMplot breast cancer RNA-seq webtool overall survival curves for

patients with low versus high MCAM mRNA expression in resected tumors for all breast

cancer subtypes. Low versus high cutoff was determined based on the maximum

segregation between the groups. (C) TNMplot correlation of MCAM and GPR52 transcript

expression in breast tumors from an RNA-sequencing dataset. (D) MDA-MB-468 cells

were cultured in monolayer (TC-treated, non-PDL coated) and treated with forskolin

(FSK), SQ22536 (ACi), or vehicle control for 24 hours. Cell lysates were probed for MCAM

and beta-actin.

# FIGURE 7

**Figure 7. Loss of GPR52 is associated with increased TNBC burden in zebrafish.**

A) Schematic of zebrafish xenograft study. B) Tg(flk1:EGFP-NLS) zebrafish at 30 hpi.

MDA-MB-468 cells (red) and endothelial cells (green) are visualized. Scalebar=300 μm.

C) Visualization of the interaction between MDA-MB-468 cells (red) and endothelial cells

(green) by confocal microscopy. Scalebar=10 μm. (D-E) The total number of tdTomato

foci per zebrafish. (F-G) The total area of tdTomato in the head and (H-I) trunk per

zebrafish. (J-K) The sum of the area of tdTomato in the head and trunk is expressed as

the total cancer area per zebrafish. VC=vector control. n=51 VC-1, n=59 GPR52-1, n=12

VC-2, n=12 GPR52-2. Student's t-test, $P<0.05$. *= $P<0.05$. ns=not significant.

Line=median. (L-M) Zebrafish were treated with 8 mM doxorubicin or vehicle control (VC)

and imaged at 30 hpi. The total area of tdTomato per zebrafish and (N-O) the area of

tdTomato in the zebrafish head were determined. VC=vector control. DOX=doxorubicin.

n=14 VC, n=24 GPR52-2. Student's t-test, $P<0.05$. ns=not significant. Line=median.

497 **Supplemental figures:**

# FIGURE S1

**A**

GPR52 sgRNA1 target region

Vector Control MDA-MB-468

GPR52 sgRNA1 MDA-MB-468

1 bp deletion allele 1
11 bp deletion allele 2

GPR52 sgRNA2 target region

Vector Control MDA-MB-468

GPR52 sgRNA2 MDA-MB-468

homozygous 55bp deletion

**B**

GPR52 sgRNA1 target region

Vector Control MDA-MB-231

GPR52 sgRNA1 MDA-MB-231

GPR52 sgRNA2 target region

Vector Control MDA-MB-231

GPR52 sgRNA2 MDA-MB-231

1 bp deletion allele 1
19 bp deletion allele 2

**C**

GPR52 sgRNA1 target region

Vector Control MCF10A

GPR52 sgRNA1 MCF10A

homozygous 5bp deletion

GPR52 sgRNA2 target region

Vector Control MCF10A

GPR52 sgRNA2 MCF10A

**Supplementary Figure S1. Sanger sequencing of breast cell lines to confirm indels**

**in the *GPR52* gene.** MDA-MB-468 (A), MDA-MB-231 (B), and MCF10A (C) were

transduced with Cas9 followed by a GPR52-targeted sgRNA or the empty vector. DNA

was extracted from cell pellets and sequenced using GPR52 primers described in

*Materials and Methods.* Indels in the sgRNA target regions were confirmed for cell lines

transduced with GPR52 sgRNA1 and sgRNA2, and the nucleotide position indicating loss

of the WT allele is outlined in black.

**FIGURE S2**

**Supplementary Figure S2. Treatment with GPR52 agonist FTBMT in HEK293 and MDA-MB-468 cells**

A) Schematic of BRET-based GFP10-EPAC1-RlucII cAMP sensor. B) HEK293 cells transfected with GPR52 and GFP-EPAC1-RlucII were treated with varying concentrations of FTBMT for 15 minutes. Datapoints=mean, error bars=SEM. Data is pooled from 1-2 experiments, n=2 technical replicates per experiment.  C) MDA-MB-468 cells transfected with the EPAC1 sensor were treated with increasing concentrations of FTBMT for 30 minutes in the presence of 1 µM forskolin to assess for possible $G_{\alpha i}$ coupling. Datapoints=mean, error bars=SEM. Data was pooled from five independent experiments, n=3 technical replicates per experiment. D) MDA-MB-468 cells were plated at a density of 5,000 cells/well in a 96-well plate. After 24 hours, the cell-permeable calcium indicator Fluo-4 was added to each well. Baseline fluorescence measurements were then obtained (t=0) and FTBMT was added at varying concentrations to achieve the final concentrations listed. The plate was read at 30 second intervals for 10 minutes. 100 nM Thapsigargin (Tg) was then added to all wells as a positive control for $[Ca^{2+}]$ detection. The plate was then read for 30 second intervals for an additional 10 minutes. Datapoints=mean, error bars=SEM. n=8.

**FIGURE S3**

120 kDa: MCAM

42 kDa: β-actin

526 **Supplementary Figure S3. Detection of MCAM in MCF10A cell lysate.** MCF10A

527 vector control, two unique isogeneic GPR52 sgRNA1-transduced cell lines, and GPR52-

528 2 cells were cultured in monolayer to 50-85% confluency. Cell lysates were collected as

529 described in *Materials and Methods* and probed for MCAM and beta-actin.

531 **List of abbreviations:**

| KO | Knockout |
|---|---|
| GPCR | G protein-coupled receptor |
| TEM | Transmission electron microscopy |
| PDL | Poly-D-lysine |
| FDA | Federal drug administration |
| EMT | Epithelial-to-mesenchymal transition |
| QPCR | Quantitative polymerase chain reaction |
| WT | Wild-type |
| CREB | cAMP response element binding protein |
| BRET | Bioluminescence resonance energy transfer |
| TCGA | The cancer genome atlas |
| FSK | Forskolin |
| ACi | Adenylyl cyclase inhibitor |
| DEG | Differentially expressed gene |

| HPI | Hours post-injection |
|-----|---------------------|
| MCAM | Melanoma cell adhesion molecule |

**Declarations:**

**Ethics approval and consent to participate:**

All animal experiments were performed with the approval of the Institutional Animal Care and Use Committee (IACUC) protocol #2011-0100 from Weill Cornell Medicine with animal care under the supervision of the Research Animal Resource Center. Approval date: September 19, 2023.

**Consent for publication:**

Not applicable

**Availability of data and materials:**

The datasets used and/or analyzed during the current study are available from the corresponding author upon reasonable request. Proteomics and phoshphopeptide-enriched data were submitted to the MassIVE Proteomics Repository. Data are available via MassIVE (MSV000065698, MSV000095699) or ProteomeXchange (PXD055208, PXD055209) for global and phosphopeptide-enriched data, respectively.

**Competing interests:**

The authors declare that they have no competing interests

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**Author's Contributions:**

SZH conceptualized, designed, and wrote the manuscript with KAB. SZH performed the majority of the experiments in this study, except for those specified hereafter. CCA has developed CRISPR-Cas9 tools for GPR52 expression. IT performed the cancer cell injections in zebrafish. SYJ and TF performed RNA-seq analyses for the TCGA datasets. BB and OE performed RNA-seq analysis for MDA-MB-468 WT vs. GPR52 KO cells. MW performed proteomic analyses. DD and THE conducted the BRET studies. SL assisted with the tissue culture. PB optimized and provided the protocols for MCF10A culture. TE-supervised zebrafish studies. PKA, RT, and SP conducted calcium fluo-4 experiments.

LD provided the CRISPR plasmids, tools, and study advice. JB provided intellectual

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**Materials and Methods:**

**Cell culture**

Human breast cell lines MDA-MB-468 (RRID:CVCL_0419), MDA-MB-231

(RRID:CVCL_0062), MCF7 (RRID:CVCL_0031), HS578T (CVCL_0332), T47D

(CVCL_0553), and MCF10A (RRID:CVCL_0598) were purchased from the American

Type Culture Collection (ATCC). MDA-MB-468, MDA-MB-231, MCF7, and HS578T cells

were cultured in Dulbecco's Modified Eagle's medium (DMEM, Gibco #11995-065)

supplemented with 10% fetal bovine serum (FBS) (Gibco 26140079, Sigma-Aldrich

F0926) and 1% penicillin-streptomycin ( complete medium). T47D cells were cultured in

Roswell Park Memorial Institute medium (RPMI 1640, Thermo Fisher Scientific #11875)

supplemented with 10% fetal bovine serum (FBS) (Gibco 26140079) and 1% penicillin-

streptomycin ( complete medium). MCF10A cells were cultured in Dulbecco's Modified

Eagle's Medium/F12 (Gibco, #11330-032) supplemented with 5% FBS, 1% penicillin-

streptomycin, and the following growth factors: epidermal growth factor (20 ng/ml),

hydrocortisone (0.5 mg/ml), cholera toxin (100 ng/ml), and insulin (10 µg/ml) (i.e.,

complete media). All cell lines were maintained at 37°C in a humidified atmosphere

containing 5% $CO_2$. All cell lines were authenticated by STR analysis and tested regularly

for mycoplasma contamination using the Universal Mycoplasma Detection Kit (ATCC 30-

1012K) and MycoAlert Mycoplasma Detection Kit (Lonza LT07-318).

**Breast cancer survival curves**

The KM plotter RNA-seq breast cancer web tool (www.kmplot.com) (12) was used to

obtain Kaplan-Meier survival curves. The associated hazard ratios, 95% confidence

intervals, and log-rank P-values were automatically determined using the web tool. Low

versus high cut-off values were determined based on the maximum segregation between

the groups.

**GPR52 and MCAM expression comparison in cancerous and non-cancerous**

**human tissue**

GPR52 mRNA expression in cancerous and non-cancerous tissues was analyzed across

solid cancer types using RNA-seq datasets from the TNMplot database and a web tool

(https://www.tnmplot.com) (11). The following datasets were analyzed for this analysis:

adrenocortical carcinoma ("adrenal"), bladder urothelial carcinoma ("bladder"), breast

invasive carcinoma ("breast"), colon adenocarcinoma ("colon"), esophageal carcinoma

("esophageal"), kidney renal clear cell carcinoma ("renal_cc"), kidney renal papillary cell

carcinoma ("renal_pa"), liver hepatocellular carcinoma ("liver"), lung adenocarcinoma

("lung_ac"), lung squamous cell carcinoma ("lung_sc"), ovarian serous

cystadenocarcinoma ("ovary"), pancreatic adenocarcinoma ("pancrease"), prostate

adenocarcinoma ("prostate"), rectum adenocarcinoma ("rectum"), skin cutaneous

melanoma ("skin"), stomach adenocarcinoma ("stomach"), testicular germ cell

adenocarcinoma ("testis"), thyroid carcinoma ("thyroid"), uterus corpus endometrial

carcinoma ("uterus_ec"). GPR52 expression between normal, tumor, and metastatic

breast-derived samples was compared based on a gene chip dataset available through

the TNM plot. Source data for GPR52 expression were collected in January 2024, and

the correlation between GPR52 and MCAM expression in breast tumors was determined

in June 2024.

**RT-qPCR**

Each breast cancer cell line was cultured in an individual well of a 6-well tissue culture-

treated plate until 50-80% confluent. Total RNA was extracted using an RNeasy Mini Kit

(Qiagen # 74106), and RNA purity was assessed using a Nanodrop 2000 instrument

(Thermo Fisher Scientific). RNA was reverse-transcribed using the qScript cDNA

Synthesis kit (VWR # 101414-100) based to the manufacturer's protocol. Quantitative

polymerase chain reaction (PCR) was performed in triplicate from the RNA collected from

each well using Fast SYBR Green Master Mix  (Thermo Fisher Scientific #4385612 )

following the standard protocol. GPR52 and RPL32 transcripts were quantified using the

following primers.

GPR52 F: 5'- CGGGTCTTGGACAATCCAACTC -3',

GPR52 R: 5' - TGCTTCCTGATCCTTCACACAC - 3',

RPL32 F: 5' – CAGGGTTCGTAGAAGATTCA -3',

RPL32 R: 5' – CTTGGAGGAAACATTGTGAGCGATC -3'.

GPR52 expression in each human breast cell line was normalized to the housekeeping

gene RPL32, and then normalized to the average expression of GPR52 across the human

breast cell lines analyzed.

**Generation of stable cell lines**

Transduction-based CRISPR-Cas9 gene editing was used to generate indels in *GPR52*

in MDA-MB-468, MDA-MB-231, and MCF10A cells. For lentivirus production, HEK293

cells were plated in a six-well plate and transfected with a prepared mix in 150uL DMEM

(with no supplements) containing 2.5 µg of pLenti-Cas9-P2A-Puro (a gift from Lukas Dow;

RRID:Addgene_110837), 1.25 µg of PAX2, 1.25 µg of VSV-G, and 30 µl of

polyethylenimine (1 mg/ml). The medium was replaced the following day and changed 36

h post-transfection to the target cell collection medium. MDA-MB-468, MDA-MB-231, and

MCF10A cells were plated in individual wells of a six-well plate and transduced with the

pLenti-Cas9-P2A-Puro lentivirus generated above in serum- and antibiotic-free media

containing 8 mg/mL polybrene for 24 h, and then selected with 1-2.5 mg/mL puromycin

in complete media (45).

The forward and reverse sgRNA cloning primers were as follows:

        sgRNA1-F: CACCGCAAAACCATGGCGTAGCGA

sgRNA1-R: AAACTCGCTACGCCATGGTTTTGC

sgRNA2-F: CACCGTGAATGGTGTGCCACGTCT

sgRNA2-R: AAACAGACGTGGCACACCATTCAC

The primers were annealed and cloned following standard procedures using the

BsmBI/EcoRI site of the pLenti-U6-sgRNA-tdTomato-P2A-BlasR (LRT2B) lentiviral vector

(a gift from Lukas Dow; RRID:Addgene_110854) (45). MDA-MB-468, MDA-MB-231, and

MCF10A cells stably expressing the pLenti-Cas9-P2A-Puro lentiviral vector were

transduced with GPR52 sgRNA lentiviral vectors in serum- and antibiotic-free media

containing 8 mg/mL polybrene for 24 h and subjected to blasticidin selection followed by

limiting dilution assays to isolate single cells from the sgRNA-transduced populations.

The cells were then expanded to generate clonal populations, and a subset of these cells

was collected by centrifugation for DNA extraction and Sanger sequencing of the GPR52

sgRNA target region. Briefly, DNA was extracted from the cell pellet using the QiaAMP

DNA Mini Kit (Qiagen #56304) according to the manufacturer's protocol. The GPR52

guide target regions were then amplified by PCR using the following primers and purified

using the QIAquick PCR Purification Kit (Qiagen #28104).

680            GPR52-1 F: 5'- AAACCTGGTTACCATGGTGAC -3',

681            GPR52-2 F: 5' - GATCTGGATCTACTCCTGCC - 3',

682            GPR52-1,-2 R: 5'- ATTATATAGGGGAGCCACAGC-3',

The amplified PCR products were subjected to Sanger sequencing (Genewiz, Azenta) to

identify clones with indels in GPR52 sgRNA target regions (Supplementary Fig. S1). The

clonal populations generated from each sgRNA were expanded and used in downstream

studies. A heterogeneous population of gSafe cells was used as the vector control

population.

**Transmission electron microscopy**

MDA-MB-468 cells were cultured in suspension in non-tissue culture-treated plates for

24-48 hours and then briefly centrifuged in 1.7mL tubes. The resulting pellet was washed

and fixed with 4% paraformaldehyde, 2.5% glutaraldehyde, and 0.02% picric acid in 0.1 M

sodium cacodylate buffer (pH 7.3). The samples were stained with uranyl acetate and

dehydrated using a graded ethanol series. After dehydration, the samples were covered

with a layer of fresh resin, and embedded molds were inserted into the resin. After

polymerization, the samples were cut at 200 nm for screening by light microscopy and

then at 65 nm to be mounted on grids for TEM under a JEOL JSM 1400 (JEOL, USA)

electron microscope. The camera used was a Veleta $2 K \times 2 K$ CCD (EMSIS, GmbH,

Muenster). Images were taken at 2500-20,000× magnification, and each field included

the extracellular space, cytoplasmic area, and nucleus. Cell-cell interface length was

determined using 2500x images by drawing a straight line that extended the distance of

the cell-cell interface only between cells that exhibited extensive adhesion between their

plasma membrane surfaces. The cell diameter was determined using 2500x images by

drawing a straight line that spanned the midpoint of the aforementioned analyzed cells.

The free intercellular space was determined using Fiji software. The image threshold

intensity was set to distinguish the cells from the (white) background. The boundary

between the two cells was then outlined, and the fraction of the area occupied by free

space (met the threshold intensity) was determined.

**3D Matrigel cell culture and analysis**

MDA-MB-468 cells were resuspended in 1:1 growth-factor-reduced Matrigel:serum-free

DMEM and plated at a density of 10,000 cells/100 µL per well in a black optical-bottom

96-well plate (Corning Matrigel #356231). Complete medium (100 µL) was added to each

well after solidification of the Matrigel, and the medium was replaced every 2-3 days. After

10 days of culture, the cells were fixed with 10% formalin and stained with Hoechst 33342

(Santa Cruz Biotechnology # SC-495790). Cells were imaged using a confocal

microscope (Zeiss LSM880) to detect cytoplasmic tdTomato and nuclear Hoechst signals.

Images were then imported to Imaris Microscopy Image Analysis Software (OXFORD

instruments). The Imaris "Surface" function was used to determine the area per spheroid,

total area occupied per well, and roundness of each spheroid based on the absolute

intensity of the tdTomato signal. For MDA-MB-468 cells, the following formula for

circularity was used to determine the roundness of each spheroid.

$$Circularity = \frac{4\pi \times Area}{Perimeter^2}$$

**Matrigel invasion assays**

MDA-MB-468 and MDA-MB-231 cells were plated at >80% confluence in optical grade

96-well plates. A 50 µL solution of 1:1 growth-factor-reduced Matrigel:serum-free DMEM

± 1:40 DQ-Collagen IV (Thermo Fisher Scientific) was added above the monolayer and

allowed to form a gel. Fifty microliters of DMEM containing 10% FBS was added above

the gel once it solidified. After 24 h, confocal microscopy (Zeiss LSM880) was used to

obtain a z-stack of tdTomato and DQ signals in each well at 10 µm intervals starting from

the base of the well. The Imaris "Surface" function was used to determine the surface

area of tdTomato foci above the minimum fluorescence intensity threshold at the

established z-planes. For collective invasion analyses and class B determination at

z=10um, the threshold intensity was auto-determined by Imaris per image. Surfaces were

identified based on the local contrast of the tdTomato signal with the non-fluorescent

background. The Imaris "Surface" function was used to quantify the area of DQ at z=10

μm based on a maintained absolute value threshold across samples and colocalize the

volume of DQ with the volume of tdTomato. that was adjusted to maximize detection

across samples based on the local contrast at z=10 μm.

**Poly-D-lysine coating**

PDL (Santa Cruz Biotechnology #SC-136156) was resuspended in Milli-Q water at

1mg/mL and frozen in aliquots at -20°C. To develop coating solutions, PDL was

resuspended in Milli-Q water to a final concentration of 100 μg/mL and added to tissue

culture-treated plates to cover the surface. plates were then incubated for at least 30 min

at room temperature or several hours at 4°C. The plates were washed twice with PBS

and used for cell culture experiments.

**Western blotting and analysis**

Cells were cultured in monolayers under standard tissue culture conditions as described

above. At the time of collection, cells were scraped on ice with ice-cold PBS and

centrifuged at 1500-2000 rpm, and the resulting cell pellet was snap-frozen in liquid

nitrogen. On the day of western blotting, the cell pellet was lysed in ice-cold buffer (5 mM

HEPES, 137 mmol/L NaCl, 1 mmol/L $MgCl_2$, 1 mmol/L $CaCl_2$, 10 mmol/L NaF, 2 mmol/L

EDTA, 10 mmol/L sodium pyrophosphate, 2 mmol/L $NaVO_4$, 1% NP-40, 10% glycerol)

containing protease inhibitors (Thermo Fisher Scientific #78429), incubated on a rotating

shaker at 4°C for 15 min, and centrifuged for 20 min at 4°C at 20,000 rpm. Cell extracts

were denatured in buffer containing β-mercaptoethanol, run on NuPAGE 4–12% Bis-Tris

protein gels (Thermo Fisher Scientific), and then transferred to nitrocellulose membranes.

Membranes were blocked with 5% nonfat dry milk (Bio-Rad, #1706404) for one hour at

room temperature (RT), washed with 1X Tris-Buffered Saline, 0.1% Tween (TBST), and

incubated with primary antibodies at 4°C for at least 16 h. The following primary

antibodies were used: E-cadherin (RRID:AB_2291471), Snai1 (RRID:AB_2255011),

vimentin      (RRID:AB_10695459),      p-CREB      (RRID:AB_2561044),      CREB

(RRID:AB_310268) and MCAM (RRID:AB_2143373). The membranes were then

washed with TBST and incubated with secondary antibodies for 1-2 hours at room

temperature. The secondary antibodies used were anti-rabbit IgG HRP-linked antibody

(RRID:AB_2099233) and anti-mouse IgG HRP-linked antibody (RRID:AB_330924).

Western Lightning Plus ECL (Thermo Fisher Scientific #509049325) and ImageLab

software (Bio-Rad) were used for band detection. Membranes were stripped with Restore

PLUS Western blot stripping buffer (Thermo Fisher Scientific, #46430) for 15 min and then

probed for β-actin expression as a loading control using an HRP-linked β-actin antibody

(RRID:AB_262011).

**Zebrafish maintenance**

All animal experiments were performed under an approved IACUC protocol (2011-0100)

from Weill Cornell Medicine, with animal care under the supervision of the Research

Animal Resource Center. The TG(flk1:EGFP-NLS) zebrafish strain was generated by the

Markus Affolter Laboratory (Biozentrum, University of Basel, Switzerland)

(Developmental Biology 316:312-322, 2008) and kindly provided by Jesus Torres-

Vazquez (New York University, New York, NY). Embryos were obtained by natural

matings and raised at 28.5 °C with a 14-h light–10-h dark cycle. Zebrafish were

maintained in E3 water (5 mM NaCl, 0.17 mM KCl, 0.33 mM CaCl$_2$, 0.33 mM MgSO$_4$, 1

ppm methylene blue).

**Zebrafish xenograft studies**

tdTomato-tagged MDA-MB-468 cells were passed through a 40 μm filter and

resuspended in PBS at a density of 400 cells/5nL. Two dpf zebrafish embryos were each

injected with 5nL of cancer cells in the perivitelline space or the duct of Cuvier, whichever

was best accessible based on the orientation of the fish. Injected embryos were evaluated

at two hpi and only zebrafish with detectable tdTomato distal to the injection site were

maintained at 32 °C. Zebrafish were anesthetized with 0.02% tricaine and imaged at five

hpi and 30 hpi using a Nikon SMZ1500 microscope mounted with a Nikon DS-FI3 camera.

Cancer surface area per zebrafish was quantified using Imaris "Surface" function; two

rectangles were drawn per zebrafish to encompass the area distal to the injection site

excluding the yolk sac (i.e., trunk) and superior to the otolith (i.e., head), and the total

surface area of tdTomato determined in each rectangle was combined to calculate the

total cancer area. The number of detected tdTomato surfaces was used to determine the

number of cancer foci. Zebrafish were fixed with 4% paraformaldehyde at the study

endpoint. For confocal imaging, fixed zebrafish were washed with PBS and then

incubated for at least 12 h at 4°C in PBS containing Hoechst 33342. The zebrafish were

then mounted in 1% low-melt agarose and imaged using a confocal microscope (Zeiss

LSM880).

For drug treatment studies, zebrafish with detectable tdTomato distal to the yolk sac were

selected at two hpi, placed into individual wells of 24-well plates, and imaged at 5 hpi.

The zebrafish were then maintained in E3 water containing either 8 µM doxorubicin or a

vehicle (Milli-Q water). All zebrafish were imaged at 30 hpi and analyzed as described

above.

**RNA-sequencing studies and computational analyses**

MDA-MB-468 WT (parental) and GPR52 sgRNA1 KO cells (one mixed population and

two clonal populations) were cultured in 6-well plates. Total RNA was extracted using the

QIAzol lysis reagent (Qiagen #79306) and RNeasy Mini Kit (Qiagen #74106). Samples

were subjected to RNA sequencing at the Genomics Resources Core Facility (GRCF,

Weill Cornell Medicine). Total RNA integrity was assessed with a 2100 Bioanalyzer

(Agilent Technologies, Santa Clara, CA). RNA concentration was measured using a

NanoDrop system (Thermo Fisher Scientific, Inc., Waltham, MA, USA). RNA sample

library and RNA sequencing were performed by the Genomics Core Laboratory at Weill

Cornell Medicine with the Illumina TruSeq Stranded mRNA Sample Library Preparation

kit (Illumina, San Diego, CA), according to the manufacturer's instructions. The

normalized cDNA libraries were pooled and sequenced on an Illumina NovaSeq 6000

sequencer with 50 paired-end cycles. The raw sequencing reads in BCL format were

processed using bcl2fastq 2.19 (Illumina) for FASTQ conversion and demultiplexing.

All reads were independently aligned with STAR_2.4.0f1 for sequence alignment against

the human genome sequence build hg19 downloaded using the UCSC genome browser

and SAMTOOLS v0.1.19 for sorting and indexing reads. Cufflinks (2.0.2) was used to

estimate the expression values (FPKMS) and GENCODE v19 GTF files for annotation.

Gene counts from the htseq-count and DESeq2 Bioconductor packages were used to

identify DEGs. All DEGs with P-value <0.05 and false discovery rate <0.05 were uploaded

to Ingenuity Pathway Analysis software (Qiagen) for further analysis.

**Proteomic studies and computational analyses**

Parental, vector control, and GPR52-1 and -2 KO MDA-MB-468, MDA-MB-231, and

MCF10A cells were cultured in 10-cm tissue-culture-treated plates until 60-80% confluent.

Cells were then scraped on ice with ice-cold PBS and centrifuged, and the resulting cell

pellet was snap-frozen in liquid nitrogen. Cells were lysed by resuspension in

radioimmunoprecipitation assay (RIPA) buffer supplemented with protease and

phosphatase inhibitors. Soluble proteins were reduced by the addition of TCEP (0.5 M)

to a final concentration of 5mM followed by incubation at 55 $^{\circ}$C for 30 min. The reduced

samples were alkylated by the addition of 375 mM iodoacetamide to a final concentration

of 10 mM, followed by incubation in the dark at room temperature for 30 min. Ice-cold

acetone was added to each sample at a volume ratio of 5:1. The samples were vortexed

and stored at -20 $^{\circ}$C overnight. After precipitation, the samples were centrifuged at 14,000

× *g* and 4 °C for 30 min to pellet the proteins. The supernatant was removed, and

the  pellet was air-dried on a benchtop for 10 min. Proteins were resuspended in 50 mM

TEAB (pH 8) containing 2 mM $CaCl_2$. Trypsin was added (500 ng), and the proteins were

allowed to digest overnight at 37 °C with shaking at 500 RPM (Thermomixer, Eppendorf).

Digestion was quenched by adding 10% formic acid to a final concentration of 1%.

Digested samples were centrifuged at 10,000 × *g* for 10 min to remove particulates, and

the supernatant was transferred to a fresh tube and stored at -20 °C until phosphopeptide

enrichment.

The samples were enriched for phosphorylated peptides using SMOAC. Briefly, digested

samples were first enriched using the High Select™ Phosphopeptide Enrichment Kit

(Thermo Fisher Scientific) following the manufacturer's protocol. The flow-through was

applied to the High Select™ Fe-NTA Phosphopeptide Enrichment Kit (Thermo Fisher

Scientific), following the manufacturer's protocol. After the second enrichment, the flow-

through became the global, unenriched sample, and the elutes from both kits were pooled

to generate the phosphopeptide-enriched fraction. The peptide concentration was

measured at 205 nm using a NanoDrop spectrophotometer (Thermo Scientific).

Samples were injected using the Vanquish Neo (Thermo Fisher Scientific) nano-UPLC

onto a C18 trap column (0.3 mm x 5 mm, 5 µm C18) using pressure loading. Peptides

were eluted onto a separation column (PepMap™ Neo, 75 µm × 150 mm, 2 µm C18

particle size, Thermo Fisher Scientific) prior to elution directly onto the mass

spectrometer.   Briefly, peptides were loaded and washed for 5 min at a flow rate of 0.350

µL/min in 2% B (mobile phase A: 0.1% formic acid in water; mobile phase B: 80% ACN,

0.1% formic acid in water). Peptides were eluted over 100 minutes from 2-25% mobile

phase B before ramping to 40% B for 20 min.  The column was washed for 15 min at

100% B before reequilibration at 2% B for the next injection.   The nano-LCs were directly

interfaced with an Orbitrap Ascend Tribrid mass spectrometer (Thermo Fisher Scientific)

using a silica emitter (20 µm i.d., 10 cm) equipped with a high-field asymmetric ion mobility

spectrometry (FAIMS) source. Data were collected by data-dependent acquisition with

the intact peptide detected in the Orbitrap at 120,000 resolving power from to 375-

1500 *m/z*. Peptides with charge +2-7 were selected for fragmentation by higher-energy

collision dissociation (HCD) at 28% NCE and were detected in the ion trap using a rapid

scan rate (global) or Orbitrap at a resolving power of 30,000 (enriched). Dynamic

exclusion was set to 60s after one instance. The mass list is shared among the FAIMS

compensation voltages. FAIMS voltages were set at -45 (1.4 s), -60 (1 s), -75 (0.6 s) CV

for a total duty cycle time of 3s.   Source ionization was set at 1700 V with an ion transfer

tube temperature of 305 $^{o}$C. Raw files were searched against the human protein database

downloaded from UniProt on 05-05-2023 using SEQUEST in Proteome Discoverer 3.0.

The abundances, abundance ratios, and P-values were exported to Microsoft Excel for

further analysis. All proteins with differential GPR52 KO vs. WT abundance ratios (P-

value <0.05, false discovery rate <0.05) were uploaded to the Ingenuity Pathway Analysis

software (Qiagen) for further analysis of each of the three cell lines. KEA3 software was

used to rank the kinase activity of the combined vector control and GPR52 KO populations

across the three cell lines based on their respective phosphoproteomes (20).

**Analysis of TCGA-BRCA transcriptomic dataset**

The Cancer Genome Atlas (TCGA)-BRCA database was used to obtain primary breast tumor gene expression data from 142 patients with breast cancer. The downloaded data displayed the gene ENSEMBL ID and FPKM-UQ normalized expression counts. Four patients were found to have mutations in the *Gpr52* gene and were not included in the downstream analyses. The data for the remaining 138 patients were segregated based on "zero" and "non-zero" expression of GPR52 and then subsequently read into edgeR, a software package available from BiocManager for differential expression analysis of RNA-sequencing data (46). Briefly, dispersion was estimated to measure the inter-library variability. The data were then fitted to a generalized linear regression model. Statistical significance testing (likelihood ratio test) between the cohorts was performed using the fitted model to compare differential gene expression between "zero" and "non-zero data," creating the dataset "Non-zero/Zero". All DEGs with P-value <0.05 and false discovery rate <0.05 were uploaded to Ingenuity Pathway Analysis software (Qiagen) for further analysis.

**BRET biosensor studies**

HEK 293 and MDA-MB-468 cells were maintained in DMEM with 10% FBS, respectively, and cultured at 37°C and 5% $CO_2$. For transfection, cells were plated at a density of $2.5 \times 10^5$ cells (HEK293) and $8 \times 10^5$ cells (MDA-MB-468) per well in 6-well plates (Thermo Scientific, 140,675). On the day of transfection, the medium was replaced with DMEM containing 2.5% FBS (HEK 293) and Opti-MEM (MDA-MB-468) (Thermo Fisher Scientific #31985062) without antibiotics. HEK293 cells were transfected using

Lipofectamine 2000 (Thermo Fisher Scientific, #11668027). The GFP10-Epac-RlucII in

pcDNA3.1 (generously provided by Dr. Michel Bouvier, Université de Montréal) and

GPR52 cDNA ORF Clone GPR52 (Sino Biological # HG25891-UT) in pcDNA3.1, with

added N-terminal flag tag, were used in these studies.

For HEK293 cells, per well: 1.5 µg of plasmid DNA (total) was added to 100 µl DMEM (no

serum, no antibiotics) in a 1.5 mL Eppendorf tube.  In another tube, 3 µl of Lipofectamine

2000 was added to 100 µl of DMEM (no serum or antibiotics).

For MDA-MB-468 cells, per well: 2.5 µg of plasmid DNA (total) was added to 100 µl Opti-

MEM (no serum, no antibiotics) in a 1.5 mL Eppendorf tube.  In another tube, 5 µl of

Lipofectamine 2000 or 3000 was added to 100 µl of Opti-MEM (no serum or antibiotics).

After 5 min, the contents of the tubes were combined and gently mixed or vortexed for

each cell line. The mixture was incubated for 20-30 minutes at room temperature. The

200 µL DNA:Lipofectamine mixture was then added dropwise per well, and the plate was

swirled gently and incubated at 37 °C and 5% $CO_2$ for 4-5 hours. The medium was then

replaced with a complete medium.

Cells were detached the day following transfection with 0.25% trypsin–EDTA (Wisent)

and plated at a density of $3 \times 10^4$ cells/well in a poly-l-ornithine (Sigma-Aldrich)-coated

96-well white bottom plate (Thermo Scientific, 236,105) for BRET analysis. After 24 h of

incubation in the 96-well plate, the media was removed and cells were washed once with

Krebs buffer (146 mM NaCl, 42 mM MgCl2, 10 mM HEPES pH 7.4, 1 g/L D-glucose)  and

incubated for 2 h at room temperature in Krebs buffer. Coelenterazine 400A (Cedarlane)

was added, to a final concentration of 2.5 µM, to each well, followed by incubation for

5 min prior to the basal reading. FTBMT was added to the indicated final concentration

and the plate was read after 15 or 30 min of stimulation. MDA-MB-468 cells were co-

stimulated with 1 mM forskolin.

The BRET ratios were calculated as the emission at 515 nm and 410 nm. For all

experiments, $\Delta$BRET = (BRET ratio from cells stimulated with FTBMT and forskolin) –

(BRET ratio from vehicle treated with forskolin). Three technical replicates were used for

all the treatments. The BRET experiments were performed using a Tristar2 plate reader

(Berthold. Technologies GmbH and Co. KG). The normalized BRET ratio was

computed as $BRET_{Stimuated}/BRET_{Vehicle}$. Dose-response curves were plotted using non-

linear regression. Data are presented as the mean ± standard error (SE). For MDA-MB-

468 cells, the experiment was conducted five times, and the aggregate data from all

experiments are presented. For HEK 293 cells, the experiment was conducted twice, and

the combined data from the two experiments are presented.

**Intracellular calcium measurements**

MDA-MB-468 cells were seeded at a density of 5000 cells/well in a 96-well plate. After 24

h, the cell-permeable calcium indicator Fluo-4 (Thermo Fisher Scientific, #F14201) was

added to each well. cells were incubated for 45 min at 37 °C, then for 15 min at room

temperature. Baseline fluorescence measurements were obtained (t=0), and FTBMT was

added to select the wells. The plate was read at 30 second intervals for 10 min.

Thapsigargin (Sigma-Aldrich) was added to cells as a positive control, and the plate was

then read at 30 second intervals for an additional 10 min (47).

**Drug preparation**

Forskolin (Santa Cruz Biotechnology #SC-3562) and SQ22536 (Santa Cruz

Biotechnology #SC-201572) were resuspended in ethanol (1 mM) and DMSO (14 mM),

and frozen. SQ22536 was aliquoted to avoid freeze-thaw cycles. Ethanol and DMSO

were used as vehicle controls in all experiments that incorporated these compounds.

**Statistical analysis**

All data were expressed as individual data points with a line at the median value or as the

mean ± SEM, unless indicated otherwise. The groups were compared using statistical

tests for significance, as described in the figure legends. Statistical significance was set

at $P <0.05$. Statistical tests were performed using the GraphPad Prism software.

The data generated in this study are available upon request from the corresponding

author.

**References:**

1.     Hagemeister FB, Jr., Buzdar AU, Luna MA, Blumenschein GR. Causes of death in
breast cancer: a clinicopathologic study. Cancer. 1980;46(1):162-7.

2.      Schuster E, Taftaf R, Reduzzi C, Albert MK, Romero-Calvo I, Liu H. Better
together: circulating tumor cell clustering in metastatic cancer. Trends Cancer.
2021;7(11):1020-32.

3.      Bakir B, Chiarella AM, Pitarresi JR, Rustgi AK. EMT, MET, Plasticity, and Tumor
Metastasis. Trends Cell Biol. 2020;30(10):764-76.

4.      Venter JC, Adams MD, Myers EW, Li PW, Mural RJ, Sutton GG, et al. The
sequence of the human genome. Science. 2001;291(5507):1304-51.

5.      Hanson MA, Stevens RC. Discovery of new GPCR biology: one receptor structure
at a time. Structure. 2009;17(1):8-14.

6.      Hamm HE, Gilchrist A. Heterotrimeric G proteins. Curr Opin Cell Biol.
1996;8(2):189-96.

7.      Chaudhary PK, Kim S. An Insight into GPCR and G-Proteins as Cancer Drivers.
Cells. 2021;10(12).

8.      Komatsu H, Maruyama M, Yao S, Shinohara T, Sakuma K, Imaichi S, et al.
Anatomical transcriptome of G protein-coupled receptors leads to the identification of a
novel therapeutic candidate GPR52 for psychiatric disorders. PLoS One.
2014;9(2):e90134.

9.      Nishiyama K, Suzuki H, Harasawa T, Suzuki N, Kurimoto E, Kawai T, et al. FTBMT,
a Novel and Selective GPR52 Agonist, Demonstrates Antipsychotic-Like and
Procognitive Effects in Rodents, Revealing a Potential Therapeutic Agent for
Schizophrenia. J Pharmacol Exp Ther. 2017;363(2):253-64.

10.     Yao Y, Cui X, Al-Ramahi I, Sun X, Li B, Hou J, et al. A striatal-enriched intronic
GPCR modulates huntingtin levels and toxicity. Elife. 2015;4.

11.     Bartha A, Gyorffy B. TNMplot.com: A Web Tool for the Comparison of Gene
Expression in Normal, Tumor and Metastatic Tissues. Int J Mol Sci. 2021;22(5).

12.     Gyorffy B. Survival analysis across the entire transcriptome identifies biomarkers
with the highest prognostic power in breast cancer. Comput Struct Biotechnol J.
2021;19:4101-9.

13.     Au CC, Furness JB, Britt K, Oshchepkova S, Ladumor H, Soo KY, et al. Three-
dimensional growth of breast cancer cells potentiates the anti-tumor effects of unacylated
ghrelin and AZP-531. Elife. 2020;9.

14.     Sriram K, Insel PA. G Protein-Coupled Receptors as Targets for Approved Drugs:
How Many Targets and How Many Drugs? Mol Pharmacol. 2018;93(4):251-8.

15.     Hughes CS, Postovit LM, Lajoie GA. Matrigel: a complex protein mixture required
for optimal growth of cell culture. Proteomics. 2010;10(9):1886-90.

16.     Guan JL, Trevithick JE, Hynes RO. Fibronectin/integrin interaction induces
tyrosine phosphorylation of a 120-kDa protein. Cell Regul. 1991;2(11):951-64.

17.     Kornberg L, Earp HS, Parsons JT, Schaller M, Juliano RL. Cell adhesion or integrin
clustering increases phosphorylation of a focal adhesion-associated tyrosine kinase. J
Biol Chem. 1992;267(33):23439-42.

18.     Jedeszko C, Sameni M, Olive MB, Moin K, Sloane BF. Visualizing protease activity
in living cells: from two dimensions to four dimensions. Curr Protoc Cell Biol.
2008;Chapter 4:Unit 4 20.

19.     Gonzalez GA, Montminy MR. Cyclic AMP stimulates somatostatin gene
transcription by phosphorylation of CREB at serine 133. Cell. 1989;59(4):675-80.

20.    Kuleshov MV, Xie Z, London ABK, Yang J, Evangelista JE, Lachmann A, et al.
KEA3: improved kinase enrichment analysis via data integration. Nucleic Acids Res.
2021;49(W1):W304-W16.
21.    Kang TH, Park DY, Kim W, Kim KT. VRK1 phosphorylates CREB and mediates
CCND1 expression. J Cell Sci. 2008;121(Pt 18):3035-41.
22.    Martin RD, Sun Y, Bourque K, Audet N, Inoue A, Tanny JC, et al. Receptor- and
cellular compartment-specific activation of the cAMP/PKA pathway by alpha(1)-
adrenergic and ETA endothelin receptors. Cell Signal. 2018;44:43-50.
23.    An Y, Wei N, Cheng X, Li Y, Liu H, Wang J, et al. MCAM abnormal expression and
clinical outcome associations are highly cancer dependent as revealed through pan-
cancer analysis. Brief Bioinform. 2020;21(2):709-18.
24.    Wang J, Tang X, Weng W, Qiao Y, Lin J, Liu W, et al. The membrane protein
melanoma cell adhesion molecule (MCAM) is a novel tumor marker that stimulates
tumorigenesis in hepatocellular carcinoma. Oncogene. 2015;34(47):5781-95.
25.    Zhang X, Wang Z, Kang Y, Li X, Ma X, Ma L. MCAM expression is associated with
poor prognosis in non-small cell lung cancer. Clin Transl Oncol. 2014;16(2):178-83.
26.    Teng Y, Xie X, Walker S, White DT, Mumm JS, Cowell JK. Evaluating human
cancer cell metastasis in zebrafish. BMC Cancer. 2013;13:453.
27.    Ren J, Liu S, Cui C, Ten Dijke P. Invasive Behavior of Human Breast Cancer Cells
in Embryonic Zebrafish. J Vis Exp. 2017(122).
28.    Blum Y, Belting HG, Ellertsdottir E, Herwig L, Luders F, Affolter M. Complex cell
rearrangements during intersegmental vessel sprouting and vessel fusion in the zebrafish
embryo. Dev Biol. 2008;316(2):312-22.
29.    Campenni M, May AN, Boddy A, Harris V, Nedelcu AM. Agent-based modelling
reveals strategies to reduce the fitness and metastatic potential of circulating tumour cell
clusters. Evol Appl. 2020;13(7):1635-50.
30.    Tacar O, Sriamornsak P, Dass CR. Doxorubicin: an update on anticancer
molecular action, toxicity and novel drug delivery systems. J Pharm Pharmacol.
2013;65(2):157-70.
31.    Chemotherapy for Breast Cancer [Internet]. American Cancer Society. 2021.
Available from: https://www.cancer.org/cancer/types/breast-
cancer/treatment/chemotherapy-for-breast-cancer.html. Accessed July 2024.
32.    Gopal U, Monroe JD, Marudamuthu AS, Begum S, Walters BJ, Stewart RA, et al.
Development of a Triple-Negative Breast Cancer Leptomeningeal Disease Model in
Zebrafish. Cells. 2023;12(7).
33.    Qu Y, Han B, Yu Y, Yao W, Bose S, Karlan BY, et al. Evaluation of MCF10A as a
Reliable Model for Normal Human Mammary Epithelial Cells. PLoS One.
2015;10(7):e0131285.
34.    Vilchez Mercedes SA, Bocci F, Levine H, Onuchic JN, Jolly MK, Wong PK.
Decoding leader cells in collective cancer invasion. Nat Rev Cancer. 2021;21(9):592-604.
35.    Kumar S, Kapoor A, Desai S, Inamdar MM, Sen S. Proteolytic and non-proteolytic
regulation of collective cell invasion: tuning by ECM density and organization. Sci Rep.
2016;6:19905.
36.    Han W, Chen S, Yuan W, Fan Q, Tian J, Wang X, et al. Oriented collagen fibers
direct tumor cell intravasation. Proc Natl Acad Sci U S A. 2016;113(40):11208-13.

37.    Papadaki MA, Mala A, Merodoulaki AC, Vassilakopoulou M, Mavroudis D, Agelaki
S. Investigating the Role of CTCs with Stem/EMT-like Features in Metastatic Breast
Cancer Patients Treated with Eribulin Mesylate. Cancers (Basel). 2022;14(16).
38.    Fleming A, Diekmann H, Goldsmith P. Functional characterisation of the
maturation of the blood-brain barrier in larval zebrafish. PLoS One. 2013;8(10):e77548.
39.    Rousselle C, Clair P, Lefauconnier JM, Kaczorek M, Scherrmann JM, Temsamani
J. New advances in the transport of doxorubicin through the blood-brain barrier by a
peptide vector-mediated strategy. Mol Pharmacol. 2000;57(4):679-86.
40.    Insel PA, Murray F, Yokoyama U, Romano S, Yun H, Brown L, et al. cAMP and
Epac in the regulation of tissue fibrosis. Br J Pharmacol. 2012;166(2):447-56.
41.    Wang P, Felsing DE, Chen H, Stutz SJ, Murphy RE, Cunningham KA, et al.
Discovery of Potent and Brain-Penetrant GPR52 Agonist that Suppresses
Psychostimulant Behavior. J Med Chem. 2020;63(22):13951-72.
42.    Masuho I, Kise R, Gainza P, Von Moo E, Li X, Tany R, et al. Rules and
mechanisms governing G protein coupling selectivity of GPCRs. Cell Rep.
2023;42(10):113173.
43.    Wu Z, Wu Z, Li J, Yang X, Wang Y, Yu Y, et al. MCAM is a novel metastasis marker
and regulates spreading, apoptosis and invasion of ovarian cancer cells. Tumour Biol.
2012;33(5):1619-28.
44.    Chen J, Dang Y, Feng W, Qiao C, Liu D, Zhang T, et al. SOX18 promotes gastric
cancer metastasis through transactivating MCAM and CCL7. Oncogene.
2020;39(33):5536-52.
45.    Zafra MP, Schatoff EM, Katti A, Foronda M, Breinig M, Schweitzer AY, et al.
Optimized base editors enable efficient editing in cells, organoids and mice. Nat
Biotechnol. 2018;36(9):888-93.
46.    Huber W, Carey VJ, Gentleman R, Anders S, Carlson M, Carvalho BS, et al.
Orchestrating high-throughput genomic analysis with Bioconductor. Nat Methods.
2015;12(2):115-21.
47.    Wrennall JA, Ahmad S, Worthington EN, Wu T, Goriounova AS, Voeller AS, et al.
A SPLUNC1 Peptidomimetic Inhibits Orai1 and Reduces Inflammation in a Murine
Allergic Asthma Model. Am J Respir Cell Mol Biol. 2022;66(3):271-82.
1105