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Title

ITGB4 promotes the progression of colorectal cancer by activating Wnt/β-catenin

signaling pathway via targeting EZR

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Running title

ITGB4 promotes CRC by regulating EZR and Wnt/β-catenin signaling pathway

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Keywords: ITGB4 (Integrin Beta 4)；EZR (Ezrin)；Colorectal Cancer；Cell Biology；

Wnt/β-catenin Signaling Pathway

Abstract

Background: Integrin Beta 4 (ITGB4), a member of the integrin family, was found to be abnormally highly expressed in colorectal cancer tissues and serum in our previous research, and it was associated with clinicopathological types and overall survival. This study further explores the potential mechanisms of ITGB4 in the occurrence and development of colorectal cancer, seeks downstream target genes and signaling pathways, and provides new insights for precision treatment of colorectal cancer.

Methods: Through bioinformatics analysis, it was verified that ITGB4 and EZR are highly expressed in tumor tissues of CRC patients and are associated with poor patient prognosis. The effects of ITGB4 on the proliferation, migration, invasion, and apoptosis of CRC cells were validated using CCK-8, wound healing assay, Transwell migration, and invasion assays. A nude mouse tumor formation experiment was conducted to validate the tumor-promoting effect of ITGB4 in vivo. Transcriptome sequencing was performed in SW480 cells with ITGB4 knockdown, and potential downstream targets and signaling pathways of ITGB4 were screened using KEGG enrichment analysis and bioinformatics analysis. The interaction between ITGB4 and downstream target genes was further demonstrated by immunofluorescence co-staining and co-immunoprecipitation. Key proteins in the downstream signaling pathway (β-catenin, c-Myc, and cyclinD1) were detected by Western blot to clarify the potential signaling pathway through which ITGB4 functions in CRC. Rescue experiments were conducted to validate the role of ITGB4 and its downstream target genes in the proliferation, migration, and invasion of colorectal cancer.

Results:ITGB4 is highly expressed in CRC tissues and cells. In vitro, downregulation of ITGB4 can inhibit the proliferation, migration, and invasion of CRC cells and promote apoptosis. In vivo, ITGB4 contributes to the growth of CRC tumor tissues and regulates the tumorigenic properties such as proliferation and invasion of CRC cells. Additionally, EZR has been preliminarily identified as a key downstream target of ITGB4, as the effects of ITGB4 knockdown on the proliferation, migration, and invasion of CRC cells can be rescued by overexpressing EZR. We also demonstrated that the ITGB4/EZR axis promotes the occurrence and development of CRC by activating the Wnt/β-catenin signaling pathway and regulating various biological functions of CRC cells.

Conclusions:ITGB4 targets and regulates EZR, and by activating the Wnt/β-catenin signaling pathway, it affects the proliferation, migration, and invasion of CRC, suggesting that ITGB4 may become a potential biomarker and therapeutic target.

Introduction

Colorectal cancer (CRC) is one of the most common intestinal tumors worldwide. It ranks third in the incidence of all malignant tumors globally and is the second leading cause of cancer-related deaths [1]. Currently, the treatment for colorectal cancer often involves a combination of surgery, radiotherapy, and chemotherapy, but the efficacy is limited[2-3]. Therefore, the search for new therapeutic targets to inhibit the proliferation, invasion, and migration of colorectal cancer cells has become a research focus in recent years. With the establishment of public biological databases for colorectal cancer and the development of bioinformatics, multiple studies have shown that gene

mutations play a crucial role in the occurrence and development of colorectal cancer[4].

In-depth research on abnormal genes, understanding the mechanisms of occurrence

and development of colorectal cancer, and identifying potential biomarkers and

therapeutic targets are vital for the early diagnosis and precise treatment of colorectal

cancer.

Previously, supported by a national-level project from the Ministry of Science and

Technology, our research group has utilized internationally leading mass cytometry

(CyTOF) technology, gene chip, and protein chip technology to screen out a gene of

significant value in the diagnosis and treatment of colorectal cancer—ITGB4. This

achievement has been granted a national invention patent (Patent Number: ZL 2017 1

1148747.1) [5].Integrin β4 (integrin beta 4, ITGB4) is a member of the integrin family

and is primarily expressed on the basal membrane side of epithelial cells.Some studies

have shown that ITGB4 is highly expressed in breast cancer, bladder cancer, cervical

cancer, head and neck cancer, lung cancer, and pancreatic cancer, and is associated

with tumor invasion and poor prognosis [7-8]. Our team's previous research has found

that ITGB4 is abnormally highly expressed in colorectal cancer tissues and serum,

and it is related to clinical pathological types and overall survival. After annotating the

ITGB4 co-expressed genes, it was found that multiple signaling pathways, including

cell growth, cell migration, and apoptosis signaling, may be involved in the regulation

of ITGB4 on the progression of colon cancer [6,16]. However, its mechanism of action

in colorectal cancer is not yet clear.Therefore, the impact of ITGB4 on tumor

initiation and the development of colorectal cancer (CRC), as well as the downstream

target genes of ITGB4 and the mechanisms of interaction, and the exploration of

signaling pathways are the focus of this study.

In this study, we investigated the effects of ITGB4 knockdown on the proliferation,

invasion, and apoptosis of human colorectal cancer (CRC) cells in vitro. We also

observed the impact of ITGB4 on tumor malignant phenotypes in vivo. Through

RNA-seq detection and bioinformatics analysis, we first confirmed the downstream

target gene EZR of ITGB4 in CRC, which is highly expressed in CRC tumor tissues

and has an interacting relationship with ITGB4. ITGB4 directly targets and promotes

the expression level of EZR and plays a carcinogenic role in the pathogenesis of

colorectal cancer by regulating EZR and activating the Wnt/β-catenin signaling

pathway. These findings suggest that the ITGB4/EZR axis is an important regulatory

factor in the development of CRC and provides a potential target for precision therapy

in CRC.

Materials and Methods

Cell Culture

The human colorectal cancer cell lines SW480 and HCT116 were purchased from

ATCC. SW480 and HCT116 cells were cultured in DMEM (Gibco) medium

supplemented with 10% fetal bovine serum under a fully humidified environment at a

constant temperature of 37°C and 5% CO_2. The cells used in the experiments were all

in the logarithmic growth phase with good viability.

siRNAs, shRNAs, Transfections and Stable cell lines

The logarithmically growing SW480 cells and HCT116 cells in good condition were

seeded into a 6-well plate at a density of 1×105 cells/ml. Transfection was performed

according to Lipofectamine 3000 (Invitrogen, Carlsbad, CA, USA) when the cell

confluence reached 80-90% in a cell culture flask or dish. ITGB4 siRNA and negative

control (GenePharma Co., Ltd., Shanghai, China) were transfected into SW480 and

HCT116 cells, while an EZR overexpression plasmid and negative control

(GenePharma) were transfected into SW480 and HCT116 cells, respectively. At the

same time, ITGB4 shRNA and negative control (shNC; GenePharma) were

transfected into SW480 cells to construct a stable transfection cell line. After

transfecting shITGB4 and shNC into the SW480 cell line for 48 hours, the culture

medium was replaced with medium containing the optimal concentration of 600

µg/ml neomycin (without other antibiotics). The culture medium was replaced every

2-3 days based on cell growth and medium color. When a significant number of cells

died, the concentration of neomycin was reduced to 300 µg/ml, and the selection was

continued for 10 days. Resistant cell clones in clusters became visible, and the drug

was then withdrawn for routine culture. The knockdown efficiency was verified.

RNA extraction and qRT-PCR

Total cellular RNA is extracted according to the instructions of RNA-Easy (Vazyme

Biotech Co., Ltd., Nanjing, China). RNA is reverse-transcribed into cDNA using the

PrimeScript RT Reagent Kit (Takara, Beijing, China) strictly following the

manufacturer's instructions, followed by PCR amplification. The amplification

program is: 95°C for 5 minutes; 95°C for 10 seconds, 60°C for 30 seconds, for a total

of 40 cycles. All experiments are conducted using the 4800 Real-Time Quantitative

PCR System.The sequence of primers are detailed in Supplementary Table 1.

Western blot analysis and antibodies

Proteins were digested and extracted using RIPA lysis buffer (Solarbio) and protease

inhibitor PMSF (Solarbio) in a ratio of 100:1. The proteins were separated

electrophoretically on a 10% SDS polyacrylamide gel (Bio-Rad Laboratories Inc,

Hercules, CA, USA) and transferred to a polyvinylidene fluoride membrane (Merck

Millipore, Billerica, MA, USA). The antibodies used in this study include: ITGB4

antibody (diluted 1:1000; Abcam, Cambridge, MA, USA; Catalog number: ab261778),

β-actin antibody (diluted 1:1500; ZSBG-Bio; Catalog number: TA-09), EZR antibody

(diluted 1:1000; Proteintech, Wuhan, Hubei; Catalog number: 26056-1-AP),

β-Catenin antibody (diluted 1:1000; Proteintech, Wuhan, Hubei; Catalog number:

51067-2-AP), c-Myc antibody (diluted 1:1000; Proteintech, Wuhan, Hubei; Catalog

number: 10828-1-AP), and Cyclin D1 antibody (diluted 1:500; Proteintech, Wuhan,

Hubei; Catalog number: 60186-1-Ig). The immune-reactive protein bands were

detected using the Odyssey scanning system (LI-COR Biosciences, Lincoln, NE,

USA). Quantitative analysis of the obtained images was performed using ImageJ

image analysis software. All samples were tested in triplicate.

Cell proliferation assay

151 The CCK-8 proliferation assay involved seeding cells into a 96-well plate at a density

152 of 1×10^3 cells per well and culturing them in complete medium containing 10% fetal

153 bovine serum. At 24, 48, 72, and 96 hours after cultivation, 10 μl of Cell Counting

Kit-8 (CCK-8; Dojindo, Tokyo, Japan) reagent was added to each well. The plate was then incubated in a cell culture incubator for 2 hours. The absorbance at 450 nm for each well was measured using a Promega GloMax luminescent detector (Promega, Madison, WI, USA).

The clonogenic assay involved seeding cells from each group into a 6-well plate at a density of 500 cells per well. The culture medium was replaced every three days, and the cells were cultured for 10-14 days. After the incubation period, the cells were washed twice with PBS, fixed with 4% paraformaldehyde for 30 minutes, and stained with 0.1% crystal violet for 20 minutes. The number of clones with more than 50 cells was counted under a microscope.

Cell migration assay

The wound healing assay was conducted by seeding cells from each group evenly into a 6-well plate and culturing them in complete medium containing 10% fetal bovine serum until the cell confluence approached 100%. A straight line wound was created in the bottom of each well using the tip of a 200 µl pipette, mimicking a wound. The cells were then washed twice with PBS to remove any debris, and the culture was continued with serum-free medium. Images of each well were taken at 0 hours and 48 hours after the scratch was made. The migration rate was calculated as the ratio of the gap width measured at 48 hours to the gap width measured at 0 hours.

The Transwell migration assay involves resuspending the cells from each group in serum-free medium and then seeding 200 µl of the cell suspension, containing 1×10^5 cells, into the upper chamber (Corning Incorporated, Corning, NY, USA). The lower

chamber is filled with 700 µl of complete medium containing 10% fetal bovine serum

to induce cell migration downward. After incubating in the incubator for 48 hours, the

chamber was removed, washed twice with PBS, and then immersed in a well

containing 700 µl of pre-cooled 4% paraformaldehyde for 30 minutes of fixation at

room temperature. The chamber was then transferred to a well with 700 µl of 0.1%

crystal violet staining solution and stained for 20 minutes at room temperature. The

excess crystal violet was cleaned again with PBS. Five visual fields were randomly

selected for photography, and the stained cells were counted using ImageJ software

(National Institutes of Health, Bethesda, MD, USA).

Cell invasion assay

The Transwell invasion assay involves resuspending the cells from each group in

serum-free medium, then adding 100 µl of the cell suspension containing 1×10^5 cells

to the upper chamber. The lower chamber is filled with 700 µl of complete medium

containing 10% fetal bovine serum to induce cell invasion downward. The remaining

process and conditions are the same as those in the Transwell migration assay.

Cell apoptosis assay

The apoptosis of cells was detected using the Annexin V and PI double staining

method. After 48 hours of transfection, the cells from each group were stained

according to the instructions of the Annexin V9-FITC/PI Apoptosis Assay Kit

(NeoBioscience, Shenzhen, China). Flow cytometry (BD Biosciences, San Jose, CA,

USA) was used to analyze the apoptosis, and the percentage of apoptotic cells was

calculated using FlowJo software.

Animal studies

Cells in the logarithmic growth phase from the transfection group (shITGB4) and the control group (shNC) were digested with 0.25% trypsin to prepare a single-cell suspension. The cell concentration was adjusted to 1×107/ml using serum-free DMEM medium. Male nude mice, 5 weeks old, were also divided into a transfection group and a control group, with 6 mice in each group. The cells from both groups were inoculated subcutaneously into the nude mice at a dose of 0.2 ml per mouse. Tumor formation was observed 3 days later, and tumor size was monitored every 3 days. Tumor formation was considered to have occurred when the subcutaneous tumor nodules reached 1000 mm3. The long and short diameters of the tumors were measured, and a tumor growth curve was plotted. Two weeks later, all animals were euthanized by cervical dislocation, and the tumor weights were measured. The volume of the transplanted tumors was calculated using the following formula: Tumor volume (V) = (long diameter × short diameter2) / 2.

RNA sequencing (RNA-seq)

The siRNA-ITGB4 and siRNA-NC were transfected into SW480 cells, and total RNA was extracted 24 hours later. The construction of the RNA library and sequencing analysis were outsourced to Novogene Technology Co., Ltd. The Illumina NovaSeq 6000 platform was used to test 6 groups of samples (siNC×3, siITGB4×3). The output data from each sample were subjected to quality control and filtering to obtain high-quality data. The high-quality data were aligned to the reference genome using the HISAT software, and the expression levels of genes or transcripts in the samples

were quantitatively analyzed. Differential expression analysis was performed using the DESeq2 software, and genes with a log2|Fold Change| > 1.0 and P < 0.05 were defined as differentially expressed genes.

Immunohistochemistry (IHC)

Tissues from nude mice were fixed with 4% paraformaldehyde, followed by paraffin embedding (Shanghai YiYang Instrument Co., Ltd., Shanghai, China), sectioning, and staining. The Rabbit/Mouse two-step detection kit (Beijing ZSBG-Bio Co., Ltd., Beijing, China) was used for immunohistochemical analysis according to the was used for immunohistochemical analysis according to the manufacturer's instructions. Anti-Ki67 (diluted 1:100; Proteintech; Catalog number: 27309-1-AP) antibodies were used for immunohistochemical staining. The staining results were analyzed by using the average optical density (AOD) method.

Co-Immunofluorescent (Co-IF) assay

Place cover glasses in a six-well plate and seed SW480 cells evenly on top. When the cell confluence reaches 20%-30%, gently wash the cells three times with PBS, fix the cells with 4% paraformaldehyde, permeabilize with 0.2% Triton X-100 (Solarbio; Catalog number: T8200), and block with 2% bovine serum albumin (BSA-V; Solarbio; Catalog number: A8020). Incubate the cells with ITGB4 antibody (1:50 SANTA CRUZ, sc-13543) and EZR antibody (1:50 Proteintech, Wuhan, Hubei, 26056-1-AP) overnight at 4°C. Then, incubate with fluorescently labeled secondary antibodies (diluted 1:500; Cy3 anti-rabbit IgG, FITC anti-mouse IgG; Beyotime Biotechnology Co., Shanghai, China) at room temperature in the dark for 1 hour. Stain the cell nuclei

with 4',6'-diamino-2-phenylindole dihydrochloride (DAPI; Beyotime Biotechnology

Co.). Take photographs using a laser scanning confocal microscope (ZEISS,

Oberkochen, Germany).

Co-Immunoprecipitation (Co-IP) assay

Take SW480 cells in the logarithmic growth phase and gently wash them twice with

PBS. Cell lysis and immunoprecipitation (IP) are performed according to the

instructions of the Pierce™ Classic Magnetic IP/Co-IP Kit (Thermo Scientific,

Waltham, USA; Catalog number: 88804). In the lysis buffer, add ITGB4 antibody

(10μg; Proteintech), EZR antibody (10μg; Proteintech), and IgG antibody (10 μg;

Proteintech) respectively, and incubate at room temperature for 2 hours. Then, add the

magnetic beads to the lysate and rotate continuously for 1 hour to ensure thorough

mixing of the magnetic beads with the lysate. After that, use a magnetic stand to

collect the magnetic beads, wash the beads with the elution buffer, and add

neutralization buffer to adjust the pH to neutral. The obtained protein samples are then

subjected to Western blot analysis.

Bioinformatics analysis

The data on the mRNA expression of ITGB4 in the adjacent and cancerous tissues of

CRC patients comes from the TCGA (https://www.aclbi.com/static/index.html#/tcga)

and GEO (https://www.aclbi.com/static/index.html#/geo) databases. The

Kaplan-Meier (https://kmplot.com/analysis/) online website was used to analyze the

impact of gene expression levels on the prognosis of CRC patients. The gene

expression levels in colorectal cancer and adjacent normal tissues were analyzed in

GEPIA2 (http://gepia2.cancer-pku.cn/#index). The subcellular gene localization

analysis was obtained from the GeneCards (https://www.genecards.org/) website.

Statistical analysis

In this study, each experimental group was subjected to three independent replicate

experiments. Results of normally distributed data are expressed as mean ± standard

deviation, while data that is not normally distributed are represented by median and

interquartile range. Statistical analyses were conducted using GraphPad Prism 8.0

(GraphPad Software, La Jolla, CA, USA) and SPSS 21.0 (IBM, Armonk, NY, USA).

Statistical methods such as t-test, one-way ANOVA, and two-way ANOVA were

employed. A P-value of less than 0.05 was considered statistically significant,

indicating that the difference was statistically meaningful.

Results

ITGB4 is upregulated in colorectal cancer patients and is associated with poor

prognosis.

To validate the expression of ITGB4 in CRC tissues, we analyzed the expression of

ITGB4 in colorectal cancer tissues and adjacent normal tissues using the TCGA and

GEPIA2 databases. The results showed that the expression level of ITGB4 in cancer

tissues was higher than that in adjacent normal tissues (Figure 1 A-C). Kaplan-Meier

survival analysis revealed that patients with high ITGB4 expression had a poorer

overall survival compared to those with low ITGB4 expression in colorectal cancer

(Figure 1 D). This aligns with the previous research findings from our team, which

indicated that ITGB4 is highly expressed in the serum and tissues of CRC patients,

and that ITGB4 is associated with the overall survival of CRC patients. In summary,

ITGB4 is an oncogenic factor in colorectal cancer and is closely associated with poor

prognosis in patients with colorectal cancer. ITGB4 may serve as a potential tumor

marker for CRC patients.

Downregulating ITGB4 inhibits the proliferation, migration, and invasion of

colorectal cancer and promotes apoptosis.

In order to explore the mechanism of action of ITGB4 in CRC, we down-regulated

the expression of ITGB4 in SW480 and HCT116 cells to observe its effect on CRC

cell function. Firstly, four siRNA sequences targeting different sites of ITGB4 were

simultaneously transfected into SW480 cells. The knockdown efficiency at the mRNA

and protein levels was verified using qRT-PCR and Western Blot, respectively.

Among them, the siITGB4-681 sequence showed the most significant knockdown

efficiency, so siITGB4-681 was selected for subsequent experiments (Figure 2 A, B).

Next, after transfecting SW480 and HCT116 cells with siITGB4 and siNC, the

transfection efficiency was verified using qRT-PCR and Western Blot. The results

showed that both the mRNA (Figure 2 C, D) and protein (Figure 2 E, F) expression

levels were significantly reduced in the siITGB4 group. The CCK-8 cell proliferation

assay revealed that the cell proliferation capacity was significantly inhibited after

ITGB4 knockdown (Figure 2 G, H). The plate clone formation assay indicated that

the clone formation ability of the cells was significantly suppressed following ITGB4

knockdown (Figure 2 I, J). Flow cytometry analysis showed that the apoptosis rate in

the ITGB4 knockdown group was significantly higher than that in the control group

(Figure 2 K, L). Additionally, the Transwell migration and invasion assays

demonstrated that ITGB4 knockdown significantly reduced the cell migration and

invasion abilities (Figure 2 M, N). These results suggest that downregulating ITGB4

can inhibit the proliferation, migration, and invasion of CRC cells, and promote

apoptosis.

ITGB4 inhibits the growth of colorectal cancer cells in vivo.

To further validate the tumor-promoting role of ITGB4 in vivo in colorectal cancer

(CRC), a stable HCT116 cell line with shITGB4 transfection was constructed, and the

knockdown efficiency of ITGB4 was verified by qRT-PCR and Western blot (Figure 3

A, B). HCT116 cells stably transfected with shRNA-ITGB4 and shRNA (shITGB4

and shNC) were injected subcutaneously into two groups of nude mice to establish

tumor-bearing nude mouse models. The tumor size, weight, and growth curves for

both groups are shown in Figure 3 C-F. The results indicated that compared to the

shNC group, the shITGB4 group had a significantly reduced tumor growth rate,

volume, and weight. Subsequently, qRT-PCR and Western blot experiments were

conducted to verify the knockdown efficiency of ITGB4 in the xenograft tumor

tissues (Figure 3 G, H). Hematoxylin and eosin (HE) staining was used to evaluate the

morphological characteristics of the xenograft tumor tissues, and the results showed

that the cellular morphology and structure were similar to those of CRC tissues

(Figure 3 I). Ki-67 immunohistochemical staining revealed that the proliferation

capacity of cells in the shITGB4 group was significantly inhibited compared to the

shNC group (Figure 3 J, K). These findings collectively indicate that downregulating

ITGB4 can inhibit the growth of CRC in vivo and modulate the tumorigenic

properties such as proliferation and invasion of colon cancer cells.

In colorectal cancer, ITGB4 regulates the expression of EZR

In order to gain a deeper understanding of the potential role of ITGB4 in the

pathogenesis of colorectal cancer (CRC), RNA-seq analysis was performed on

SW480 cells transfected with siNC and siITGB4, respectively，The results showed

that after knockdown of ITGB4, the expression levels of 572 genes were significantly

altered, with 276 genes upregulated and 296 genes downregulated (Figure 4 A, B).

Among the downregulated genes, there were 35 genes with log2|Fold Change| > 1.0

and P < 0.05. Subsequently, this study will screen for genes co-expressed with ITGB4

in the GEPIA database, identify genes upregulated in CRC in the GEPIA2 database,

and overlap these with genes downregulated in association with ITGB4 expression

from the previous RNA-seq data. By conducting an overlap analysis, genes with a

P-value < 0.01 in the transcriptome sequencing results will be selected. Additionally,

by searching the GEPIA2 database and GeneCards website, genes with similar

subcellular localization to ITGB4 will be screened. Ultimately, five candidate target

genes are identified: ITGA6, CXADR, EZR, GPRC5C, and EPHA2 (Figure 4 C).

After knocking out ITGB4 in SW480 and HCT116 cells, the mRNA expression levels

of ITGA6, CXADR, EZR, GPRC5C, and EPHA2 genes were detected using

qRT-PCR. The results showed that the mRNA expression of these five candidate

genes was reduced (Figure 4 D, E). Subsequently, we further analyzed the data using

ChIPBase, the Kaplan-Meier Plotter online website, the GEPIA2 database, and

Pearson correlation analysis. The results indicated that the EZR gene has a closer relationship with ITGB4 in terms of co-expression and subcellular localization, with a more significant difference between cancerous and adjacent non-cancerous tissues. Additionally, in colorectal cancer tissues, the expression of EZR was positively correlated with ITGB4 expression (Figure 5A-C). The Kaplan-Meier survival analysis of the five candidate genes revealed that patients with high expression of EZR had a lower overall survival rate (Figure 5 D), which was consistent with the results for ITGB4. Based on the aforementioned analyses, EZR was identified as a downstream target gene of ITGB4.

ITGB4 interacts with EZR in colorectal cancer, and ITGB4 targets and regulates EZR.

Next, to gain a deeper understanding of the molecular mechanism by which ITGB4 promotes tumor progression in colorectal cancer (CRC), we validated the interaction between ITGB4 and EZR in SW480 cells through Co-IP (Co-immunoprecipitation) and Co-IF (Co-immunofluorescence) experiments. The total protein from SW480 cells was immunoprecipitated with ITGB4 antibody and EZR antibody, and the co-precipitation of ITGB4 and EZR in CRC cells was confirmed by Western blot analysis (Figure 6 A). Subsequently, we further investigated the intracellular localization of ITGB4 and EZR by immunofluorescence staining. Confocal microscopy images revealed that ITGB4 and EZR are co-localized at the cell membrane in CRC cells (Figure 6 B). The STRING online website, PPI (Protein-Protein Interaction) map (Figure 6 C), further indicates that there is a

protein-protein interaction relationship between ITGB4 and EZR. Next, qRT-PCR and

Western blot methods were used to verify the transfection efficiency of the EZR

overexpression plasmid. The results showed that the expression levels of EZR mRNA

(Figure 6 D) and protein (Figure 6 E) in SW480 and HCT116 cells were significantly

increased, indicating that the constructed EZR overexpression plasmid successfully

upregulated the expression of EZR in SW480 and HCT116 cells. To further confirm

the regulation of ITGB4 on EZR expression in CRC cells, qRT-PCR and Western blot

methods were used to verify the changes in EZR mRNA and protein expression levels

after ITGB4 knockdown. The results showed that after ITGB4 knockdown in SW480

cells, the expression levels of EZR mRNA and protein significantly decreased (Figure

6 F, G). These results indicate that ITGB4 and EZR interact in CRC, and ITGB4 can

regulate EZR at both the mRNA and protein levels. Next, siRNA-NC/siRNA-ITGB4

and pcDNA3.1-vector/pcDNA3.1-EZR were separately and co-transfected into

SW480 and HCT116 cells. qRT-PCR was used to detect changes in ITGB4 mRNA

expression in each group. The results showed that the effect of ITGB4 knockdown on

the downregulation of mRNA expression levels could be attenuated by overexpressing

EZR (Figure 6 H). Similarly, Western blot was used to detect changes in ITGB4

protein expression levels in each group, and the results showed that the effect of

ITGB4 knockdown on protein expression could be weakened by overexpressing EZR

(Figure 6 I). These findings suggest that ITGB4 and EZR have an interactive

relationship in CRC cells, and ITGB4 can influence the expression of EZR in CRC

cells.

396   **ITGB4 promotes the occurrence and development of colorectal cancer (CRC) by**

397   **targeting the regulation of EZR to activate the Wnt/β-catenin signaling pathway.**

398   To further elucidate the mechanism by which ITGB4 regulates downstream signaling

399   pathways, KEGG enrichment analysis was performed on the co-expressed genes

400   identified in the siITGB4 transcriptome sequencing. The results indicated that these

401   genes were significantly enriched in the Wnt/β-catenin signaling pathway (Figure 7

402   A). Subsequently, the impact of ITGB4 knockout on the Wnt/β-catenin signaling

403   pathway was verified using the Western blot method. The results indicate that when

404   ITGB4 expression is downregulated in HCT116 cells, the expression levels of key

405   proteins in the Wnt/β-catenin signaling pathway, including β-catenin, as well as its

406   downstream target genes c-Myc and cyclinD1, are also significantly downregulated，

407   The results indicate that ITGB4 can activate the Wnt/β-catenin signaling pathway.

408   Additionally, the overexpression of EZR can rescue the downregulation of key

409   proteins in this pathway caused by ITGB4 knockout (Figure 7 B). These findings

410   demonstrate that EZR is involved in the activation of the Wnt/β-catenin signaling

411   pathway by ITGB4. Next, to further explore the impact of the ITGB4/EZR axis on

412   colorectal cancer (CRC), we conducted cell functional rescue experiments, The results

413   indicate that knockdown of ITGB4 can decrease the proliferation, migration, and

414   invasion capabilities of CRC cells, Overexpression of EZR can enhance the

415   proliferation, migration, and invasion capabilities of CRC cells, Furthermore, the

416   decrease in proliferation, migration, and invasion capabilities of CRC cells induced by

417   ITGB4 knockdown can be restored by upregulating EZR (Figure 7 C-I). In summary,

EZR is a key downstream target gene for ITGB4 in promoting CRC progression, and

ITGB4 exerts its oncogenic effects by targeting the regulation of EZR to activate the

Wnt/β-catenin signaling pathway.

Discussion

This study confirms that ITGB4 is highly expressed in tumor tissues of CRC patients

and is associated with poor patient prognosis. The oncogenic role of ITGB4 in CRC

was further validated through in vitro and in vivo experiments. Moreover, this is the

first report of the downstream target gene EZR of ITGB4, which is regulated by

ITGB4 and affects various biological functions of CRC cells through the activation of

the Wnt/β-catenin signaling pathway, thereby promoting the occurrence and

development of CRC. This research reveals the clinical significance and potential

value of the ITGB4/EZR/Wnt/β-catenin axis in the treatment of CRC.

ITGB4, also known as integrin subunit beta 4, CD104, or GP150, is a

tumor-associated antigen (TAA). Its genomic location is at 17q25.1. It mediates the

connection or interaction between cells and the extracellular matrix, as well as

intercellular interactions, and plays a significant role in signal transduction [9]. Current

studies have found that ITGB4 is abnormally expressed in various cancers, including

lung cancer, pancreatic cancer, gastric cancer, and colorectal cancer, and may be

positively associated with poor prognosis [10-15]. Preliminary results from our research

group also indicate that ITGB4 is highly expressed in CRC tumor tissues and serum,

and ITGB4 is associated with prognostic factors of CRC [16]. These findings

collectively indicate that ITGB4 plays a promotional role in the occurrence and

development of colorectal cancer (CRC). In this study, the results of bioinformatics analysis indicate that the expression level of ITGB4 in CRC cancer tissues is higher than that in adjacent normal tissues, and colorectal cancer patients with high ITGB4 expression have a poorer overall survival. The abnormal expression of ITGB4 in CRC suggests that it may play a regulatory role in the occurrence and development of cancer.

TGB4 is involved in the regulation of various cellular functions, affecting the migration, invasion, proliferation, and survival of tumor cells, as well as regulating angiogenesis, connective tissue proliferation, and immune response in tumor host cells, thereby influencing epithelial-mesenchymal transition (EMT), cancer development, metastasis, and even treatment outcomes [17,18]. Studies have found that ITGB4 is highly expressed in gastric cancer cell lines and gastric cancer tissues, and overexpression of ITGB4 significantly promotes the invasion, migration, and proliferation capabilities of gastric cancer cell lines [19,20]. Another study confirmed that reducing the expression level of ITGB4 inhibits the proliferation, colony formation, and invasiveness of hepatocellular carcinoma cells, while overexpression of ITGB4 promotes the proliferation and invasiveness of hepatocellular carcinoma cells and induces epithelial-to-mesenchymal transition (EMT) [21]. Previous studies using xenograft mouse models have shown that a decrease in ITGB4 protein levels can inhibit the tumorigenicity of the BGC823 gastric cancer cell line [20]. To investigate the mechanism of action of ITGB4 in the progression of colorectal cancer, we conducted a series of in vitro cell functional experiments, Our preliminary

experiments have confirmed that ITGB4 is highly expressed in the HCT116 and

SW480 cell lines, therefore, in this study, we selected these two cell lines to detect the

biological functions of ITGB4. The research results indicate that downregulating the

expression of ITGB4 significantly inhibits the proliferation, migration, and invasion

of CRC cells, and promotes apoptosis. Additionally, in vivo experiments, we observed

that the tumor growth rate, weight, and volume were all reduced in the nude mouse

tumor model with low ITGB4 expression compared to the negative control group. The

expression intensity of Ki67 in tumor tissue is closely related to the proliferation of

tumor cells. In this study, the Ki67 positive expression rate was lower in the group

with low ITGB4 expression, indicating that the absence of ITGB4 inhibits the

proliferation of CRC tumor cells in vivo. This is consistent with previous research

results, collectively indicating that ITGB4 plays a pro-oncogenic role in the

occurrence and development of malignant tumors. In summary, these results

demonstrate that ITGB4 can promote the occurrence and development of CRC tumor

cells, acting as an oncogenic factor, and it holds promise as a novel therapeutic target

for CRC treatment.

To further explore the downstream target genes regulated by ITGB4, RNA-seq and

bioinformatics analysis were used to screen five candidate target genes. Among them,

the EZR gene showed a closer relationship with ITGB4 in terms of co-expression and

subcellular localization. In colorectal cancer tissues, the expression of EZR was

positively correlated with ITGB4, and the difference between cancerous and adjacent

non-cancerous tissues was more pronounced. The EZR (Ezrin) gene is located on

chromosome 6q25.2-q26 and is a key member of the ERM (ezrin-radixin-moesin)

family, being the first to be discovered. It is a transmembrane-cytoskeletal linking

protein, with its main structural body positioned inside the cell membrane. The EZR

protein regulates tumor differentiation, invasion, and metastasis by interacting with

adhesion molecules on the surface of cancer cells [22]. Previous studies have reported

that EZR is significantly upregulated in digestive system malignant tumors, especially

in those with early metastasis and rapid disease progression such as gastric cancer,

colorectal cancer, liver cancer, pancreatic cancer, biliary tract tumors, and esophageal

cancer [23-27]. The expression of EZR protein in tumors is significantly correlated with

the clinical grade, TNM stage, and lymph node metastasis of colorectal cancer. High

expression of EZR is significantly associated with poor prognosis in colorectal and

esophageal cancers. These studies confirm that EZR protein can serve as a potential

biomarker for the clinical diagnosis, recurrence, and prognosis assessment of

gastrointestinal malignant tumors [28]. In this study, bioinformatics analysis indicated

that EZR is highly expressed in CRC tumor tissues, and CRC patients with high EZR

expression have a lower overall survival rate. These findings are consistent with

previous results, suggesting that EZR may play a pro-tumorigenic role in the

occurrence, progression, and metastasis of CRC.

Subsequently, to further demonstrate the interaction between ITGB4 and EZR in

CRC cells, a Co-IP experiment was conducted in this study. The results showed that

ITGB4 and EZR could be co-precipitated in CRC cells. In the Co-IF experiment,

confocal microscopy images revealed that both proteins were co-localized on the cell

membrane in CRC cells. These findings confirm the interaction between ITGB4 and

EZR in CRC cells, a conclusion that has not been previously reported in existing

studies. In addition, bioinformatics analysis predicted an interaction between ITGB4

and EZR proteins, which further supports the aforementioned conclusion. Following

this, qRT-PCR and Western blot methods were used to confirm that ITGB4 can

regulate the expression of EZR at both the translational and transcriptional levels in

CRC cells, further indicating that ITGB4 targets the regulation of EZR expression in

CRC cells.

To further elucidate the mechanism by which ITGB4 regulates EZR to promote CRC

progression, KEGG gene pathway analysis was performed on genes co-expressed

with siITGB4 in transcriptome sequencing. The results indicated that these genes are

enriched in the Wnt/β-catenin signaling pathway. It can be inferred that the oncogenic

role of ITGB4 in colorectal cancer (CRC) may be mediated by targeting the

regulation of EZR and activating the Wnt/β-catenin signaling pathway. Previous

studies have confirmed that the loss of normal cell polarity and adhesion caused by

the activation of the Wnt/β-catenin signaling pathway is a fundamental step in tumor

progression and metastasis and is a driving force for many human cancers,

particularly colorectal cancer, hepatocellular carcinoma, and breast cancer [29]. The

activation of the Wnt/β-catenin signaling pathway involves Wnt signal transduction at

the cell membrane, the stabilization of β-catenin in the cytoplasm, and the activation

of Wnt-related target genes in the nucleus[30]. When β-catenin reaches a certain level

in the cytoplasm, it is transported into the nucleus, where it binds to TCF/LEF

transcription factors, initiating the transcription of downstream target genes such as c-Myc, cyclin D1, Dickkopf-related protein 1, matrix metalloproteinase (MMP)-7, axin 2, and others. This leads to abnormal cell proliferation and resistance to apoptosis, thereby inducing tumor formation[31]. In this study, Western blot analysis was used to validate the effects of ITGB4 knockdown on the proteins β-catenin and its downstream target genes c-Myc and cyclin D1, in order to confirm the activation of the Wnt/β-catenin signaling pathway. Simultaneously, the inhibitory effect of ITGB4 knockdown on the signaling pathway can be rescued by EZR, further demonstrating that EZR can also activate this signaling pathway. The above results indicate that ITGB4 and EZR influence the occurrence and development of colorectal cancer (CRC) by activating the Wnt/β-catenin signaling pathway. Finally, we also conducted functional rescue studies to further validate that ITGB4 affects the proliferation, migration, and invasion capabilities of colorectal cancer (CRC) cells through targeted regulation of EZR. In summary, ITGB4 influences the proliferation, migration, and invasion capabilities of colorectal cancer (CRC) cells by targeting the regulation of EZR and activating the Wnt/β-catenin signaling pathway. This indicates that the ITGB4/EZR/Wnt/β-catenin axis may be involved in the occurrence and development of CRC tumors.

Admittedly, there are certain limitations to our study. Firstly, the expression of EZR was not validated in CRC tumor tissues and adjacent non-tumor tissues. Secondly, the mechanism of action of EZR in CRC requires further in-depth investigation in subsequent studies.

In conclusion, ITGB4 acts as an oncogenic factor in colorectal cancer (CRC). It promotes the proliferation, migration, and invasion of CRC by regulating EZR and activating the Wnt/β-catenin signaling pathway. ITGB4 may potentially serve as a biomarker and therapeutic target for CRC.

Funding

This work was supported by Hebei Provincial Government-funded Provincial Medical Excellent Talent Project (ZF2023025, ZF2024134, ZF2025045, ZF2025048, ZF2025051, LS202208 and LS202212), Hebei Natural Science Foundation (H2022206292, H2024206140), Key R&D Program of Hebei Province (223777103D and 223777113D), Hebei Province County General Hospital Appropriate Health Technology Promotion Project (20220018), Prevention and treatment of geriatric diseases by Hebei Provincial Department of Finance (LNB202202, LNB201809 and LNB201909), Spark Scientific Research Project of the First Hospital of Hebei Medical University (XH202312 and XH201805), Hebei Province Medical Applicable Technology Tracking Project (G2019035) and other projects of Hebei Province (1387 and SGH201501).

CRediT authorship contribution statement

Wang Jing: Conceptualization, Data curation, Formal analysis, Methodology, Validation, Visualization, Writing – original draft, Writing – review & editing. **Yi Si:** Conceptualization, Data curation, Formal analysis, Visualization, Writing – original

draft, Writing – review & editing. **Mingda Xuan:** Conceptualization, Data curation, Formal analysis, Visualization, Writing – original draft, Writing – review & editing. **Shuangshuang Han:** Formal analysis, Visualization, Writing – original draft. **Kunyi Liu:** Visualization, Writing – original draft. **Jiao Jiao:** Data curation, Writing – original draft. **Hongfei Li:** Formal analysis, Writing – original draft. **XiaoYan Men:** Formal analysis, Investigation Writing – original draft. **Weifang Yu:** Conceptualization, Funding acquisition, Project administration, Resources, Supervision, Writing – review & editing. **Ting Liu:** Conceptualization, Funding acquisition, Project administration, Validation, Writing – review & editing. **Jia Wang:** Conceptualization, Funding acquisition, Project administration, Resources, Supervision, Writing – review & editing.

Conflict Of Interest Statement

The authors have no conflicts of interest to declare.

References

1. Bray F, Laversanne M, Sung H, et al. Global cancer statistics 2022: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. CA Cancer J Clin. 2024 May-Jun;74(3):229-263.

2. Zhang Y K, Xu C, et al. Progress in laparoscopic minimally invasive surgery for colorectal cancer [J]. Medical Review, 2021,27 (3): 582-591.

3. Gao Y, Chi P, Lin H M, et al. Prognostic impact of low number of lymph nodes

detected in neoadjuvant chemoradiadiation combined with surgery [J]. Chinese

Journal of Digestive Surgery, 2019,18 (8): 773-779.

4. Lao V V,Grady W M, et al. Epigenetics and Colorectal Cancer[J].Nat Rev

Gastroenterol Hepatol,2011,8(12):686-700.

5. Shuangshuang Han, Xia Jiang, Xiaofeng Sun, et al. Application value of CyTOF 2

mass cytometer technology at single-cell level in human gastric cancer cells.

Experimental Cell Research,2019,384(1): 111568.

6. Jiang X, Wang J, Wang M, et al. ITGB4 as a novel serum diagnosis biomarker and

potential therapeutic target for colorectal cancer. Cancer Med. 2021

Oct;10(19):6823-6834.

7. Zhang W, Zhang B, Vu T, et al. Molecular characterization of pro-metastatic

functions of β4-integrin in colorectal cancer. Oncotarget. 2017 Sep

27;8(54):92333-92345.

8. Zhong F, Lu HP, Chen G, et al. The clinical significance and potential molecular

mechanism of integrin subunit beta 4 in laryngeal squamous cell carcinoma. Pathol

Res Pract. 2020 Feb;216(2):152785.

9. Borradori L, Sonnenberg A, et al. Structure and function of hemidesmosomes: more

than simple adhesion complexes. J Invest Dermatol. 1999 Apr;112(4):411-8.

10. Desgrosellier JS, Cheresh DA, et al. Integrins in cancer: biological implications

and therapeutic opportunities. Nat Rev Cancer. 2010 Jan;10(1):9-22.

11. Boelens MC, van den Berg A, Vogelzang I, et al. Differential expression and

distribution of epithelial adhesion molecules in non-small cell lung cancer and normal

bronchus[J]. J Clin Pathol, 2007, 60:608-614.

12. Chung J, Bachelder RE, Lipscomb EA, et al. Integrin (alpha 6 beta 4) regulation

of eIF-4E activity and VEGF translation: a survival mechanism for carcinoma cells. J

Cell Biol. 2002 Jul 8;158(1):165-174.

13. Damhofer H, Medema JP, Veenstra VL, et al. Assessment of the stromal

contribution to Sonic Hedgehog-dependent pancreatic adenocarcinoma. Mol Oncol.

2013 Dec;7(6):1031-1042.

14. Gan L, Meng J, Xu M, et al. Extracellular matrix protein 1 promotes cell

metastasis and glucose metabolism by inducing integrin β4/FAK/SOX2/HIF-1α

signaling pathway in gastric cancer. Oncogene. 2018 Feb 8;37(6):744-755.

15. Ni H, Dydensborg AB, Herring FE, et al. Upregulation of a functional form of the

beta4 integrin subunit in colorectal cancers correlates with c-Myc expression.

Oncogene. 2005 Oct 13;24(45):6820-9.

16. Li M, Jiang X, Wang G, et al. ITGB4 is a novel prognostic factor in colon cancer.

J Cancer. 2019 Aug 28;10(21):5223-5233.

17. Wang L, Zhang X, Pang N, et al. Glycation of vitronectin inhibits VEGF-induced

angiogenesis by uncoupling VEGF receptor-2-αvβ3 integrin cross-talk. Cell Death

Dis. 2015 Jun 25;6(6):e1796.

18. Xiao T, Takagi J, Coller BS, et al. Structural basis for allostery in integrins and

binding to fibrinogen-mimetic therapeutics. Nature. 2004 Nov 4;432(7013):59-67.

19. Yang ZY, Jiang H, Qu Y, et al. Metallopanstimulin-1 regulates invasion and

migration of gastric cancer cells partially through integrin β4. Carcinogenesis. 2013

Dec;34(12):2851-2860.

20.Hong D, Zhang X, Li R, et al. Deletion of TMEM268 inhibits growth of gastric

cancer cells by down regulating the ITGB4 signaling pathway. Cell Death Differ.

2019 Aug;26(8):1453-1466.

21. Li J, Hao N, Han J, et al. ZKSCAN3 drives tumor metastasis via integrin

β4/FAK/AKT mediated epithelial-melancholy transition in hepatocellular carcinoma.

Cancer Cell Int. 2020 Jun 5;20:216.

22. Bretscher A. Fimbrin is a cytoskeletal protein that cross links F-actin in vitro. Proc

Natl Acad Sci U S A. 1981 Nov;78(11):6849-6853.

23. Lugini L, Lozupone F, Matarrese P, et al. Potent phagocyte activity discriminates

metastatic and primary human malignant melanomas: a key role of Ezrin. Lab Invest.

2003 Nov;83(11):1555-67.

24. Kim C, Shin E, Hong S, et al. Clinical value of Ezrin expression in primary

osteoarthritis. Cancer Res Treat. 2009 Sep;41(3):138-144.

25. Krishnan K, Bruce B, Hewitt S, et al. Ezrin mediates growth and survival in

Ewing's sarcoma through the AKT/mTOR, but not the MAPK, signaling pathway.

Clin Exp Metastasis. 2006;23(3-4):227-36.

26. Zhang Q, Ye Z, Zhang Y, et al. The Expression and Clinical Significance of Ezrin

and MMP-9 in Colorectal Cancer Tissue. Altern Ther Health Med. 2024 Jun

28:AT10725.

27. Yongpeng Diao , Qing Xu, Fei Li. Biological characteristics of Ezrin protein and

its role in colorectal cancer metastasis [J]. Progress in Modern General Surgery in

China, 2009,12:1074-1076.

28. Liang F, Wang Y, Shi L, et al. Association of Ezrin expression with the

progression and prognosis of gastrointestinal cancer: a meta-analysis. Oncotarget.

2017 Oct 4;8(54):93186-93195.

29. Tejeda-Muñoz N, Mei KC, et al. Wnt signaling in cell adhesion, development,

and colon cancer. IUBMB Life. 2024 Jul;76(7):383-396 .

30. Huang P,Yan R, Zhang X, et al. Activating Wnt/β-catenin signaling pathway for

disease therapy: Challenges and opportunities. Pharmacol Ther. 2019;196:79–90.

31. Lin CH, Ji T, Chen CF, et al. Wnt signaling in osteosarcoma. Adv Exp Med Biol.

2014;804:33–45.

Table 1 The primer sequences

基因名	上游引物序列 5'-3'	下游引物序列 5'-3'
ITGB4	GCGACUACACUAUUGGAUUTT	AAUCCAAUAGUGUAGUCGCTT
EZR-1	ACCAATCAATGTCCGAGTTACC	GCCGATAGTCTTTACCACCTGA
β-actin	GAGTCAACGGATTTGGTCGT	CATGGGTGGAATCATATTGGA
EPHA2--1	TGGCTCACACACCCGTATG	GTCGCCAGACATCACGTTG
EPHA2--2	AGAGGCTGAGCGTATCTTCAT	GGTCCGACTCGGCATAGTAGA
EPHA2--3	ACTACGGCACCAACTTCCAG	GTAGAAGCCTTTGCGGGTGA
ITGA6--1	ATGCACGCGGATCGAGTTT	TTCCTGCTTCGTATTAACATGCT
ITGA6--2	GGCGGTGTTATGTCCTGAGTC	AATCGCCCATCACAAAAGCTC
ITGA6--3	CAGTGGAGCCGTGGTTTTG	CCACCGCCACATCATAGCC
CXADR	GTGCTCCTGTGCGGAGTAG	ATGGCAGATAGGCAGTTTCCC
EZR--2	AGCGGCTGATCCCTCAAAG	GGCATCAACTCCAAGCCAAAG
EZR--3	ATGCCCCACGTCTGAGAATC	TCCTGCGGCGCATATACAAC
GPRC5C--1	CCTGTACTACAACCTGTGTGAC	TGAGCACAAACGTGGTGACA
GPRC5C--2	CGTGGGCTATGAGACCATCC	CCGGCCTCTTAGCTGCAAC
GPRC5C--3	AAGAGGCCGGTGTCACCATA	CTCCTTCGGACGGAACTTTGT

Figure 1. ITGB4 is upregulated in colorectal cancer patients and associated with poor prognosis. （A-C）The expression of ITGB4 in colorectal cancer tissues and adjacent normal tissues was analyzed in the TCGA and GEPLA2 databases. **(D)** Kaplan-Meier analysis of ITGB4 expression levels and overall survival in colorectal cancer patients.

(A) **Figure 2. In colorectal cancer cells, knockdown of ITGB4 inhibits the proliferation, migration, and invasion of colorectal cancer cells, and enhances the apoptosis capability.** In SW480 cells, **(A)** the mRNA levels of four siITGB4 sequences were verified using qRT-PCR. **(B)** The protein expression levels of four siITGB4 sequences were verified using Western blot. In SW480 and HCT116 cells, **(C, D)** qRT-PCR was used to verify the knockdown efficiency of siITGB4 at the mRNA level. **(E, F)** Western blot was used to verify the knockdown efficiency of siITGB4 at the protein level. **(G, H)** The CCK-8 assay was used to detect the effect of ITGB4 knockdown on the proliferation of SW480 and HCT116 cells. **(I, J)** The plate colony formation assay was used to detect the effect of ITGB4 knockdown on the cloning ability of SW480 and HCT116 cells. **(K, L)** Flow cytometry was used to detect the effect of ITGB4 knockdown on the apoptosis of SW480 and HCT116 cells. **(M, N)** Transwell migration and Transwell invasion assays were used to detect the effect of ITGB4 knockdown on the migration and invasion abilities of SW480 and HCT116 cells. (Crystal violet staining 200×) *P < 0.05, **P < 0.01, ***P < 0.001.

Figure 3. The effect of ITGB4 on the growth of colorectal cancer in vivo. (A, B) qRT-PCR and Western blot experiments were used to verify the knockdown efficiency

of shITGB4 stable lines in HCT116 cells. **(C)** Nude mouse tumor-beaYONGring

model. **(D)** Tumor growth curve. **(E, F)** Images and weight of xenografted tumors

were analyzed. **(G, H)** Verification of the ITGB4 knockdown efficiency in xenograft

tumor tissues. **(I)** Representative images of tumor tissue sections stained with HE.

Scale bar, 50 μm. **(J，K)** Representative image of Ki67 IHC staining in tumor tissue

sections. Scale bar, 50 μm. Data are shown as means ± SD. **P <0.01, ****P

<0.0001

Figure 4. ITGB4 Target Gene Screening. Transcriptome sequencing results

analysis. **(A)** Heatmap of differentially expressed genes (DEGs) identified by

RNA-seq. **(B)** Number of DEGs identified by RNA-seq.**(C)** Screening of 5 candidate

target genes. **(D, E)** Validation of mRNA levels of the 5 candidate target genes after

ITGB4 knockdown in SW480 and HCT116 cells.

Figure 5. Analysis of candidate genes in GeneCards, ChIPBase online website,

and TCGA, GEPIA2 databases. (A) Subcellular localization of ITGB4 and the 5

candidate target genes on the GeneCards website. **(B)** Expression of ITGB4 and the 5

candidate genes in CRC cancer and adjacent tissue in the TCGA and GEPIA2

databases.**(C)** Co-expression relationship between the 5 candidate genes and ITGB4

on the ChIPBase website. **(D)** Kaplan-Meier survival analysis of ITGB4 and the 5

candidate target genes in colorectal cancer patients.

Figure 6. TGB4 can bind to EZR and affect its protein and mRNA expression. (A)

In SW480 cells, the protein-protein interaction between ITGB4 and EZR was verified

by Co-IP experiment. **(B)** In SW480 cells, the co-localization relationship between

ITGB4 and EZR was verified by Co-IF experiment. **(C)** Protein-protein interaction

map from the STRING online website. **(D, E)** In SW480 and HCT116 cells, the

transfection efficiency of pcDNA3.1-EZR was verified by qRT-PCR and Western

blot, respectively. **(F)** In SW480 cells, the expression of EZR mRNA was detected by

qRT-PCR after ITGB4 knockdown. **(G)** In SW480 cells, the expression of EZR

protein was detected by Western blot after ITGB4 knockdown. After co-transfection

of siITGB4 and pcDNA3.1-EZR in SW480 and HCT116 cells, **(H)** The expression of

ITGB4 mRNA and EZR mRNA in each group was detected by qRT-PCR. **(I)** The

expression of ITGB4 and EZR proteins in each group was detected by Western blot.

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

Figure 7. Oncogenic function of ITGB4 depends on EZR and Wnt/β-catenin

signaling pathway. (A) KEGG enrichment result of the genes coexpressed with

ITGB4 in CRC. **(B)** The expression levels of Wnt/β-catenin signaling pathway related

proteins were detected by Western blot after transient co-transfection of ITGB4

siRNA and EZR overexpression plasmid in HCT116 cells. **(C)** In SW480 and

HCT116 cells, the effect of EZR overexpression on the cell proliferation ability

induced by ITGB4 knockdown was detected by CCK-8 assay. In SW480 and

HCT116 cells, the effect of EZR overexpression on the cell migration ability induced

by ITGB4 knockdown was elucidated by wound healing assay **(D-G)** (200×

magnification) and Transwell migration assay (H, I) (crystal violet staining, 200×

magnification). **(J, K)** In SW480 and HCT116 cells, the effect of EZR overexpression

on the cell invasion ability induced by ITGB4 knockdown was elucidated by

Transwell invasion assay (crystal violet staining, 200× magnification). *P < 0.05, **P

< 0.01, ***P < 0.001.

Figure 1

Figure 2

Figure 3

Figure 4

Figure 5

Figure 6

Figure 7