Title page

PTEN neddylation aggravates CDK4/6 inhibitor resistance in breast cancer

Fan Liu [1,2]†, Weixiao Liu [1,2]†, Yawen Tan [3]†, Yaxin Shang [1], Sihui Ling [1], Xiaokun Jiang [4], Zhen Zhang [4], Shiyao Sun [3], Ping Xie [1,2]*

1 Department of Cell Biology, Beijing Key Laboratory of Cancer Invasion and Metastasis Research, Capital Medical University, Beijing 100069, China.

2 Beijing lnstitute of Hepatology, Beijing Youan Hospital, Capital Medical University, Beijing 100069, China.

3 Department of Breast and Thyroid Surgery, The Second People's Hospital of Shenzhen, Shenzhen, Guangdong 518035, China.

4 Department of Neurosurgery, Shandong Provincial Hospital affiliated to Shandong First Medical University, Jinan, Shandong 250021, China.

*Correspondence: Ping Xie (xiep@ccmu.edu.cn).

† These authors contributed equally to this work: Fan Liu, Weixiao Liu, Yawen Tan.

PTEN neddylation aggravates CDK4/6 inhibitor resistance in breast cancer

Fan Liu [1,2]†, Weixiao Liu [1,2]†, Yawen Tan [3]†, Yaxin Shang [1], Sihui Ling [1], Xiaokun Jiang [4], Zhen Zhang [4], Shiyao Sun [3], Ping Xie [1,2]*

1 Department of Cell Biology, Beijing Key Laboratory of Cancer Invasion and Metastasis Research, Capital Medical University, Beijing 100069, China.

2 Beijing lnstitute of Hepatology, Beijing Youan Hospital, Capital Medical University, Beijing 100069, China.

3 Department of Breast and Thyroid Surgery, The Second People's Hospital of Shenzhen, Shenzhen, Guangdong 518035, China.

4 Department of Neurosurgery, Shandong Provincial Hospital affiliated to Shandong First Medical University, Jinan, Shandong 250021, China.

*Correspondence: Ping Xie (xiep@ccmu.edu.cn).

† These authors contributed equally to this work: Fan Liu, Weixiao Liu, Yawen Tan.

Abstract

Background: The gradual emergence of a novel therapeutic approach lies in the restoration of tumor suppressive machinery. PTEN is a crucial negative regulator of the PI3K/Akt signaling pathway. Protein neddylation modification contributes to PTEN inactivation and fuels breast cancer progression.

Methods: In this study, well-established CDK4/6 inhibitor resistance models were used to detect the levels of PTEN neddylation. Co-immunoprecipitation, *in vivo* and *in vitro* modification assays and transcriptome data were integrated to delve into the mechanism. Following this, a PTEN neddylation inhibitor identified through virtual screening was shown to overcome resistance to

CDK4/6 inhibitors in both *in situ* tumor models and breast cancer cells. Furthermore, in patient-

derived organoids (PDOs), we combined the PTEN neddylation inhibitor with CDK4/6 inhibitors

to confirm their inhibitory effect on breast cancer progression.

Results: We highlight that an elevated level of PTEN neddylation is markedly associated with

resistance to palbociclib, a CDK4/6 inhibitor used in luminal subtype breast cancer patients.

Mechanistically, PTEN neddylation activates the PI3K/Akt signaling pathway, and more notably,

upregulates the activity of the AP-1 transcription factor. Our data showed that PTEN neddylation

stabilizes JUND, a transcription factor involved in the AP-1, by disrupting its interaction with the

E3 ubiquitin ligase ITCH. Consequently, activated JUND leads to the release of cytokines and

chemokines, such as G-CSF, GM-CSF, IL-1RA, IL-1β, which in turn may drive an inflammatory

tumor microenvironment, potentially contributing to drug resistance. Then, we identified

Echinacoside as a potent inhibitor of PTEN neddylation both *in vivo* and *in vitro* by disrupting its

interaction with XIAP, the E3 ligase responsible for PTEN neddylation. Combination of

Echinacoside could effectively overcome resistance to palbociclib in breast cancer treatment.

Conclusions: This novel insight underscores the potential of targeting PTEN neddylation as a

promising strategy for restoring the activity of key tumor suppressor and overcoming resistance in

breast cancer therapy.

Keywords: breast cancer, CDK4/6 inhibitor resistance, JUND, neddylation, PTEN

Background

Breast cancer is a heterogeneous disease with multiple intrinsic tumor subtypes. The luminal breast

cancer subtype, characterized by the expression of hormone receptor-positive (HR+) and human

epidermal growth factor receptor 2-negative (HER2-) accounts for 70 % of breast cancer patients

[1, 2]. Cyclin D-dependent Kinases 4 and 6 inhibitors (CDK4/6i) have been approved by the FDA

for the treatment of luminal breast cancer [3-5]. Although patients with advanced disease have

benefited from CDK4/6 inhibitors, drug resistance still remains a significant clinical challenge [6-

8]. Many factors contribute to CDK4/6i resistance, including CDK4/6 and Cyclin D1

overexpression, p16 amplification, loss of p53, loss of retinoblastoma (Rb) and over-activation of

CDK2. Notably, resistance to CDK4/6 inhibitors is also prominently characterized by over-

activated PI3K/Akt signaling pathway [9-13]. However, although PI3K inhibitors could prevent

resistance to CDK4/6 inhibitors, they failed to re-sensitize cells once resistance had been acquired

[14, 15]. PTEN (phosphatase and tension homologue deleted from chromosome 10) is a well-

known negative regulator of the PI3K signaling pathway and governs fundamental cellular

processes [16-19]. Recently, PTEN loss is considered as a bona fide mechanism of resistance to

CDK4/6 inhibitors. Loss of PTEN increases PI3K/Akt activity and increases activity of CDK4/6

[20-22]. Therefore, targeting the restoration of PTEN tumor suppressor activity is believed to be a

more effective approach in tumor treatment [23, 24].

Nedd8, a ubiquitin-like protein covalently conjugated to substrates similar to ubiquitin, mediates

protein post-translational modification called neddylation [25]. Neddylation involves the covalent

attachment of Nedd8 to a substrate through an ATP-dependent cascade involving the Nedd8-

activating enzyme (E1, UBA3/APPBP1), Nedd8-conjugating enzyme (E2, UBE2M and UBE2F),

and Nedd8 ligases (E3). The substrates of neddylation include both cullin proteins and non-cullin

proteins [26, 27]. Over-active neddylation modification has been indicated to be closely correlated

with cancer development. The first-in-class neddylation E1 inhibitor, MLN4924 (pevonedistat), has

entered in several phases of clinical trials for tumor therapy [28]. Additionally, several inhibitors

targeting E2s have shown well anti-tumor activity in mice models [29]. Up to now, none of them

is granted by FDA for the treatment of cancer. It's still necessary to discover more potent and

selective neddylation inhibitors for clinical trials. Our previous study found that high levels of

PTEN neddylation, which lead to PTEN inactivation, enhance the activity of the PI3K/Akt pathway,

promote PTEN nuclear import, and accelerate breast tumor proliferation and invasion [30, 31]. Here,

we found that PTEN neddylation is elevated in luminal-type breast cancer patients with resistance

to palbociclib by promoting JUND protein stability and AP-1 transcriptional activation.

Furthermore, we proposed that Echinacoside (ECH), a natural phenylethanoid glycoside in

Echinacea angustifolia DC, acts as a potent PTEN neddylation inhibitor. Combined treatment of

ECH therapeutically blunted palbociclib resistance and enhanced drug sensitivity. Therefore, we

provide an innovative therapeutic strategy to limit cancer drug resistance through PTEN

reactivation by blocking neddylation modification.

Methods

Patients and mice

The clinical samples were approved by the department of breast and thyroid surgery at the Second

People's Hospital of Shenzhen and Hunan Cancer Hospital. Informed consent was obtained from

all subjects or their relatives. The MMTV-*PyMT* mice (*PyMT*/WT mice, background C57BL/6J

(RRID: IMSR_JAX: 000664)) were purchased from Cyagen Biosciences. CD-1(ICR, RRID:

IMSR_CRL: 022) mice were purchased from Beijing Vital River Laboratory Animal Technology

Co., Ltd. Animals were assigned to experimental groups using simple randomization.

Cell culture and reagents

All mammalian cells were cultured following ATCC recommended protocols and in medium

supplemented with 10 % fetal bovine serum (FBS, VivaCell BIOSCIENCES C04001-500) and 1 %

penicillin-streptomycin (Gene-Protien Link P08X14). MCF-7 (RRID: CVCL_0031), HEK293T

(RRID: CVCL_0063), HCT116 (RRID: CVCL_0291), A549 (RRID: CVCL_0023), MDA-MB-

231 (RRID: CVCL_0062), MCF-7 sh*PTEN*, MCF-7 sh*PTEN*+PTEN-Nedd8, MCF-7

sh*PTEN*+NLS-PTEN, MCF-7 sh*PTEN*+PTEN-WT and MCF-7 sh*PTEN*+PTEN-2KR cells were

cultured in Dulbecco's modified Eagle's medium (DMEM) with high glucose (Thermo Fisher

Scientific). T-47D (RRID: CVCL_0553) and T98G (RRID: CVCL_0556) cells were cultured in

RPMI-1640 medium (Thermo Fisher Scientific). MCF-7 sublines resistant to doxorubicin (MCF-

7/ADR) were purchased from Sunncell Biosciences and were cultured in RPMI-1640 medium

supplemented with 500 ng/ml doxorubicin hydrochloride. MCF-7 sublines resistant to cisplatin

(MCF-7/DDP) were purchased from Shanghai Mei Xuan Biological Technology Co., Ltd and were cultured in RPMI-1640 medium supplemented with 500 ng/ml cisplatin. MCF-7 sublines resistant to paclitaxel (MCF-7/PTX) were purchased from BLUEFBIO (Shanghai, China) and were cultured in Dulbecco's modified Eagle's medium (DMEM) with high glucose supplemented with 200 ng/ml paclitaxel. All cell lines were authenticated by STR profiling.

Palbociclib (HY-50767), Pevonedistat (HY-70062), Echinacoside (HY-N0020), Maltotetraose (HY-N2464), MG132 (HY-13259), Cisplatin (HY-17394), Paclitaxel (HY-B0015), Doxorubicin hydrochloride (HY-15142), Z21911837, Z45457765 and Z1549417413 were purchased from *Med Chem Express*.

Establishment of palbociclib-resistant cells

To generate the palbociclib-resistant cells, the cells were cultured in media supplemented with increasing concentrations of palbociclib for over 6 months. The concentration of palbociclib were began at 100 nmol/L and were maintained at a final dose of 6 μmol/L. The palbociclib-resistant cells were named as MCF-7-PR cells (MCF-7 palbociclib-resistant cells). For all experiments, the resistant cells were refreshed with palbociclib-free media for 48 h before treatment.

Antibodies

The following antibodies were used: Phospho-Rb (Ser807/811) (Cat# 8516, RRID: AB_11178658), Rb (Cat# 9309, RRID: AB_823629), Cyclin D1 (Cat# 2922, RRID: AB_2228523), PTEN (Cat# 9188, RRID: AB_2253290), Ubiquitin (Cat# 20326, RRID: AB_3064918), Akt (Cat# 9272, RRID: AB_329827), Phospho-Akt (Ser473) (Cat# 9271, RRID: AB_329825), Phospho-Akt (Thr308) (Cat# 13038, RRID: AB_2629447), Phospho-JUND (Ser100) (Cat# 9164, RRID: AB_330892), CUL1 (Cat# 4995, RRID: AB_2261133), XIAP (Cat# 2042, RRID: AB_2214870), Nedd8 (Cat# 2754, RRID: AB_659972), c-JUN (Cat# 9165, RRID: AB_2130165), JUNB (Cat# 3753, RRID: AB_2130002), c-FOS (Cat# 2250, RRID: AB_2247211) and FOSB (Cat# 2251, RRID: AB_2106903) antibodies were purchased from Cell Signaling Technology. Ly6G (Cat# sc-53515,

RRID: AB_783639), CD3 (Cat# sc-18843, RRID: AB_627010), CD4 (Cat# sc-53042, RRID:

AB_629062), CD8 (Cat# sc-53063, RRID: AB_629231), CD11b (Cat# sc-1186, RRID:

AB_626884), NEDP1 (Cat# sc-271498, RRID: AB_10649498) and Cyclin E (Cat# sc-377100,

RRID: AB_2923122) antibodies were purchased from Santa Cruz Biotechnology. F4/80 (Cat#

28463-1-AP, RRID: AB_2881149), GAPDH (Cat# 60004-1-Ig, RRID: AB_2107436), UBA3 (Cat#

68067-1-Ig, RRID: AB_2918808), Ubc12 (Cat# CL488-67482, RRID: AB_3084351), ITCH

(Cat#20920-1-AP, RRID: AB_2878765) and GST (Cat# HRP-66001, RRID: AB_2883833)

antibodies were purchased from Proteintech. Flag (Cat# M185-3L, RRID: AB_11123930), Myc

(Cat# M047-3, RRID: AB_591112) and HA (Cat# M132-3, RRID: AB_10207271) antibodies were

purchased from MBL. JUND (Cat# A5433, RRID: AB_2863501) and FOSL1 (Cat# A5372, RRID:

AB_2766182) antibodies were purchased from ABclonal. Goat anti-Rabbit IgG (H + L) Secondary

Antibody (Cat# 65-6120, RRID: AB_2533967) and Goat anti-Mouse IgG (H + L) Secondary

Antibody (Cat# 31430, RRID: AB_228307) were purchased from Thermo Fisher Scientific. PTEN-

Nedd8 (K402) antibody was purchased from PTM BioLab (Hang Zhou) Co., Inc.

Palbociclib-resistant Mice

The palbociclib-sensitive MMTV-*PyMT* mice were obtained by continuing palbociclib (75 mg/kg)

gavage for 20 days. Palbociclib-resistant MMTV-*PyMT* mice were obtained by continuing

palbociclib (75 mg/kg) gavage for 35 days.

RNA-seq Analysis

Total RNA was extracted with TRIzol (Cat# 15596; Invitrogen) and the quality matched the

requirement of database sequencing. After that, RNA was digested for reverse transcription, and

rRNA was degraded. A complementary DNA library was prepared, and sequencing was performed

according to the Illumina standard protocol by Novogene Technology Co., Ltd. (Beijing, China).

Reads were normalized and fragments per kilobase per million mapped reads (FPKMs) were

calculated through RSEM. MA-plot-based method was used to filter differentially expressed genes

(DEGs), and genes with log2 ratio $\geqslant$ 2 and *Q*-value $\leqslant$ 0.001 were considered significantly

regulated. Gene ontology enrichment and Kyoto Encyclopedia of Genes and Genomes pathway

analysis of DEGs were performed using Phyper function in R software. FDR correction was

performed on *P*-value, and *Q*-value $\leqslant$ 0.05 considered as significant enrichment.

Immunoprecipitation and immunoblotting

For immunoprecipitation assays, cells were lysed in EBC lysis buffer (0.5 % NP-40, 50 mM Tris,

pH 7.6, 120 mM NaCl, 1 mM EDTA, 1 mM Na_3VO_4, 50 mM NaF and 1 mM β-mercaptoethanol)

supplemented with protease inhibitor cocktail (Roche, 11836170001). Immunoprecipitations were

performed using the indicated primary antibody and Dynabeads™ protein G beads (10004D) at

4 °C. The immunoprecipitants were washed at least three times in EBC lysis buffer before being

resolved by SDS-PAGE and immunoblotted with indicated antibodies.

***In vivo* modification assays**

Cells were solubilized in modified lysis buffer (50 mM Tris, pH 7.4, 150 mM NaCl, 10 % glycerol,

1 mM EDTA, 1 mM EGTA, 1 % SDS, 1 mM Na_3VO_4, 1 mM DTT and 10 mM NaF) supplemented

with a protease inhibitor cocktail. The cell lysate was incubated at 60 °C for 10 min. The lysate was

then diluted 10 times with modified lysis buffer without SDS and incubated with the indicated

antibody for 3 h at 4 °C before adding Dynabeads™ protein G beads (10004D). Then the lysate

was rotated gently for 8 h at 4 °C. The immunoprecipitants were washed at least three times in wash

buffer (50 mM Tris, pH 7.4, 150 mM NaCl, 10 % glycerol, 1 mM EDTA, 1 mM EGTA, 0.1 % SDS,

1 mM DTT and 10 mM NaF). Proteins were analyzed by western blotting with indicated antibodies.

***In vitro* modification assays**

In vitro neddylation was performed using recombinant purified enzymes. GST-PTEN and GST-

Ubc12 were expressed in Escherichia coli BL21 (DE3). 0.5 μg of GST-PTEN and 0.5 μg of GST-

Ubc12 were incubated with 2 μg of Nedd8, 10 ng of E1 (APPBP1/UBA3) and 0.5 μg of E3 (His-

XIAP) in a total reaction volume of 30 μL Nedd8 conjugation Rxn Buffer Kit (Boston Biochem,

SK-20). Nedd8 (UL-812), Nedd8 E1 (APPBP1/UBA3) (E-313), His-XIAP were purchased from

Boston Biochem. Samples were incubated at 30 °C for 1 h, and reactions were terminated with 2 ×

SDS-PAGE loading buffer (20 mM Tris-HCl, pH 6.8, 100 mM DTT, 2 % SDS, 20 % glycerol and

0.016 % Bromophenol blue) before western blotting. If needed, the neddylation reaction sample

was first purified with GST-tag Purification Resin.

Gene reporter assays

203   MCF-7 cells at 60 %-70 % confluence were transfected using Lipofectamine 3000 (Invitrogen)

204   according to manufacturer's protocol. After 48 hours, cells were lysed in 100 μL of a passive lysis

205   buffer (Promega). Luciferase activity was measured with the Dual Luciferase Assay System

206   (Promega) according to the manufacturer's protocol.

GST pull down

The PTEN or PTEN C2 domain sequence was inserted into the pGEX-4T-3 vector (Amersham). To

detect the direct binding, bacteria-expressed GST-tagged proteins were immobilized on

BeyoGold™ GST-tag Purification Resin (P2250) and then incubated with Myc-tagged proteins for

8 h at 4 °C under rotation. Beads were washed with GST-binding buffer (100 mM NaCl, 50 mM

NaF, 2 mM EDTA, 1 % NP-40 and protease inhibitor mixture) three times and proteins were eluted,

followed by immunoblotting.

Real-time Quantitative RT-PCR

MCF-7 cells were harvested and total RNA was extracted using the TRIzol reagent (Invitrogen)

according to the manufacturer's instructions. Reverse transcription of 3 μg total RNA was

performed by combining 1 μL ReverTraAce-α-™ (Toyobo. No. FSK-100), 4 μL 5 × buffer, 1 μL

10 pmol/μL oligo (dT) primer, 2 μL 10 mM dNTP mix, 1 μL 10 U/μL RNase inhibitor, and water

up to a volume of 20 μL. Reaction mixtures were incubated at 30 °C for 10 min, then 42 °C for 20

min, 99 °C for 5 min, 4 °C for 5 min and then diluted with 30 μL of water. Each PCR mixture

contained 0.5 μL of cDNA template and primers at a concentration of 100 nM in a final volume of

25 µL of SYBR green reaction mix (Toyobo. No. QPK-201). Standard curves were calculated using

cDNA to determine the linear range and PCR efficiency of each primer pair. Reactions were done

in triplicate, and relative amounts of cDNA were normalized to GAPDH. The primers used were

listed in Additional file 1: Table S3.

Molecular docking and virtual screening

The molecular docking of PTEN (PDB ID5R) and XIAP (PDB 1C9Q) was performed using the

reliable online docking server ZDOCK (http://zdock.umassmed.edu/). The interaction between

PTEN and XIAP was visualized using PYMOL version 1.7.0.3. All ten docking complexes were

used for our analysis. The cryo-EM structure of human PTEN (PDB ID5R) was used to perform

structure-based virtual screening via a workflow application of Glide in Maestro (Schrödinger

Maestro 11.4). The Protein-Protein Interaction Library and the MCE Bioactive Compound Library

Plus were selected as screening databases. The LigPrep module of Maestro was used to generate

the three-dimensional (3D) conformations of the compounds. At the very beginning, the compounds

were screened using the high-throughput virtual screening module and the top-ranked 20 %

candidates were selected on the basis of the Glide G-score. Then these candidates were redocked

using the standard precision and extra precision mode in turn. Finally, 200 compounds with shape

rationality and structural diversity were picked for assay.

Surface Plasmon Resonance binding assays (SPR)

Surface plasmon resonance experiments were performed on a BIACORE 3000 biosensor system

(GE Healthcare) according to the manufacturer's instructions at 25 °C. PTEN protein was

immobilized onto a CM5 chip (GE Healthcare), which was activated using a 1:1 mixture of 1-ethyl-

3-(3-dimethyllaminopropyl) carbodiimide (EDC) and N-hydroxysuccinimide (NHS) at a flow rate

of 10 µL/min. ECH was diluted in PBS, and then injected over the PTEN surface at a rate of 30

µL/min flow rate. The duration of protein binding time was set to 180 s, after which the running

buffer was injected at the same rate for 300 s. The binding kinetics were processed and calculated

by BIAevaluation software.

Microscale thermophoresis assays (MST)

249 Microscale thermophoresis assays detected interactions between PTEN and ECH. The
250 concentration of PTEN protein was held constantly at 150 nM, whereas the concentrations of ECH
251 were gradient-diluted (0.0153 μM-500 μM). After brief incubation, the samples were loaded into
252 MST-standard glass capillaries. The measurements were performed on MST machine (NanoTemper
253 Technologies, Munich, Germany).

Thermal shift assay (TSA)

255 TychoTM NT.6 checked the protein of GST-PTEN quality. Use 10 μL of sample to find out the
256 quality of GST-PTEN protein in 3 minutes and automatically generates thermal unfolding profiles,
257 identifies inflection temperatures (Ti).

Cellular thermal shift assay (CETSA)

HEK293T cells (1×10^7) which transfected Myc-PTEN were resuspended in PBS containing 1 %
protease inhibitors. The cells were then lysed by liquid nitrogen through three cycles of freezing
and thawing. The resulting cell lysates were centrifuged at 12,000 g for 15 min at 4 °C to collect
the supernatants. Subsequently, the samples were divided into 7 equal parts and heated at
temperatures of 45 °C, 48 °C, 51 °C, 58 °C, 65 °C, 69 °C, and 72 °C for 3 min each. After heating,
the samples were centrifuged at 12, 000 g for 15 min at 4 °C, and the resulting supernatants were
collected and boiled with loading buffer. The levels of the target proteins were determined using
western blotting.

Cell proliferation assay

268 Cells were plated on 96-well plates (2000 cells per well). After adding Cell Counting Kit-8 (Dojindo,
269 CK04) to the wells for 1 h, cell numbers were measured at 450 nm. Each cell line was set up in 3
270 replicate wells, and the experiment was repeated three times.

Cell migration assay

Cell migration assay was performed using Cell culture inserts for 24-well plates with 8.0 μm pores

filters, and the filter was pre-coated with 20 μg/ml Fibronectin. A cell suspension in serum-free

culture medium (5×10^4 cells per well) was added to the inserts, and each insert was placed in the

lower chamber containing 10 % FBS culture medium. After 24 h, cells were fixed using 4 %

paraformaldehyde for 20 min and stained using 0.1 % crystal violet for 15 min. Cells in upper

chamber were carefully removed, and cells migrated through the filter were assessed by

photography.

Colony formation assay

280   Cells were seeded into 6-well tissue culture plate with 2000 cells per well. Plates were incubated at

281   37 °C and 5 % CO_2 and colonies were scored 14 days after preparation. Each cell line was set up

282   in 3 replicate wells, and the experiment was repeated three times.

Fluorescence microscopy

284   After fixation with 4 % paraformaldehyde and permeabilization in 0.2 % Triton X-100 (PBS), cells

285   were incubated with the indicated antibodies for 12 h at 4 °C, followed by incubation with goat anti

286   rabbit IgG H&L Alexa Fluor 488 or 568 antibody for 1 h at 37 °C. The nuclei were stained with

287   DAPI, and images were visualized with a Leica confocal microscopy.

Tumor organoid culture

The breast cancer tissues were minced and digested with 5 mL of TrypLE (Gibco 12605-010)

digestion solution at 37 °C for 1 hour. The digestion was stopped by adding 5 mL of culture medium,

followed by centrifugation at 300 g for 5 minutes. The cell pellet was washed with 10 mL of PBS

and then filtered through a 70 μm cell strainer. The filtered suspension was centrifuged again at 300

g for 5 minutes. Pre-chilled pipette tips were used to resuspend the bottom cells in 50 μL of pre-

chilled organoid complete medium and keep them on ice. Then, 250 μL of Matrigel was added to

the cell suspension. A pre-warmed 96-well plate was removed, and 30 μL of each drop of the cell

suspension was aspirated into the well of the plate using a pre-chilled pipette tip. The plate was

quickly inverted and placed in a 37 °C, 5 % CO_2 incubator to allow the matrix gel to solidify for 15

minutes. After solidification, an appropriate volume of organoid complete medium was added to

each well.

CUT&Tag sequencing

CUT&Tag assay was performed using NovoNGS CUT&Tag 3.0 High-Sensitivity Kit (for Illumina,

Novoprotein scientific Inc., Cat#N259-YH01-01A). Briefly, 1×10^5 cells were harvested freshly.

Then 37 % formaldehyde was gently added to cells and these samples were incubated at room

temperature for 2 min. Cross-linking was stopped by addition of 1.25 M glycine and then the

samples were washed with the wash buffer. The cells were enriched by ConA Beads and

resuspended by 50 µL primary antibody buffer of anti-JUND antibody, and incubated overnight at

4 °C. Then discarded the primary antibody buffer and added 100 µL anti-rabbit IgG antibody buffer

for 1 h at a dilution of 1 : 100. Then the beads were washed for 3 times using antibody buffer and

then incubated with protein A/G-Tn5 transposome for 1 h and washed for 3 times by ChiTaq buffer.

Cells were resuspended in 50 µL Tagmentation buffer and incubated at 37 °C for 1 h. The

incubation was stopped by adding 10 µL 10 % SDS at 55 °C for 10 min. The DNA fragments

were extracted by Tagment DNA extract beads and amplified using 5 × AmpliMix. Then the DNA

was re-extracted by DNA clean beads for sequencing.

Chromatin immunoprecipitation (ChIP) and qChIP

ChIP assays were performed using the EZ-Magna ChIP A/G Chro matin Immunoprecipitation Kit

(17-10086, Merck Millipore) according to the manufacturer's recommendations. In brief, the

harvested MCF-7 cells were cross-linked with 1 % formaldehyde at 37 °C for 20 min, lysed, and

sonicated to generate ~200 to 1000 bp DNA fragments. Antibodies against JUND and rabbit IgG

were used for immunoprecipitation, and the precipitated DNA fragments were subjected to qPCR

amplification. The primers used were listed in Additional file 1: Table S3.

Flow Cytometry Analysis and FACS Sorting

For detection of apoptosis, cells were co-stained with Annexin-V-phycoerythrin and amino

actinomycin D (7-AAD) according to the manufacturer's instructions. Stained cells were sorted

with fluorescence-activated cell sorting (FACS). The isolated cell suspension was washed with PBS,

then stained with specific mAbs at indicated concentration in PBS solution containing 1 % FBS.

Antibody staining was performed at 4 °C for 30 min and the stained cells were analyzed on an

LSRFortessa cell analyzer (BD Biosciences). FACS sorting routinely yielded cell purity levels of

over 90 %. Data were analyzed using FlowJo software (RRID: SCR_008520).

H&E staining

Haematoxylin-eosin (H&E) staining was performed to examine breast cancer tissue morphology

according to standard protocols. In brief, the tissue samples were dehydrated with different

concentrations of ethanol and xylol followed by brief washing and staining of cell nuclei with 5 %

haematoxylin solution for 10 min. After rinsing in distilled water for 5 min, the stained samples

were incubated in 0.1 % HCl-ethanol for 30 s. The samples were then counterstained with eosin

solution for 2 min.

Cohort and immunohistochemistry

The breast tissue microarrays were purchased from Shanghai Biochip Company (HBreD090Bc03)

and Shanghai Zhuoli Biotech Company (ZL-Brcsur1801). ZL-Brcsur1801 was immunostained

with PTEN and Nedd8-PTEN (K402) antibodies (Fig. 1a-c). Detailed pathological information was

in Additional file 2: Table S1. HBreD090Bc03 was immunostained with Nedd8-PTEN (K402) and

JUND antibodies (Additional file 1: Fig. S2c-f), which are available in Additional file 3: Table S2.

In brief, tissues were fixed with 4 % PFA and embedded in paraffin. The samples were then attached

to slides, washed and incubated with 3 % H_2O_2 for 10 min. Afterwards, these sections were blocked

and then incubated with a primary antibody at 4 °C overnight. After washing with PBS, the sections

were incubated with secondary antibody for 1 h at room temperature. Finally, the sections were

washed and incubated with DAB substrate for visualization. After washing and dehydration, the

sections were sealed with coverslips. All staining was assessed by a quantitative imaging method; the percentage of immunostaining and the staining intensity were recorded. An H-score was calculated using the following formula: H-score = Σ (PI × I) = (percentage of cells of weak intensity × 1) + (percentage of cells of moderate intensity × 2) + (percentage of cells of strong intensity × 3). PI indicates the percentage of positive cells versus all cells.

Multiplex immunohistochemical

Pheno 7-plex IHC kit (Pheno, PVB2002) was used according to manufacturer's protocol. Slides were deparaffinised in xylene and rehydrated with ethanol and double distilled water. Antigen was retrieved by citrate buffer and heated to boil in microwave for approximately 20 min, sections were then blocked with bovine serum albumin at room temperature for 10 min. Primary antibodies were incubated at 37 °C for 30 min, secondary antibody conjugated with horseradish peroxidase was incubated at room temperature for 10 min. Tyramide signal amplification was performed with 1 : 100 in antibody dilution buffer diluted fluorophores and incubated at room temperature for 10 min. Nuclei were stained with DAPI after primary antibodies were stained.

ELISA assay

The quantitation of IL-1β, IL-17A and G-CSF levels in MCF-7 cells were performed using ELISA assay kit (Solarbio, SEKM-0002, SEKH-0026, and SEKH-0058) according to the manufacturer's instructions.

Immunoassay arrays

Cytokine concentrations of supernatants of indicated cells were measured using the CBA (Cytometric Bead Array, RayBiotech FAH-STRM-1) following the manufacturer' s instruction. Read samples on a flow cytometer and analyze using FCAP Array software (BD Biosciences).

Statistical analysis

All data were representative of no fewer than three independent experiments. All data were presented as means ± S.D. Data were analyzed using SPSS 19.0 (IBM Corp., Armonk, NY, USA,

RRID: SCR_002865) and GraphPad Prism 8 (GraphPad Software, Inc., La Jolla, CA, RRID:

SCR_002798). The differences between groups were assessed by Student's *t*-test or one-way

ANOVA test. The correlations were analyzed using the pearson correlation test. A value of $P < 0.05$

was considered to be statistically significant.

Results

Resistance to CDK4/6 inhibitor upregulates PTEN neddylation in breast cancer

We previously found that elevated PTEN neddylation in breast cancer correlates with poor clinical

outcomes [30], and we confirmed those results here (Fig. 1a, b). We observed that PTEN

neddylation was upregulated in all breast cancer subtypes, particularly in luminal-type cancers,

while PTEN was downregulated in all subtypes without distinction (Fig. 1c). Detailed pathological

information was showed in Additional file 2: Table S1. Palbociclib, one kind of CDK4/6 inhibitor,

has been widely used for the treatment of advanced breast cancer patients. Using the antibody that

specifically recognized PTEN neddylation, our results showed that PTEN neddylation was

markedly upregulated in palbociclib-resistant breast cancer patients with recurrence *in situ* and liver

metastasis, while PTEN remained lowly expressed in drug-resistant patients (Fig. 1d). Pathological

data of the patients were provied (Additional file 1: Fig. S1a). Next, we monitored MMTV-*PyMT*

(C57BL/6J background) transgenic mice, which spontaneously develop luminal breast tumors, as

a model for late-stage luminal breast cancer [32-34]. Through daily palbociclib treatment, by day

20, tumor volumes and sizes in treated mice showed no difference from those in the control group,

indicating the onset of drug resistance (Fig. 1e-h). Rb is a tumor suppressor that is phosphorylated

during the transition from G1 to S phase of the cell cycle by CDK4/6. When CDK4/6 inhibitors are

ineffective, phosphorylation of the Rb protein would become uncontrolled [35]. Therefore, the

increased phosphorylation of the Rb protein in the mice also indicated the occurrence of drug

resistance (Fig. 1i, j). More importantly, high levels of PTEN neddylation were detected in

palbociclib-resistant breast tumor tissues of MMTV-*PyMT* mice, while the expression of PTEN

remained unchanged (Fig. 1i, j). Additionally, we found that the IC50 of breast tumor cells isolated

from palbociclib-resistant MMTV-*PyMT* mice was significantly higher compared to the

palbociclib-sensitive group (Fig. 1k), indicating the development of drug resistance. Taken together,

our data revealed that PTEN neddylation exhibited elevated levels in palbociclib-resistant breast

cancer.

Increased XIAP leads to enhanced PTEN neddylation in palbociclib-resistant breast cancer

To explore the underlying mechanisms of elevated PTEN neddylation in palbociclib-resistant breast

cancer, we generated acquired palbociclib-resistant breast cancer stable cell lines (MCF-7-PR).

Dose-response curves results showed that palbociclib-resistant cells were more resistant to

palbociclib than the parental cells (Fig. 2a). Compared with the parental cells, the palbociclib-

resistant cells exhibited accelerated G1/S phase and cell proliferation ability after treatment of

palbociclib (Fig. 2b, c). Consistently, PTEN neddylation was upregulated in acquired palbociclib-

resistant breast cancer cells (Fig. 2d). Moreover, the ubiquitination of PTEN was unchanged in

palbociclib-resistant cells (Additional file 1: Fig. S1b). Compared to other drug-resistant breast

cancer cell lines, such as MCF-7 sublines resistant to doxorubicin (MCF-7/ADR), cisplatin (MCF-

7/DDP), and paclitaxel (MCF-7/PTX), PTEN neddylation was specifically increased in palbociclib-

resistant breast cancer cells (Fig. 2e). Short-term drug treatment could induce adaptive resistance

in cells [13]. We noticed that the phosphorylation of Rb, initially reduced by palbociclib treatment,

recovered after prolonged drug exposure, which indicated adaptive resistance was occurred (Fig.

2f). Under the adaptive resistance, PTEN neddylation was increased and could be reduced by

MLN4924, which was the inhibitor of neddylation E1 (Fig. 2f, g left pannels). For ER negative

cells, such as glioma cells T98G, show reduced palbociclib sensitivity [36]. As expected, no

obvious changes in PTEN neddylation or p-Rb were detected when the T98G cells were treated

with palbociclib (Fig. 2g right panels).

421 Then, we intended to explore the mechanism of high PTEN neddylation in palbociclib-resistant

422 breast cancer. Notably, our data revealed that XIAP, the E3 ligase for PTEN neddylation [30], was

423 upregulated in palbociclib-resistant breast cancer cells, while no significant changes were observed

424 in Nedd8 E1-UBA3, Nedd8 E2-Ubc12, and Nedd8 (Fig. 2h). The increased XIAP enhanced the

425 interaction with PTEN in both early adaptative palbociclib-resistant and acquired palbociclib-

426 resistant breast cancer cells (Fig. 2i-k). The above data suggested that high PTEN neddylation in

427 palbociclib-resistant breast cancer cells was likely due to XIAP upregulation and increased XIAP-

428 PTEN interaction.

429 **PTEN neddylation enhances the protein stability of JUND**

430 In previous studies, we have demonstrated that Nedd8 is covalently attached to lysine residues at

431 positions 197 and 402 of PTEN [30]. To examine the role of PTEN neddylation on CDK4/6i

432 resistance, we performed RNA-seq in palbociclib-resistant breast cancer cells (Fig. 3a) and PTEN

433 neddylation deficient cells (2KR, K197 and K402 sites mutated to R) (Fig. 3b). Other than the

434 PI3K/Akt signaling pathway, which has been believed to be highly associated with CDK4/6i

435 resistance and PTEN neddylation, we noticed that MAPK, as well as JAK/STAT signaling

436 pathways were also enriched (Fig. 3a, b). GSEA analysis further indicated that MAPK signaling

437 pathway obviously was also enriched in both palbociclib-resistant breast cancer cells (Fig. 3c) and

438 PTEN neddylation deficient cells (Fig. 3d). Similar data were shown in the related dataset

439 (GSE222367) (Additional file 1: Fig. S2a). AP-1 (Activator Protein-1) transcription factors are

440 heterodimers or homodimers composed of JUN and FOS proteins. AP-1 is known to be activated

441 by MAPK signaling pathways through the phosphorylation of JUN and FOS proteins, and in turn,

442 AP-1 also regulates the expression of genes involved in MAPK signaling pathways [37]. The

443 reporter gene assays revealed that AP-1 transcription factor activity was significantly increased

444 after palbociclib resistance developed (Fig. 3e). Further heat map data showed that palbociclib

445 resistance led to the upregulation of AP-1 related transcription factors, including *FOSB*, *FOSL*, *c-*

FOS, *c-JUN*, *JUND*, and *JUNB* (Fig. 3f and Additional file 1: Fig. S2b). Conversely, PTEN

neddylation deficiency decreased the expression of those genes (Fig. 3g). Then, we detected the

protein levels of the AP-1 transcriptional factors and noticed that there was a markable increase of

JUND in palbociclib-resistant cells (Fig. 3h). Meanwhile, the activated form of JUND,

phosphorylated JUND, was also upregulated when cells were resistant to palbociclib (Fig. 3i).

Similar results were also found in early adaptive palbociclib-resistant MCF-7 cells and palbociclib-

resistant breast cancer tissues in MMTV-*PyMT* mice, but not in ER-negative T98G cells (Fig. 3j,

k). Next, analysis of nuclear and cytoplasmic fractions revealed that, in palbociclib-resistant breast

cancer cells, JUND and phosphorylated JUND were significantly elevated, primarily in the nucleus

(Fig. 3l). Finally, the results showed that JUND was also markedly upregulated in palbociclib-

resistant breast cancer patients (Fig. 3m). These results strongly suggest that the MAPK/AP-1

signaling pathway is a key mechanism of resistance to palbociclib, and PTEN neddylation

upregulates JUND protein expression while regulating AP-1 activity.

PTEN neddylation decreases JUND ubiquitination

Next, we intended to explore the mechanism by which PTEN neddylation promotes JUND protein

expression, IP analysis indicated that the ubiquitination of JUND was obviously decreased in

palbociclib-resistant breast cancer cells (Fig. 4a). We generated a fusion protein (PTEN-Nedd8) by

linking Nedd8 to the C-terminus of PTEN to mimic neddylated PTEN. Neddylation would promote

PTEN nuclear translocation. Therefore, a nuclear localization sequence (NLS) was fused to the N-

terminus of PTEN to generate NLS-PTEN for comparison [30, 38, 39]. Then we observed an

increased expression level of JUND and phosphorylated JUND in sh*PTEN*+PTEN-Nedd8 MCF-7

cells, but the opposite effect was found in sh*PTEN*+PTEN-NLS MCF-7 cells (Fig. 4b). Compared

with NLS-PTEN, JUND showed a higher affinity for neddylated PTEN (Fig. 4c). Moreover,

enhanced interaction between neddylated PTEN and JUND reduced JUND ubiquitination (Fig. 4d).

Next, we confirmed that JUND expression was significantly increased in tumor tissues compared

with matched adjacent normal tissues, particularly in luminal-type breast cancer (Additional file 1:

Fig. S2c, d). By comparison, the levels of JUND and neddylated PTEN were positively correlated

in luminal-type breast cancer (Additional file 1: Fig. S2e, f). Detailed pathological information was

in Additional file 3: Table S2.

To date, no specific ubiquitin ligase for JUND has been reported. Through UbiBrowser 2.0 [40, 41],

ITCH (also known as AIP4) was predicted to be the E3 of JUND with the highest affinity among

the interactive protein candidates (Additional file 1: Fig. S2g). As expected, overexpression of

ITCH reduced the levels of JUND protein and its phosphorylation, however, this negative

regulatory effect was significantly diminished after palbociclib resistance developed (Fig. 4e).

Overexpression of ITCH promoted ubiquitination of JUND (Fig. 4f). Considering that neddylated

PTEN in the nuclear intended to regulate the protein-protein interactions, we first used molecular

docking with AlphaFold 2.0 to evaluate whether neddylation of PTEN affects the interaction

between ITCH and JUND. The results indicated that neddylated PTEN could occupy the binding

region between ITCH and JUND, whereas PTEN without Nedd8 could not (Fig. 4g). We then

evaluated the interaction between ITCH and JUND and found that JUND was unable to bind to

ITCH in sh*PTEN*+PTEN-Nedd8 MCF-7 cells (Fig. 4h, i). Furthermore, JUND failed to interact

with ITCH in the palbociclib-resistant breast cancer cells compared to the palbociclib-sensitive cells

(Fig. 4j). Collectively, the results indicate that during drug resistance, elevated PTEN neddylation

interferes with the interaction between JUND and its ubiquitin ligase, reducing JUND

ubiquitination and increasing its protein stability.

Identification of Echinacoside as a PTEN neddylation inhibitor

The above data indicate that PTEN neddylation is a key factor contributing to resistance against

palbociclib treatment. Next, we aimed to explore the possibility of disrupting the interaction

between PTEN and XIAP to reduce PTEN neddylation in tumor cells, and thus overcoming

resistance to palbociclib. Consistent with previous study [30, 42], XIAP was co-

immunoprecipitated with PTEN *in vivo* (Additional file 1: Fig. S3a). The truncations containing the

BIR2 domain of XIAP and the C2 domain of PTEN interacted with each other (Fig. 5a and

Additional file 1: Fig. S3b-d). Then, molecular docking and *in vitro* pull-down assay indicated that

Y154 and N234 sites at XIAP, as well as S207 and R335 sites at PTEN were key binding sites on

the interaction surface (Fig. 5b, c). On the basis of the binding determinants of the XIAP-PTEN

interface, structure-based virtual screening was performed to find potential XIAP-PTEN PPI

(protein and protein interaction) inhibitors (Fig. 5d). Ultimately, we selected top five compounds,

guided by the top-ranking binding models and docking scores from the Enamine libraries

containing protein-protein interacting compounds and the Bioactive Compound Library Plus at *Med*

Chem Express LLC (Additional file 1: Fig. S3e). No PPI inhibitors affected the protein and mRNA

levels of PTEN (Additional file 1: Fig. S3f, g). All the five compounds inhibited PTEN neddylation,

with Echinacoside (ECH) and Z219118374 showing the most significant inhibition effect

(Additional file 1: Fig. S3h). We noticed that Echinacoside (ECH), a natural phenylethanoid

glycoside, had the highest molecular docking score and formed hydrogen bonds with the critical

PTEN residues S207 and R335 that interacted with XIAP (Fig. 5e, f). ECH is one of the main

phenylethanol glycosides isolated and purified from *cistanche tubulosa*, which has been used as

traditional Chinese herbal medicine with anti-senility and antifatigue effects [43, 44]. Subsequently,

we employed surface plasmon resonance and microscale thermophoresis assay to evaluate the

interaction between ECH and PTEN. As illustrated in Fig. 5g and 5h, ECH showed a high-affinity

binding with PTEN. In addition, TSA assay showed that the inflection temperature (Ti) of GST-

PTEN increased after co-incubation with ECH (Additional file 1: Fig. S3i). Next, we monitored

ECH binding with PTEN using the cellular thermal shift assay. The obvious shift in the melting

curve indicated increased PTEN protein stability and high-affinity binding upon addition of ECH

(Fig. 5i). Furthermore, ECH effectively disrupted the interaction between XIAP and PTEN *in vivo*

(Fig. 5j). The pull-down assay revealed a clear dose-dependent decrease in the interaction between

XIAP and the PTEN C2 domain following ECH treatment. (Fig. 5k). Moreover, ECH did not affect

the dimerization of PTEN (Additional file 1: Fig. S3j, k).

To determine whether ECH could disrupt PTEN neddylation, we performed *in vivo* and *in vitro*

neddylation assays. The results revealed that ECH reduced PTEN neddylation, but not

ubiquitination (Fig. 5l). *In vitro* neddylation assay indicated that ECH directly interfered XIAP

mediated PTEN neddylation (Fig. 5m). As expected, elevated JUND levels, JUND phosphorylation,

and Akt phosphorylation, which increased after palbociclib resistance, were diminished following

ECH treatment (Fig. 5n). Additionally, there was a significant increase in JUND ubiquitination and

decrease in AP-1 transcriptional activity following ECH treatment (Fig. 5o, p). Taken together, we

identified Echinacoside as a potent PTEN neddylation inhibitor that eliminates PTEN neddylation

by inhibiting the interaction between XIAP and PTEN.

ECH depends on PTEN neddylation to suppress tumorigenesis

Then, we intended to explore the role of ECH in tumorigenesis. ECH exhibited a significant tumor-

suppressive effect, manifested in a dose-dependent manner, on cellular proliferation, colony

formation, and cell migration across various tumor cell lines (Additional file 1: Fig. S4a-d). We

measured drug toxicity of ECH in CD-1 mice and found no significant differences in body weight

(Additional file 1: Fig. S5a, b), blood cell counts or composition (Additional file 1: Fig. S5c), or

serum ALT levels (Additional file 1: Fig. S5d), indicating no obvious liver injury. Additionally,

ECH treatment showed no signs of toxicity or organ damage based on weight and histopathology

of vital organs (Additional file 1: Fig. S5e-g). Thus, we speculated that ECH might have substantial

anti-tumor efficacy with minimal adverse effects.

To be note, deletion of *PTEN* significantly weakened the inhibitory effects of ECH on cell

proliferation (Fig. 6a, b) and tumor invasion (Fig. 6c). Moreover, palbociclib inhibited cell

proliferation (Fig. 6d, e) and increased the cell death (Fig. 6f) in PTEN neddylation deficient cells.

However, ECH was unable to inhibit tumor cell proliferation when PTEN neddylation was deficient

(Fig. 6g, h). Additionally, in PTEN neddylation-deficient cells, ECH no longer reduced the protein

levels of JUND and p-JUND (Fig. 6i), nor did it decrease AP-1 activity (Fig. 6j). Furthermore,

CUT&Tag analysis performed on PTEN neddylation-deficient cells indicated an enrichment of the

PI3K/Akt signaling pathway and the MAPK/AP-1 signaling pathway (Fig. 6k, l). The data

demonstrated that in the absence of PTEN neddylation, JUND exhibited reduced enrichment at the

promoters of downstream genes associated with inflammation and immune responses, including

CSF2, IL-17, IL-6, MMP13, and IL-1β (Fig. 6m). Due to the significant changes in these genes, an

immunoassay array was performed. As shown in Fig. 6n and 6o, the results demonstrated a

reduction in multiple cytokines and chemokines, including G-CSF, GM-CSF, IFN-γ, IL-1RA, IL-

1β, IL-8, CCL2/4, IL-17, and VEGF, following ECH treatment. However, no alterations were

observed in the PTEN neddylation deficient cells subsequent to ECH exposure. Similar results of

G-CSF, IL-1β, IL-17 were also approved by ELISA assay (Fig. 6p). Therefore, the above evidence

suggested that ECH inhibited oncogenic effects, at least to some extent, by interfering with PTEN

neddylation.

Combination ECH enhances the sensitivity of palbociclib in breast cancer

We next aimed to explore whether ECH could overcome palbociclib resistance in breast cancer. As

expected, the tumor weight and volume were both markedly declined in the palbociclib resistance

MMTV-*PyMT* mice following the treatment of ECH (Fig. 7a-d). Similar results were also obtained

from the primary breast cancer cells isolated from MMTV-*PyMT* mice (Additional file 1: Fig. S6a,

b), and the tumor organoids established from them (Additional file 1: Fig. S6c-e). In immunoassay

arrays, there was an obvious reduction of GM-CSF and G-CSF following ECH treatment (Fig. 6n,

o). G-CSF is well known to function as a mobilizing agent for neutrophils, while GM-CSF

influences the development and functionality of both neutrophils and macrophages [45-47].

Immunohistochemistry and flow cytometry showed a significant reduction in the population of

active neutrophils labeled by Ly6G$^+$, CD11b$^+$, and CD62L$^-$ in palbociclib-resistant MMTV-*PyMT*

mice after ECH treatment (Fig. 7e, f). We confirmed a decrease in JUND, phosphorylation of Akt,

PTEN neddylation, and XIAP levels, with no notable changes in neddylation of E1-UBA3, E2-

Ubc12, and Nedd8 in palbociclib-resistant breast cancer tissues from MMTV-*PyMT* mice after

ECH treatment (Additional file 1: Fig. S6f-i). The combination of ECH with palbociclib showed

significantly decreased cell proliferation compared with monotherapy (Fig. 7g). In the ER-negative

T98G cells, which was resistance to palbociclib, the co-administration of ECH increased sensitivity

to palbociclib, thereby suppressing tumor cell proliferation (Additional file 1: Fig. S7a, b). We

finally intended to confirm the efficacy of combination therapy using tumor organoid models

derived from the human luminal breast cancer patient. Both ECH and palbociclib monotherapies

demonstrated tumor growth suppression effects, but the combination treatment exhibited even

better anti-tumor growth efficacy compared with the monotherapies (Fig. 7h, i).

Immunofluorescence staining showed a significant reduction in PTEN neddylation following ECH

treatment in the E-cadherin positive organoids (Fig. 7j). Taken together, these findings collectively

illustrate that ECH serves as an effective sensitizing agent for palbociclib in breast cancer, with the

combined therapy showing a better anti-tumor activity.

Discussion

For luminal breast cancer patients, the standard treatment consists of CDK4/6 inhibitors combined

with endocrine therapy. However, since resistance to CDK4/6 inhibitors is inevitable, there is

considerable focus on developing therapeutic strategies to overcome this resistance. Here, we

demonstrate that a post-translational modification of PTEN, namely neddylation, contributes to

CDK4/6 inhibitor resistance in breast cancer. We firstly prepared antibodies that specifically

recognize PTEN neddylation modification. Then, increased PTEN neddylation was observed in

breast cancer patients resistant to palbociclib, as well as in both palbociclib-resistant breast cancer

cells and spontaneous breast cancer MMTV-*PyMT* mice. Our previous data defined neddylation as

a critical modification of PTEN, which inhibits PTEN tumor suppressor function and activates the

PI3K/Akt signaling pathway, revealing a previously unidentified tumor-promoting role of

neddylated PTEN [30]. Palbociclib resistance upregulated PTEN neddylation *via* the E3 ligase

XIAP, consistent with previous studies suggesting that compensatory CDK2 activation upon

resistance increases XIAP mRNA levels [48, 49]. This dynamic resulted in enhanced binding to

PTEN, thereby contributing to the augmented PTEN neddylation and hyperactivated PI3K/Akt

signaling pathway observed following palbociclib resistance.

PIK3CA mutations occur in approximately 40 % of luminal breast cancers, and activation of the

PI3K/Akt signaling pathway is prominent as cancers become resistant to CDK4/6 inhibitors [15].

While PI3K inhibitors hold promise in mitigating the onset of CDK4/6 inhibitor resistance, their

efficacy in rescuing cells from established resistance falls short, as they are unable to reverse the

acquired insensitivity [50-52]. Apart from the upregulation of PI3K/Akt signaling pathway, our

study showed that the increase in PTEN neddylation after palbociclib resistance led to the over-

activation of the MAPK/AP-1 signaling pathway. Mechanistically, we identified that neddylated

PTEN interacted with JUND. JUND is a component protein of the activating protein-1 (AP-1)

transcription factor and is considered as a classical proto-oncogene. Dysfunctional AP-

1 transcriptional activity is associated with tumor growth, invasion, migration and drug resistance

[37, 53, 54]. So far, it is known that CDK4/6 inhibition reprograms the breast cancer enhancer

landscape by stimulating AP-1 transcriptional activity [55]. However, the role of AP-1 in regulating

resistance to CDK4/6 inhibitors remains unclear. Here, we reported that PTEN neddylation led to

an obviously enhancement in JUND protein stability in palbociclib resistance breast cancer cells

and mouse models. The expression of JUND in palbociclib-resistant patients showed a positive

correlation with the PTEN neddylation modification level and a negative correlation with PTEN

expression. Up to day, no ubiquitin ligase has been clearly reported to catalyze the ubiquitination

mediated degradation of JUND. We identified that ITCH as a polyubiquitination E3 ligase for

JUND. However, under the palbociclib-resistant conditions, ITCH no longer promoted JUND

ubiquitination and reduced its protein stability. Further structural docking and immunoprecipitation

assays showed that neddylated PTEN interfered with the interaction between JUND and ITCH,

reducing the ubiquitination of JUND catalyzed by ITCH, thereby preventing the degradation of

JUND. Therefore, the increased modification of PTEN neddylation after palbociclib resistance

enhanced the protein stability and phosphorylation level of JUND, thereby activating the AP-1

transcription factor activity. Thus, further data showed that the expression levels of JUND

downstream target genes such as CSF2, IL-1β, IL-6, IL-17, and MMP13 were increased. These

results propose a novel role for PTEN neddylation in upregulating AP-1 transcription factor activity

and activating the MAPK/AP-1 signaling pathway during resistance to palbociclib treatment.

Neddylation is indispensable in various cellular processes and homeostasis, but excessive activation

of this modification has been observed in numerous tumors. Small molecules targeting neddylation

activating enzymes (E1), such as MLN4924 (trade name pevonedistat) and TAS4464, have shown

promise in clinical trials for cancer treatment [28, 56]. DI-404, DI-591, NAcM-HIT, NAcM-OPT,

and WS-383 are competitive neddylation conjugating enzymes (E2) inhibitors that target UBE2M-

DCN1 interaction [57-59]. HA-9104 is a targeted inhibitor of another E2-UBE2F [60]. Given the

limited number of neddylation E1 and E2 enzymes, inhibiting neddylation broadly may pose

inevitable cytotoxicity and drug safety concerns. Therefore, for tumor treatment, more specific and

targeted drugs are needed to address neddylation modifications. No small molecule drugs

specifically targeting neddylation substrates have been reported, but we believe that would offer

greater specificity, reduced drug side effects, and potentially more potent anti-tumor effects. XIAP

has been identified as a specific ligase for PTEN neddylation both *in vivo* and *in vitro* [30]. Next,

we employed a specific small molecule inhibitor, Echinacoside (ECH), to interfere with the

dynamic interplay between XIAP and PTEN, ultimately suppressing the neddylation of PTEN both

in vivo and *in vitro*. ECH, a key efficacious constituent found in *Echinacea*, is also abundantly

present in various other natural plant sources, including the roots of *Scrophulariae*, *Rehmanniae*,

and *Cistanches Herba*, among others [43, 44]. It has been reported that ECH inhibits tumor metastasis *via* suppressing the PI3K/AKT signaling pathway, but the mechanism remains unclear [61-63]. Our research demonstrates that ECH exhibits excellent anti-tumor efficacy through its effect on PTEN neddylation. For the first time, our study demonstrates that ECH is a selective inhibitor targeting neddylation substrates.

Although the resistance mechanisms associated with CDK4/6 inhibitors in breast cancer have been documented, but not fully elucidated. For instance, the concurrent use of PI3K inhibitors like alpelisib or buparlisib with CDK4/6 inhibitors is discouraged due to safety concerns [14, 15]. Since PTEN is a key suppressor in the PI3K/Akt pathway, restoring its tumor-suppressive function could more effectively inhibit this pathway [23]. More importantly, our data reported that ECH obviously elevates the sensitivity of palbociclib, and ECH in combination with palbociclib would more effectively reduce the tumor growth. In the tumor microenvironment, the role of neutrophils is complex and multifaceted, highly correlated with the development of drug resistance [64, 65]. Our data showed that the number of activated neutrophils increases after palbociclib resistance, accompanied by an increase in various pro-inflammatory factors and growth factors, such as G-CSF, GM-CSF, IL-1β, VEGF. Treatment with ECH was observed to decrease activated neutrophils following palbociclib resistance. Future study needs to explore the role of activated neutrophils in ROS production and the immunosuppressive microenvironment, and discuss the function of other different terms of neutrophils. Ultimately, our findings unlock a promising therapeutic strategy by focusing on neddylation to effectively restore PTEN tumor suppressor activity, thereby enhancing the efficacy of palbociclib (Fig. 7k). It highlights a deeper understanding of CDK4/6i resistance mechanisms and the development of advanced combination therapies in optimizing breast cancer treatment outcomes.

Conclusions

In conclusion, we demonstrate, for the first time, that the neddylation modification of PTEN is

significantly elevated in breast cancer patients resistant to CDK4/6 inhibitors. Mechanistically,

neddylated PTEN enhances AP-1 transcriptional activity by stabilizing the JUND protein.

Ultimately, Echinacoside interrupts PTEN neddylation to overcome CDK4/6 inhibitor resistance.

We propose targeted intervention to inhibit PTEN neddylation as a novel strategy to effectively

restore tumor suppressor activity, marking a groundbreaking approach in overcoming resistance

and cancer therapy.

Abbreviations

CDK4/6i: cyclin D-dependent kinases 4 and 6 inhibitor; PTEN: phosphatase and tension

homologue deleted from chromosome 10; ECH: echinacoside; MCF-7-PS: palbociclib-sensitive

breast cancer cell lines; MCF-7-PR: acquired palbociclib-resistant breast cancer stable cell lines;

MCF-7/ADR: MCF-7 sublines resistant to doxorubicin; MCF-7/DDP: MCF-7 sublines resistant to

cisplatin; MCF-7/PTX: MCF-7 sublines resistant to paclitaxel; PDOs: patient-derived organoids;

HR+: hormone receptor-positive; HER2-: human epidermal growth factor receptor 2-negative; Rb:

retinoblastoma; FDA: the US food and drug administration; 2KR: K197 and K402 sites mutated to

R; NLS: nuclear localization sequence; AP-1: activator protein-1; PPI: protein and protein

interaction; DMSO: dimethyl sulfoxide; 3D: three-dimensional; TME: tumor microenvironment;

H&E: hematoxylin & eosin; EBC: elution buffer for cell lysis; SDS-PAGE: sodium dodecyl sulfate-

polyacrylamide gel electrophoresis; SD: standard deviation; RNA-seq: RNA-sequencing; FPKM:

Fragments Per Kilobase of exon model per Million mapped fragments GSEA: gene set enrichment

analysis; ELISA: enzyme-linked immunosorbent assay; KEGG: kyoto encyclopedia of genes and

genomes; ChIP: chromatin immunoprecipitation; IHC: immunohistochemistry; SPR: surface

plasmon resonance binding assays; MST: microscale thermophoresis assays; TSA: thermal shift

assay; CETSA: cellular thermal shift assay.

Supplementary Information

Additional file 1:

Figure S1. PTEN neddylation modification is upregulated in the CDK4/6 inhibitor-resistant breast cancer.

Figure S2. PTEN neddylation enhances JUND stability in palbociclib-resistant breast cancer.

Figure S3. Echinacoside inhibits the binding of PTEN and XIAP to suppress PTEN neddylation.

Figure S4. ECH inhibits the tumor cell invasion and proliferation.

Figure S5. ECH exhibits low toxicity in CD-1 non-tumor-bearing mice.

Figure S6. ECH resists CDK4/6 inhibitor resistance in MMTV-*PyMT* breast cancer mice.

Figure S7. Combination of ECH enhances the sensitivity of palbociclib in breast cancer.

Table S3: Primers.

Additional file 2: Table S1, List of pathological information of ZL-Brcsur1801.

Additional file 3: Table S2, List of pathological information of HBreD090Bc03.

Declarations

Ethics approval and consent to participate

All animals were handled in strict accordance to the "Guide for the Care and Use of Laboratory Animals" and the "Principles for the Utilization and Care of Vertebrate Animals", and all animal work was approved by Capital Medical University Ethics Committee. The clinical samples were approved by the department of breast and thyroid surgery at the Second People's Hospital of Shenzhen and Hunan Cancer Hospital. Informed consent was obtained from all subjects or their relatives.

Consent for publication

All authors have agreed to publish this manuscript.

Acknowledgements

Thanks to Core Facility Center, Capital Medical University for providing platform support for this research.

Competing interests

The authors declare that there are no competing financial, commercial, or professional interest that could influence the performance, interpretation, or reporting of the research presented in this manuscript. All authors have read and approved this declaration of interests, confirming that it accurately reflects their current situation.

Data and materials availability

RNA-seq data have been deposited at SRA (PRJNA1143082 and PRJNA1144658) and are publicly available as of the date of publication. All data are available in the main text or the supplementary materials.

Funding

National Outstanding Youth Science Fund Project of National Natural Science Foundation of China grant 82122052 (PX)

The National Natural Science Foundation of China (NSFC) grant No. 32471305 (PX)

Outstanding Young Talents Program in Chinese Institutes for Medical Research, Beijing grant CX23YQA03 (PX)

Author's contributions

Conceptualization: PX; Methodology: FL, WXL, YXS, SHL, XKJ; Formal Analysis: FL; Investigation: PX, FL; Resources: SYS, YWT, ZZ; Writing-Original Draft: PX; Funding Acquisition: PX

References

1. Nolan E, Lindeman GJ, Visvader JE. Deciphering breast cancer: from biology to the clinic. Cell. 2023;186:1708–1728.

2. Harbeck N, Gnant M. Breast cancer. Lancet. 2017;389:1134–1150.

3. Giuliano M, Schettini F, Rognoni C, Milani M, Jerusalem G, Bachelot T, et al. Endocrine

treatment versus chemotherapy in postmenopausal women with hormone receptor-positive, HER2-

negative, metastatic breast cancer: a systematic review and network meta-analysis. Lancet Oncol.

2019;20:1360-1369.

4. Goel S, Bergholz JS, Zhao JJ. Targeting CDK4 and CDK6 in cancer. Nat Rev Cancer.

2022;22:356–372.

5. Morrison L, Loibl S, Turner NC. The CDK4/6 inhibitor revolution - a game-changing era for

breast cancer treatment. Nat Rev Clin Oncol. 2024;21:89–105.

6. O'Sullivan CC, Clarke R, Goetz MP, Robertson J. Cyclin-Dependent Kinase 4/6 Inhibitors for

Treatment of Hormone Receptor-Positive, ERBB2-Negative Breast Cancer: A Review. JAMA

Oncol. 2023;9:1273–1282.

7. Portman N, Alexandrou S, Carson E, Wang S, Lim E, Caldon CE. Overcoming CDK4/6 inhibitor

resistance in ER-positive breast cancer. Endocr Relat Cancer. 2019;26:R15–R30.

8. Lloyd MR, Spring LM, Bardia A, Wander SA, Mechanisms of Resistance to CDK4/6 Blockade

in Advanced Hormone Receptor-positive, HER2-negative Breast Cancer and Emerging

Therapeutic Opportunities. Clin Cancer Res. 2022;28:821–830.

9. Cai Z, Wang J, Li Y, Shi Q, Jin L, Li S, et al. Overexpressed Cyclin D1 and CDK4 proteins are

responsible for the resistance to CDK4/6 inhibitor in breast cancer that can be reversed by

PI3K/mTOR inhibitors. Sci China Life Sci. 2023;66:94–109.

10. Palafox M, Monserrat L, Bellet M, Villacampa G, Gonzalez-Perez A, Oliveira M, et al. High

p16 expression and heterozygous RB1 loss are biomarkers for CDK4/6 inhibitor resistance in ER(+)

breast cancer. Nat Commun. 2022;13:5258.

11. Kudo R, Safonov A, Jones C, Moiso E, Dry JR, Shao H, et al. Long-term breast cancer response

to CDK4/6 inhibition defined by TP53-mediated geroconversion. Cancer Cell. 2024;42:1919-1935.

12. Zhou Y, Jin X, Ma J, Ding D, Huang Z, Sheng H, et al. HDAC5 Loss Impairs RB Repression

of Pro-Oncogenic Genes and Confers CDK4/6 Inhibitor Resistance in Cancer. Cancer Res.

2021;81:1486-1499.

13. Herrera-Abreu MT, Palafox M, Asghar U, Rivas MA, Cutts RJ, Garcia-Murillas I, et al. Early

Adaptation and Acquired Resistance to CDK4/6 Inhibition in Estrogen Receptor-Positive Breast

Cancer. Cancer Res. 2016;76:2301–2313.

14. Wander SA, Cohen O, Gong X, Johnson GN, Buendia-Buendia JE, Lloyd MR, et al. The

Genomic Landscape of Intrinsic and Acquired Resistance to Cyclin-Dependent Kinase 4/6

Inhibitors in Patients with Hormone Receptor-Positive Metastatic Breast Cancer. Cancer Discov.

2020;10:1174–1193.

15. Clark AS, Makhlin I, DeMichele A. Setting the Pick: Can PI3K Inhibitors Circumvent CDK4/6

Inhibitor Resistance? Clin Cancer Res. 2021;27:371–373.

16. Di Cristofano A, Pandolfi PP, The multiple roles of PTEN in tumor suppression. Cell.

2000;100:387–390.

17. Song MS, Salmena L, Pandolfi PP. The functions and regulation of the PTEN tumour

suppressor. Nat Rev Mol Cell Biol. 2012;13:283–296.

18. Lee YR, Chen M, Pandolfi PP. The functions and regulation of the PTEN tumour suppressor:

new modes and prospects. Nat Rev Mol Cell Biol. 2018;19:547–562.

19. Papa A, Pandolfi PP. The PTEN-PI3K Axis in Cancer. Biomolecules. 2019;9:153.

20. Costa C, Wang Y, Ly A, Hosono Y, Murchie E, Walmsley CS, et al. PTEN Loss Mediates

Clinical Cross-Resistance to CDK4/6 and PI3Kα Inhibitors in Breast Cancer. Cancer Discov.

2020;10:72–85.

21. Dosil MA, Mirantes C, Eritja N, Felip I, Navaridas R, Gatius S, et al. Palbociclib has antitumour

effects on Pten-deficient endometrial neoplasias. J Pathol. 2017;242:152–164.

22. Lee JS, Yost SE, Li SM, Cui Y, Frankel PH, Yuan YC, et al. Genomic Markers of CDK4/6

Inhibitor Resistance in Hormone Receptor Positive Metastatic Breast Cancer. Cancers.

2022;14:3159.

23. Lee YR, Chen M, Lee JD, Zhang J, Lin SY, Fu TM et al. Reactivation of PTEN tumor

suppressor for cancer treatment through inhibition of a MYC-WWP1 inhibitory pathway. Science.

2019;364:eaau0159.

24. Lin YX, Wang Y, Ding J, Jiang A, Wang J, Yu M, et al. Reactivation of the tumor suppressor

PTEN by mRNA nanoparticles enhances antitumor immunity in preclinical models. Sci Transl Med.

2021;13:eaba9772.

25. Kamitani T, Kito K, Nguyen HP, Yeh ET, Characterization of NEDD8, a developmentally

down-regulated ubiquitin-like protein. J Biol Chem. 1997;272:28557-62.

26. Enchev RI, Schulman BA, Peter M. Protein neddylation: beyond cullin-RING ligases. Nat Rev

Mol Cell Biol. 2015;16:30–44.

27. Zhang S, Yu Q, Li Z, Zhao Y, Sun Y. Protein neddylation and its role in health and diseases.

Signal Transduct Target Ther. 2024;9:85.

28. Soucy TA, Smith PG, Milhollen MA, Berger AJ, Gavin JM, Adhikari S, et al. An inhibitor of

NEDD8-activating enzyme as a new approach to treat cancer. Nature. 2009;458:732–736.

29. Fu DJ, Wang T. Targeting NEDD8-activating enzyme for cancer therapy: developments,

clinical trials, challenges and future research directions. J Hematol Oncol. 2023;16:87.

30. Xie P, Peng ZQ, Chen YJ, Li HC, Du MG, Tan YW, et al. Neddylation of PTEN regulates its

nuclear import and promotes tumor development. Cell Res. 2021;31:291–311.

31. Du MG, Peng ZQ, Gai WB, Liu F, Liu W, Chen YJ, et al. The Absence of PTEN in Breast

Cancer Is a Driver of MLN4924 Resistance. Front Cell Dev Biol. 2021;9:667435.

32. Chakrabarti R, Wei Y, Hang J, Hang X, Andres Blanco M, Choudhury A, et al. ΔNp63 promotes

stem cell activity in mammary gland development and basal-like breast cancer by enhancing Fzd7

expression and Wnt signalling. Nat Cell Biol. 2014;16:1-13.

33. Wan L, Lu X, Yuan S, Wei Y, Guo F, Shen M, et al. MTDH-SND1 interaction is crucial for

expansion and activity of tumor-initiating cells in diverse oncogene- and carcinogen-induced

mammary tumors. Cancer cell. 2014;26:92-105.

34. Guerriero JL, Sotayo A, Ponichtera HE, Castrillon JA, Pourzia AL, Schad S, et al. Class IIa

HDAC inhibition reduces breast tumours and metastases through anti-tumour macrophages. Nature.

2017;543:428-432.

35. Knudsen ES, Knudsen KE. Tailoring to RB: Tumour suppressor status and therapeutic response.

Nat Rev Cancer. 2008;8:714–724.

36. Guiley KZ, Stevenson JW, Lou K, Barkovich KJ, Kumarasamy V, Wijeratne TU, et al. p27

allosterically activates cyclin-dependent kinase 4 and antagonizes palbociclib inhibition. Science.

2019;366:6471.

37. Eferl R, Wagner EF. AP-1: a double-edged sword in tumorigenesis. Nat Rev Cancer.

2003;3:859-868.

38. Liu F, Wagner S, Campbell RB, Nickerson JA, Schiffer CA, Ross AH, PTEN enters the nucleus

by diffusion. J Cell Biochem. 2005;96:221–234.

39. Planchon SM, Waite KAEng, C. The nuclear affairs of PTEN. J Cell Sci. 2008;121:249–253.

40. Li Y, Xie P, Lu L, Wang J, Diao L, Liu Z, et al. An integrated bioinformatics platform for

investigating the human E3 ubiquitin ligase-substrate interaction network. Nat Commun.

2017;8:347.

41. Wang X, Li Y, He M, Kong X, Jiang P, Liu X, et al. UbiBrowser 2.0: a comprehensive resource

for proteome-wide known and predicted ubiquitin ligase/deubiquitinase-substrate interactions in

eukaryotic species. Nucleic Acids Res. 2022;50:D719–D728.

42. Van Themsche C, Leblanc V, Parent S, Asselin E, X-linked inhibitor of apoptosis protein (XIAP)

regulates PTEN ubiquitination, content, and compartmentalization. J Biol Chem. 2009;284:20462–

20466.

43. Facino RM, Carini M, Aldini G, Saibene L, Pietta P, Mauri P. Echinacoside and caffeoyl

conjugates protect collagen from free radical-induced degradation: a potential use of Echinacea

extracts in the prevention of skin photodamage. Planta Med. 1995;61:510–514.

44. Wang W, Jiang S, Zhao Y, Zhu G. Echinacoside: A promising active natural products and

pharmacological agents. Pharmacol Res. 2023;197:106951.

45. Chen BD, Clark CR, Chou TH. Granulocyte/macrophage colony-stimulating factor stimulates

monocyte and tissue macrophage proliferation and enhances their responsiveness to macrophage

colony-stimulating factor. Blood. 1988;71:997–1002.

46. Spiekermann K, Roesler J, Emmendoerffer A, Elsner J, Welte K. Functional features of

neutrophils induced by G-CSF and GM-CSF treatment: differential effects and clinical implications.

Leukemia. 1997;11:466–478.

47. Kolaczkowska E, Kubes P. Neutrophil recruitment and function in health and inflammation.

Nat Rev Immunol. 2013;13:159–175.

48. Dong F, Guo W, Zhang L, Wu S, Teraishi F, Davis JJ, et al. Downregulation of XIAP and induction of apoptosis by the synthetic cyclin-dependent kinase inhibitor GW8510 in non-small cell lung cancer cells. Cancer Biol Ther. 2006;5:165–170.

49. Chen Q, Chen K, Guo G, Li F, Chen C, Wang S, et al. A critical role of CDKN3 in Bcr-Abl-mediated tumorigenesis. PloS One. 2014;9:e111611.

50. Burgoyne AM, Vann KR, Joshi S, Morales GA, Vega FM, Singh A, et al. A triple action CDK4/6-PI3K-BET inhibitor with augmented cancer cell cytotoxicity. Cell Discov. 2020;6:49.

51. Agostinetto E, Debien V, Marta GN, Lambertini M, Piccart-Gebhart M, de Azambuja E, CDK4/6 and PI3K inhibitors: A new promise for patients with HER2-positive breast cancer. Eur J Clin Invest. 2021;51:e13535.

52. Lee CL, Cremona M, Farrelly A, Workman JA, Kennedy S, Aslam R, et al. Preclinical evaluation of the CDK4/6 inhibitor Palbociclib in combination with a PI3K or MEK inhibitor in colorectal cancer. Cancer Biol Ther. 2023;24:2223388.

53. Shaulian E, Karin M. AP-1 as a regulator of cell life and death. Nat Cell Biol. 2002;4:E131–E136.

54. Ruiz EJ, Lan L, Diefenbacher ME, Riising EM, Da Costa C, Chakraborty A, et al. JunD, not c-Jun, is the AP-1 transcription factor required for Ras-induced lung cancer. JCI Insight. 2021;6:e124985.

55. Watt AC, Cejas P, DeCristo MJ, Metzger-Filho O, Lam EYN, Qiu X, et al. CDK4/6 inhibition reprograms the breast cancer enhancer landscape by stimulating AP-1 transcriptional activity. Nat cancer. 2021;2:34–48.

56. Yamamoto N, Shimizu T, Yonemori K, Kitano S, Kondo S, Iwasa S, et al. A first-in-human, phase 1 study of the NEDD8 activating enzyme E1 inhibitor TAS4464 in patients with advanced solid tumors. Invest New Drugs. 2021;39:1036–1046.

57. Zhou H, Lu J, Liu L, Bernard D, Yang CY, Fernandez-Salas E, et al. A potent small-molecule

inhibitor of the DCN1-UBC12 interaction that selectively blocks cullin 3 neddylation. Nat Commun.

2017;8:1150.

58. Zhou H, Zhou W, Zhou B, Liu L, Chern TR, Chinnaswamy K, et al. High-Affinity

Peptidomimetic Inhibitors of the DCN1-UBC12 Protein-Protein Interaction. J Med Chem.

2018;61:1934–1950.

59. Zheng YC, Guo YJ, Wang B, Wang C, Mamun MAA, Gao Y, et al. Targeting neddylation E2s:

a novel therapeutic strategy in cancer. J Hematol Oncol. 2021;14:57.

60. Xu T, Ma Q, Li Y, Yu Q, Pan P, Zheng Y, et al. A small molecule inhibitor of the UBE2F-

CRL5 axis induces apoptosis and radiosensitization in lung cancer. Signal Transduct Target Ther.

2022;7:354.

61. Liu J, Tang N, Liu N, Lei P, Wang F, Echinacoside inhibits the proliferation, migration, invasion

and angiogenesis of ovarian cancer cells through PI3K/AKT pathway. J Mol Histol. 2022;53:493–

502.

62. Liang H, Yin G, Shi G, Liu Z, Liu X, Li J. Echinacoside regulates PI3K/AKT/HIF-1α/VEGF

cross signaling axis in proliferation and apoptosis of breast cancer. Anal Biochem.

2024;684:115360.

63. Wei J, Zheng Z, Hou X, Jia F, Yuan Y, Yuan F, et al. Echinacoside inhibits colorectal cancer

metastasis via modulating the gut microbiota and suppressing the PI3K/AKT signaling pathway. J

Ethnopharmacol. 2024;318:116866.

64. Giese MA, Hind LE, Huttenlocher A. Neutrophil plasticity in the tumor microenvironment.

Blood. 2019;133:2159-2167.

65. Teh JLF, Aplin AE. Arrested Developments: CDK4/6 Inhibitor Resistance and Alterations in

the Tumor Immune Microenvironment. Clin Cancer Res. 2019;25:921–927.

Figures

Fig. 1 Palbociclib-resistant breast cancer cells express higher levels of PTEN neddylation

modification. **a** Representative images from immunohistochemical staining of PTEN and PTEN

neddylation on K402 site in the indicated tissues. Scale bars, 50 µm. **b** Kaplan-Meier plot of overall

survival of patients with breast carcinomas. A log-rank test was used to show differences between

groups. **c** Representative images from immunohistochemical staining of PTEN and neddylated

PTEN on K402 site in different breast cancer subtypes and adjacent tissues are shown. Scale bars,

50 µm. PTEN and PTEN neddylation on K402 expression are shown as box plots (a and c). **d**

Representative images from immunohistochemical staining of PTEN and PTEN neddylation on

K402 in the indicated tissues. Scale bars, 100 µm. The protein level of PTEN and PTEN neddylation

on K402 expression are shown as bar plots. **e-h** To establishing the palbociclib-resistant mouse

model, the palbociclib-resistant group was established by palbociclib (75 mg/kg) gavage daily for

35 days and the palbociclib-sensitive group were administered palbociclib for 20 days (e). The

breast tumors were removed and photographed (f). Tumors were isolated, volume (g) and their

weights (h) were measured. **i** Representative images from immunohistochemical staining of PTEN,

PTEN neddylation on K402, Rb and p-Rb in the indicated groups. Scale bar, 50 µm. **j** Immunoblot

analysis of anti-PTEN immunoprecipitate and cell lysates derived from spontaneous breast tumors

of MMTV-*PyMT* mice in the indicated groups. **k** IC50 of palbociclib-resistant breast tumor cells

obtained from MMTV-*PyMT* mice. The cells were seeded in 96-well plates treated with increasing

concentration (0.01 nM-1000 µM) of palbociclib and then analyzed for CCK8 assay. *P* values were

calculated by Student's *t*-test. (a and d), log-rank test (b) and one-way ANOVA test (c, g-i). Error

bars, ± S.D. ns, not significant, *$P < 0.05$, **$P < 0.01$, ***$P < 0.001$.

Fig. 2 Upregulation of XIAP increases the PTEN neddylation in palbociclib-resistant breast cancer.
a IC50 of MCF-7-PS (palbociclib sensitivity, PS) and MCF-7-PR (palbociclib resistance, PR) cells.
MCF-7-PR cells and MCF-7-PS cells were seeded in 96-well plates and then treated with increasing
concentrations (0.01 nM-1000 μM) of palbociclib and then ananlyzed for CCK8 assay. **b** MCF-7-
PS and MCF-7-PR cells are treated with palbociclib (0.5 μM, 24 h). The percentage of cells in
G1/S-phase is depicted. **c** Colony formation assay was performed in the MCF-7-PS cells and MCF-
7-PR cells and the cells were treated with palbociclib (0.1 μM, 15 days). Results are from a
representative experiment performed in triplicate. **d** Immunoblot analysis of anti-PTEN
immunoprecipitate from MCF-7-PS and MCF-7-PR cells to detect PTEN neddylation *in vivo*. **e**

Immunoblot analysis of anti-PTEN immunoprecipitate from MCF-7 drug resistant cells including

MCF-7-PR, MCF-7 sublines resistant to doxorubicin (MCF-7-ADR), cisplatin (MCF-7-DDP) and

paclitaxel (MCF-7-PTX) cells. **f** MCF-7 cells and T-47D cells were treated with palbociclib (0.5

μM, 0 h/48 h/96 h). The right pannel was treated with palbociclib (0.5 μM, 96 h) and MLN4924 (1

μM, 12 h) simultaneously. The cells were collected and lysed for immunoblot analysis with

indicated antibodies. **g** Immunoblot analysis of anti-PTEN immunoprecipitate from MCF-7 cells

and T98G cells. MCF-7 cells and T98G cells were respectively treated with palbociclib (0.5 μM, 0

h/48 h/96 h). **h** Western blot analysis of XIAP, PTEN, UBA3, Ubc12, Nedd8, NEDP1 in palbociclib

sensitivity and resistance MCF-7 and T-47D cells. **i** and **j** Immunoblot analysis of anti-PTEN

immunoprecipitate and WCL from adaptative palbociclib resistance in MCF-7 (i) and T-47D (j). **k**

Co-immunoprecipitation of XIAP after immunoprecipitation of the PTEN protein in palbociclib

sensitivity and resistance MCF-7 cells. *P* values were calculated by one-way ANOVA test (a and c).

Error bars, ± S.D. ns, not significant, ***$P < 0.001$.

Fig. 3 PTEN neddylation enhances JUND protein stability. **a** and **b** The bubble charts depict the top ranked pathway analyzed from the KEGG pathway database. Enriched KEGG pathways were identified, which included upregulated or downregulated genes modulated by the palbociclib resistance MCF-7 cells (a) and MCF-7 cells harboring a PTEN neddylation mutation (b). **c** and **d** GSEA plots of the palbociclib resistance MCF-7 cells (c) and PTEN neddylation deficiency MCF-

7 cells (d). **e** AP-1 luciferase reporter plasmid was transfected in the palbociclib sensitivity and resistance MCF-7 cells. Reporter activity was assayed and represented as the means ± S.D. of three separate experiments. **f** and **g** Heat map of the palbociclib resistance MCF-7 cells (f) and PTEN neddylation deficiency MCF-7 cells (g). **h** and **i** Immunoblot of WCL from acquired palbociclib-sensitive or palbociclib-resistant cells. **j** Western blot analysis of lysates from MCF-7 cells treated for 24 to 96 hours with palbociclib (palbo). Addition of fresh vehicle or drug every 24 hours over a 96-hour period. **k** The cells obtained from breast tumors of MMTV-*PyMT* mice were collected and lysed for immunoblot analysis. **l** Immunoblot of Nuclear (N) *vs* Cytoplasmic (C) fractionation from palbociclib sensitivity and resistance MCF-7 cells. **m** Representative images from immunohistochemical staining of JUND in palbociclib-resistant breast tumors and matched adjacent tissues. ImageJ was used to perform Semi-quantitative analysis. Scale bars, 50 μm. *P* values were calculated by Student's *t*-test. Error bars, ± S.D. ns, not significant, *$P < 0.05$, **$P < 0.01$, ***$P < 0.001$.

Fig. 4 PTEN neddylation hinders the ITCH-mediated ubiquitination degradation of JUND. **a** Immunoprecipitation of JUND in the MCF-7-PS and MCF-7-PR cells and analysis using immunoblotting with the indicated antibodies. **b** Immunoblot of JUND and p-JUND in the MCF-7 sh*NC*, MCF-7 sh*PTEN*+PTEN-NLS and MCF-7 sh*PTEN*+PTEN-N8 cells. **c** and **d** Immunoprecipitation of PTEN (c) and JUND (d) in the MCF-7 sh*NC*, MCF-7 sh*PTEN*+PTEN-NLS and MCF-7 sh*PTEN*+PTEN-N8 cells. **e** Flag tagged-ITCH was transfected into the MCF-7-PS cells and MCF-7-PR cells and immunoblotted with the indicated antibodies. The cells were treated with palbociclib (0.5 μM for 48 h). **f** Immunoprecipitation of JUND in HEK293T cells transfected with plasmids of HA-tagged-Ub, Flag-tagged-ITCH and analysis using immunoblot analysis with the indicated antibodies. **g** Structure simulation of ITCH (yellow), JUND (pink) and

PTEN or PTEN-Nedd8 (grey) by AlphaFold2.0. **h** MCF-7 sh*PTEN*+PTEN-WT and MCF-7

sh*PTEN*+PTEN-N8 cells transfected with plasmids for Flag-tagged ITCH and analyzed using

immunoblot analysis with the indicated antibodies. **i** Flag tagged-PTEN or PTEN-Nedd8 plasmid

was transfected into the MCF-7 cells and immunoblotted with the indicated antibodies. **j** Co-

immunoprecipitation of ITCH and PTEN after immunoprecipitation of the JUND protein in

palbociclib sensitivity and resistance MCF-7 cells.

Fig. 5 Echinacoside is identified as an inhibitor of PTEN neddylation. **a** and **c** Immunoblot analysis of GST pull-downs or WCL from HEK293T cells transfected with indicated constructs. **b**

Molecular docking of PTEN C2 domain (gray) and XIAP BIR2 domain (blue). **d** The workflow of virtual drug screening. **e** Structural formula and molecular docking score of Echinacoside with PTEN. **f** Molecular docking of Echinacoside (ECH) with PTEN was conducted to estimate the binding affinity. **g** Representative images of SPR binding assay of ECH to PTEN. ECH exhibited dose-dependent binding to GST-tagged PTEN that was immobilized onto a CM5 sensor chip surface. **h** All hits were titrated at various serially diluted concentrations (0.0153 μM to 500 μM) into a fixed concentration of GST-PTEN C2 domain (150 nM). **i** Dose and temperature-dependent CETSA experiments were conducted to verify the interaction between Echinacoside (ECH) and PTEN. **j** Immunoprecipitates of PTEN were obtained from HEK293T cells transfected with Myc-XIAP (amino acids 152-235) and treated with either MLN4924 (0.5 μM) and Echinacoside (ECH) (200 μM) for 24 h. **k** Immunoblot analysis of GST pull-downs or WCL from HEK293T cells transfected with indicated constructs. The concentration of ECH was used from 20 μM to 200 μM for 24 h. **l** PTEN neddylation was attenuated by ECH *in vivo*. Immunoblot analysis of anti-PTEN immunoprecipitate and WCL from indicated cells. **m** *In vitro* neddylation of PTEN. Reactions were performed as described in the materials and methods section. ECH (100 μg) was added and reacted for 1 h. **n** Immunoblot of WCL from MCF-7 PS and PR cells for indicated proteins. **o** *In vivo* ubiquitination of PTEN. Immunoblot analysis of anti-JUND immunoprecipitate and WCL from indicated cells. **p** AP-1 luciferase reporter plasmid was transfected in indicated cells. Reporter activity was assayed in the indicated cells.

1007

Fig. 6 ECH is dependent on PTEN neddylation to suppress tumorigenesis. **a-c** CCK8 (a), colony

formation (b) and cell invasion assay (c) were performed in the indicated MCF-7 cells treated with

ECH. **d-f** CCK8 (d), colony formation (e) and apoptosis assay (f) were performed in the indicated

MCF-7 cells treated with palbociclib. **g** and **h** CCK8 (g), and colony formation (h) were performed

in the indicated MCF-7 cells treated with ECH. **i** Immunoblot of WCL from the sh*PTEN*+PTEN-WT/2KR MCF-7 cells treated by ECH (200 µM, 24 h). **j** AP-1 luciferase reporter plasmid was transfected in the indicated cells. Reporter activity was assayed in the cells treated with ECH (200 µM) for 24 h. **k** and **l** Identification of transcription targets of the JUND in the sh*PTEN*-PTEN WT or neddylation deficient MCF-7 cells. Venn diagrams of overlapped promoters bound by JUND (k). A bubble chart of the enriched KEGG pathways comprising the 6306 target genes (l). **m** qChIP analysis of the indicated genes in indicated MCF-7 cells. Results are represented as fold change relative to control with GAPDH as a negative control. **n** Cytometric bead array was performed to detect the indicated cytokines. Heat map was performed to exhibit protein expression in the indicated cells. The cells were treated with ECH (200 µM) for 24 h. **o** The protein level of G-CSF, GM-CSF, IFNγ, CCL2, IL-8, VEGF, IL-1RA, IL-1β, IL-17 and CCL4 from the immunoassay array of the indicated MCF-7 cells are shown as bar chart. **p** G-CSF，IL-1β and IL-17 protein levels were measured in the indicated MCF-7 cells by ELISA assay. *P* values were calculated by one-way ANOVA test (a-h, j, m, o, p). Error bars, ± S.D. ns, not significant, *$P < 0.05$, **$P < 0.01$, ***$P < 0.001$.

1027

Fig. 7 Combination ECH enhances the sensitivity of palbociclib in breast cancer. **a-d** The palbociclib-resistant mice model (n=3) was established (a). The mice were treated with ECH (20 mg/kg) for 10 days. The breast tumors were removed and photographed (b). Tumors were isolated,

then the weights (c) and their volume (d) were measured. Data are presented as means ± S.D. **e**

Representative images from immunohistochemical staining of CD3, CD4, CD8, Ly6G and F4/80

in the indicated tumors. ImageJ was used to perform Semi-quantitative analysis. Scale bars, 50 μm.

f Primary breast cancer cells from the indicated MMTV-*PyMT* mice were isolated and labeled with

CD11b$^+$ and Ly6G$^+$ following flow cytometry sorting. **g** CCK8 assay was performed in MCF-7

cells treated with palbociclib (0.5 μM, 5 days) and ECH (200 μM, 5 days). **h** and **i** Representative

images of organoids derived from a luminal breast cancer patient (h). Echinacoside (ECH) (200

μM) and palbociclib (0.5 μM) were administered either individually or in combination for 7 days.

The diameters of the organoids are presented as a scatter plot (i). **j** Immunofluorescent of E-

Cadherin (green) and neddylated PTEN (K402) (red) in luminal breast cancer organoids. **k** Working

model for PTEN neddylation aggravates CDK4/6 inhibitor resistance in breast cancer. Data are

shown as means ± S.D. and analyzed by a one-way ANOVA test (c-g, i). ns, not significant, *$P <$

0.05, **$P < 0.01$, ***$P < 0.001$.