



OPEN

SUBJECT AREAS:
DRUG DEVELOPMENT
APOPTOSISReceived
27 November 2014Accepted
24 March 2015Published
21 April 2015Correspondence and
requests for materials
should be addressed to
B.C. (bcosta@farm.
unipi.it) or S.R.
(simona.rapposelli@
farm.unipi.it)

Combined inhibition of AKT/mTOR and MDM2 enhances Glioblastoma Multiforme cell apoptosis and differentiation of cancer stem cells

Simona Daniele¹, Barbara Costa¹, Elisa Zappelli¹, Eleonora Da Pozzo¹, Simona Sestito¹, Giulia Nesi¹, Pietro Campiglia², Luciana Marinelli³, Ettore Novellino³, Simona Rapposelli¹ & Claudia Martini¹¹Department of Pharmacy, University of Pisa, Italy, ²Department of Pharmacy, University of Salerno, Italy, ³Department of Pharmacy, University of Naples Federico II, Italy.

The poor prognosis of Glioblastoma Multiforme (GBM) is due to a high resistance to conventional treatments and to the presence of a subpopulation of glioma stem cells (GSCs). Combination therapies targeting survival/self-renewal signals of GBM and GSCs are emerging as useful tools to improve GBM treatment. In this context, the hyperactivated AKT/mammalian target of the rapamycin (AKT/mTOR) and the inhibited wild-type p53 appear to be good candidates. Herein, the interaction between these pathways was investigated, using the novel AKT/mTOR inhibitor FC85 and ISA27, which re-activates p53 functionality by blocking its endogenous inhibitor murine double minute 2 homologue (MDM2). In GBM cells, FC85 efficiently inhibited AKT/mTOR signalling and reactivated p53 functionality, triggering cellular apoptosis. The combined therapy with ISA27 produced a synergic effect on the inhibition of cell viability and on the reactivation of p53 pathway. Most importantly, FC85 and ISA27 blocked proliferation and promoted the differentiation of GSCs. The simultaneous use of these compounds significantly enhanced GSC differentiation/apoptosis. These findings suggest that FC85 actively enhances the downstream p53 signalling and that a combination strategy aimed at inhibiting the AKT/mTOR pathway and re-activating p53 signalling is potentially effective in GBM and in GSCs.

Glioblastomas (GBMs) are one of the most aggressive and deadly forms of human cancer. GBM treatment usually consists of surgical resection followed by radiotherapy combined with the alkylating agent temozolomide (TMZ)¹. Although this therapeutic approach slightly improves the survival rate of GBM patients, a large fraction of these patients suffer from tumour recurrence¹.

Accumulating evidence suggests that tumour relapse may be driven by a component of heterogeneous tumour cells that retain stem cell-like properties, called “cancer stem cells” (CSCs). The potent tumorigenic capacity of glioma CSCs (GSCs), coupled with evidence of radio- and chemo-resistance, suggests that a stem cell-orientated therapy may represent an innovative strategy to reduce tumour recurrence and improve GBM prognosis². Two main strategies are currently exploited to eradicate the heterogeneous population of GBM and GSCs: (a) chemotherapeutic regimens that specifically drive GSCs into cell death, and (b) driving GSCs into differentiation, thereby depleting the tumour reservoir. The latter strategy appears the most promising, considering that differentiated cells are in general more sensitive to chemotherapeutic agents with respect to CSCs³.

Studies on human GBM samples have uncovered that the deregulation of signal transduction pathways is one of the most prominent^{4,5}. The disruption of signal transduction in GBM occurs through over-expression or a gain-of-function mutation of tyrosine-kinase receptors^{6,7}, thus leading, among other events, to constitutive activation of Ras/extracellular signal-regulated kinase (ERK), AKT/mammalian target of rapamycin (mTOR). As a result, AKT is elevated in the majority of examined GBMs^{8,9} with the subsequent amplification of pro-survival signals and blockage of oncosuppressor controls. The inactivation of the oncosuppressor protein p53 is certainly one of the main phenomena that allow GBM cells to escape cell cycle checkpoints. In particular, the intracellular levels of p53 are maintained low due to an excessive stimulation (mediated by AKT constitutive activation¹⁰) of the ubiquitin-ligase murine double minute 2 homologue (MDM2), the predominant natural endogenous inhibitor of the protein p53^{11,12}. In addition to accelerating p53 degradation, MDM2 prevents p53



binding to DNA, blocking its transcriptional activity. As GBM cells typically express p53 with a wild-type amino acid sequence, the re-activation of p53 functionality can be restored through the inhibition of the oncogenic block exerted by the AKT/mTOR pathway, which causes an excessive stimulation of MDM2. In this respect, while agents inhibiting either the AKT/mTOR pathway^{13–15} or the MDM2/p53 interaction^{16–18} have provided some survival benefit in GBM, the effects of a co-therapy have not been deeply investigated to date, either in GBMs or in their stem cells. In acute myeloid leukaemia, the PI3K/mTOR inhibitor PI-103 acts synergistically with the MDM2 inhibitor nutlin-3 to induce apoptosis in a wild-type p53-dependent fashion¹⁹, supporting the aforementioned mechanistic rationale.

In our previous work, a series of 2-oxindole derivatives (OXIDs) have been described²⁰ and demonstrated to act as inhibitors of the AKT/mTOR pathway. Herein, we identified FC85 as a new ligand, useful in establishing the preclinical *proof of concept* for the AKT/mTOR pathway, and whose activity could be amplified by co-treatment with an MDM2 inhibitor. The mechanism of action of FC85 was examined alone or in combination with an already characterized inhibitor of MDM2, ISA27¹⁸, both in GBM cells and in their derived GSCs. In parallel experiments, the oral mTOR inhibitor everolimus^{21,22} and the MDM2 inhibitor nutlin-3^{17,18} were also used as reference compounds. Globally, our findings demonstrated that AKT/mTOR inhibitors actively enhance downstream p53 signalling and that a combination strategy aimed at inhibiting the PI3K/AKT/mTOR pathway and activating p53 signalling is potentially effective in GBMs and in GSCs (Fig. 1a).

Results

Design and Synthesis. Over recent years, new compounds with an indole/oxindole core have been widely investigated as agents able to target the activity of the serine/threonine kinases PDK1 and/or AKT²³. Recently, we synthesized new OXIDs compounds by the combination of a tetrahydroisoquinoline nucleus with the 2-oxindole nucleus throughout a methylenamido moiety, and anchoring the 3-position of oxindole core to different heterocycles (Fig. 1b and c). The new OXIDs²⁴ induced cell cycle arrest and inhibited AKT phosphorylation in non-small cell lung cancer cells (which overexpress the PI3K/AKT/mTOR pathway and show resistance to EGFR inhibitors), suggesting that the OXID nucleus can be used as central core to develop inhibitors of the PI3K/AKT/mTOR pathway. Specifically, we afforded the replacement of the amido moiety of OXIDs (Fig. 1b and c) with its bioisosteric amidosulfonyl group. Sulfonamide is a well-known pharmacophore notorious as key element to confer anticancer properties, among others^{25,26}.

FC85 was obtained as depicted in Figure 1b. Briefly, the 5-amino-2-oxindole 1 reacted with p-toluenesulfonyl chloride to give 4-methyl-N-(2-oxindolin-5-yl)benzenesulfonamide 2. The subsequent Knoevenagel condensation of 2 with the 1H-imidazole-5-carboxaldehyde afforded the target compound as a Z-isomer. In co-treatment experiments, we used the small-molecule MDM2 inhibitor with a spirooxindolepyrrolidine core structure, ISA27, which was synthesized as previously described²⁷.

Effects of FC85 on the AKT/mTOR signalling pathway in U87MG cells. As a representative GBM cell line, we used U87MG cells, which is an appropriate model to study the interaction between the AKT/mTOR and MDM2-p53 pathways because of the following characteristics: i) U87MG cells maintain a wild type status of p53, and ii) U87MG cells are deficient for the tumour suppressor phosphatase and tensin homologue (PTEN), a negative regulator of the PI3K/AKT pathway; moreover, PTEN deficiency leads to MDM2 nuclear accumulation, thus inhibiting p53 functions²⁸.

To assess whether FC85 could effectively inhibit the mTOR/AKT pathway in U87MG cells, the effects of the new compound on AKT

and mTOR activity were examined. FC85, tested at 100 nM, 1 μ M and 10 μ M, significantly inhibited AKT phosphorylation at Ser473 (Suppl. Fig. 1a), as reported for the already published OXIDs²⁴. The new compound reduced also mTOR constitutive phosphorylation at Ser2448 (Suppl. Fig. 1b). These findings demonstrated that FC85 was able to target the AKT/mTOR signalling pathway in U87MG cells.

Effects of FC85 on U87MG cell viability. To examine the effects of FC85 on GBM cell growth/survival, U87MG cells were incubated with different concentrations of the compound for 24 h this new compound showed a dose-dependent inhibitory effect on the growth/survival of U87MG cells, with an IC₅₀ value of 468.9 \pm 48.9 nM (Fig. 2a). Trypan blue exclusion experiments confirmed a concentration-dependent decrease of live cells and an increase of dead cells (Fig. 2b). To assess whether U87MG cells could resume proliferation, cells were treated for 96 h with the compound at 10 μ M. At the end of the treatment period, the culture medium was replaced with fresh medium not containing the drug. As depicted in Figure 2c, the number of viable cells did not significantly increase at either 1 or 3 days of wash-out with respect to control samples, suggesting the inability of cells to recover normal growth.

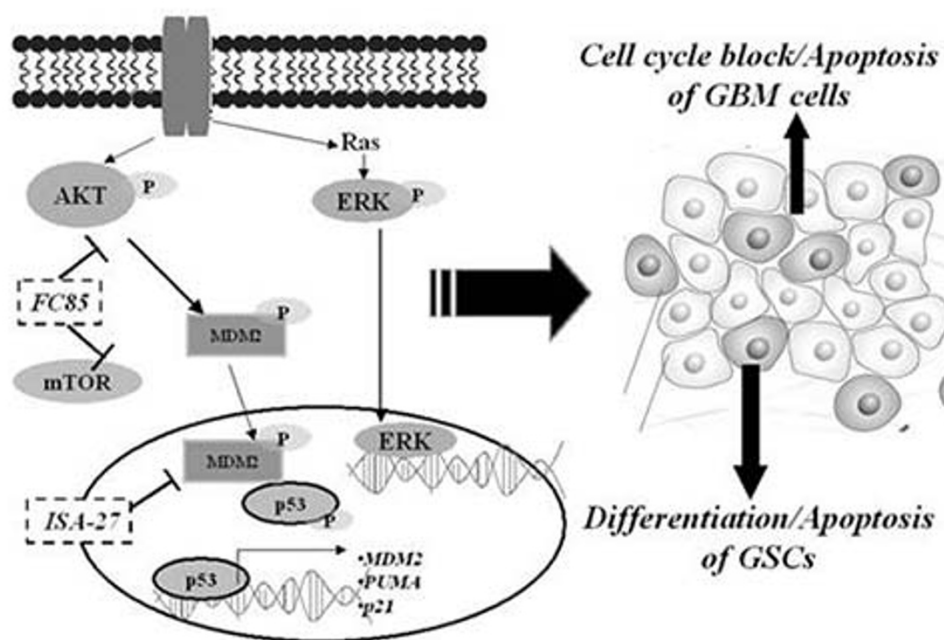
To determine compound toxicity in non-tumour cells, we examined the effects of FC85 on the viability of normal Human Umbilical Vein Endothelial Cells (HUVECs). As shown in Figure 2d, the viability of HUVECs was significantly decreased after a 48 h incubation with FC85 used at 1 μ M and 10 μ M. However, the effects on cell viability were not strictly concentration dependent, and the percentages of cell viability reduction were significantly lower with respect to those observed in U87MG cells, suggesting that the anti-proliferative effect elicited by FC85 was directed preferentially towards tumour cells.

Effect of a combined therapy with an inhibitor of MDM2/p53 complex on U87MG cell viability. Because the inhibition of PI3K/AKT/mTOR signalling can augment p53-mediated apoptosis²⁹, AKT/mTOR may synergize with inhibitors of the MDM2/p53 complex to promote anti-tumoural activity in GBM cells that retain p53 function. To this end, we investigated the effects on U87MG cell viability of combining doses of FC85 with the already characterized MDM2 inhibitor, ISA27¹⁸. The theoretical additive IC_{50,add} values for the two drugs were calculated for two fixed ratios (1:2, 1:5), and the experimental IC_{50,mix} values were determined for the same fixed-ratio combinations in the viability assay (Fig. 3a). Statistical analysis of the data from isobolographic analysis revealed synergistic interactions between FC85 and ISA27 for the two examined fixed-ratio combinations (Suppl. Table S1; Fig. 3a). Similar experiments were performed using the oral mTOR inhibitor everolimus, currently in clinical use for several type of solid tumours^{21,22}, including GBMs (NCT00823459, NCT00831324, NCT00613132, NCT00553150, NCT00387400, NCT00085566, NCT00805961) and the MDM2 inhibitor nutlin-3, whose oral formulation has completed the first early phase clinical trials for both solid cancers and haematological malignancies^{30,31}. Everolimus and nutlin-3 alone inhibited U87MG cell proliferation, yielding an IC₅₀ of 50.0 \pm 2.8 nM and 10.3 \pm 1.1 μ M, respectively (Suppl. Fig. 2a). When combined, the two reference agents showed a synergic reduction of U87MG cell viability for both the examined fixed-ratio combinations (Suppl. Table S2; Suppl. Fig. 2b). Globally, these results confirmed that a combined therapy with an inhibitor of MDM2/p53 complex and an inhibitor of the AKT/mTOR pathway could be a useful anti-proliferative strategy in GBM cells.

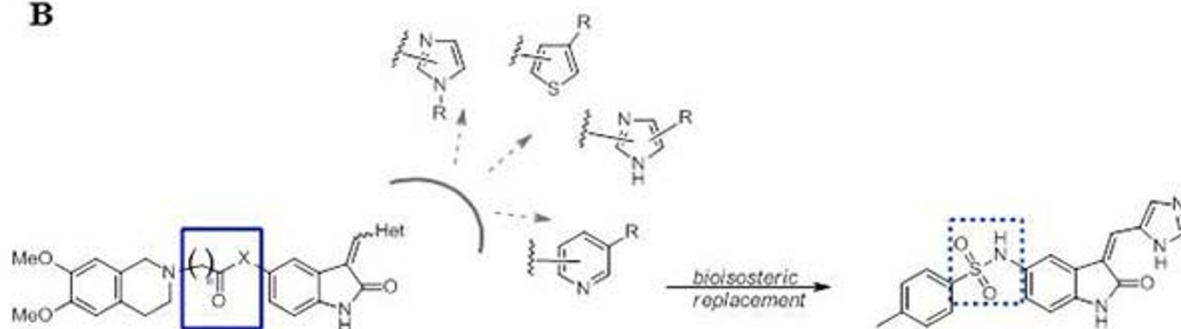
We then examined the effects of cell treatment with FC85, alone or in combination with ISA27, on the reactivation of p53 pathway, assessing accumulation of p53 protein and transcription induction of p53 target genes. The incubation of GBM cells with FC85 alone for 6 h led to a slight but significant increase in p53 protein levels (Fig. 3b and c). As expected, challenging cells with ISA27 caused a



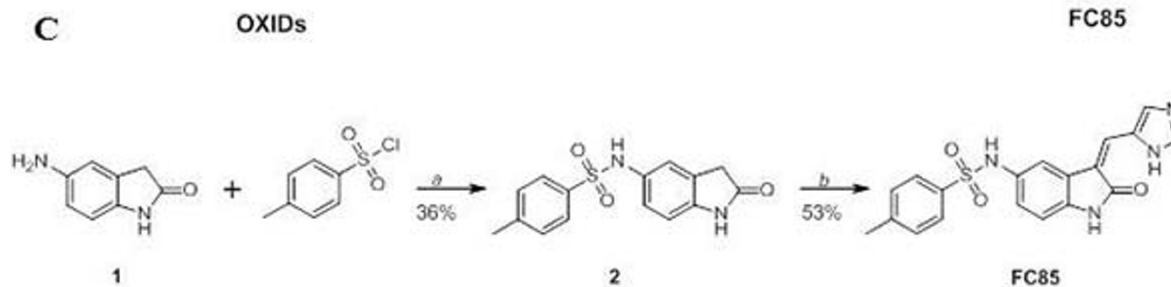
A



B



C



Reagents and Conditions: a: H₂O, rt; b: EtOH, Pirrolidine, 110°C

Figure 1 | (a) Diagram of AKT/mTOR and MDM2/p53 signalling crosstalk in GBM and in GSCs. AKT/mTOR deactivation decreases MDM2 and p53 phosphorylation and increases stable p53, which triggers its downstream targets. Simultaneously, p53 may increase PTEN to suppress AKT activation further. FC85 inhibited both AKT (Ser473) and mTOR (Ser2448) phosphorylation. ISA27 dissociated the MDM2-p53 complex, thus re-activating p53. The combined therapy with FC85+ISA27 more efficiently re-activated the p53 pathway, producing a synergic effect on the inhibition of GBM cell viability; most importantly, the simultaneous inhibition of AKT/mTOR and of the MDM2-p53 complex led to a synergic effect in triggering cellular differentiation/apoptosis of GSC subpopulation. (b) The design of FC85 starting from the general structure of OXIDs. (c) The synthetic procedure for the preparation of FC85.

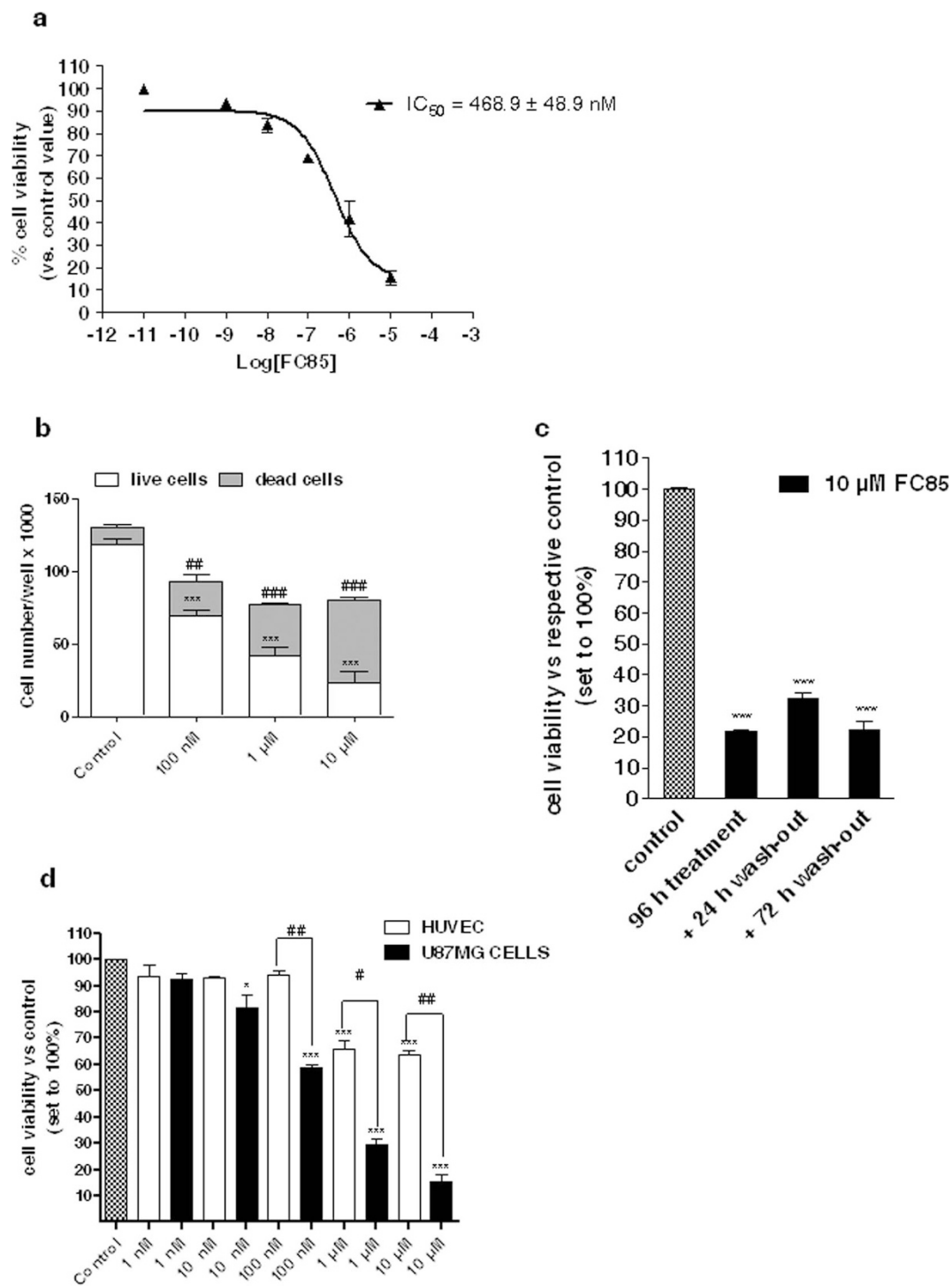


Figure 2 | Effect of FC85 on U87MG and HUVEC cell viability. (a) U87MG cells were treated in complete medium with the indicated FC85 concentrations for 24 h. At the end of treatment, cell viability was measured using the MTS assay. The data are expressed as a percentage with respect to that of untreated cells (control), which was set to 100%, and are the mean values \pm SEM of three independent experiments, each performed in duplicate. **(b)** U87MG cells were treated as in (a); live and dead cells were then estimated using the trypan blue exclusion test. The data are expressed as the cell number per well and are the mean values \pm SEM of two independent experiments, each performed in triplicate. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: *** $p < 0.001$ vs. control live cells; ## $p < 0.01$, ### $p < 0.001$ vs. control dead cells. **(c)** U87MG cells were treated with 10 μ M FC85 for 24 h or 96 h, and then, the medium was replaced with drug-free fresh medium for another 24 h or 72 h. At the end of the treatment period, cell viability was measured using the MTS assay. The data are expressed as a percentage with respect to that of untreated cells (control), which was set to 100%, and are the mean values \pm SEM of three independent experiments, each performed in duplicate. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: *** $p < 0.001$ vs. control. **(d)** U87MG cells (black bars) or HUVEC (white bars) cells were treated with different FC85 concentrations for 48 h. Cell viability was measured using the MTS assay. The data are expressed as a percentage with respect to that of untreated cells (control), which was set to 100%, and are the mean values \pm SEM of three independent experiments, each performed in duplicate. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: * $p < 0.05$, *** $p < 0.001$ vs. respective control; # $p < 0.05$, ## $p < 0.01$ vs. U87MG cells.

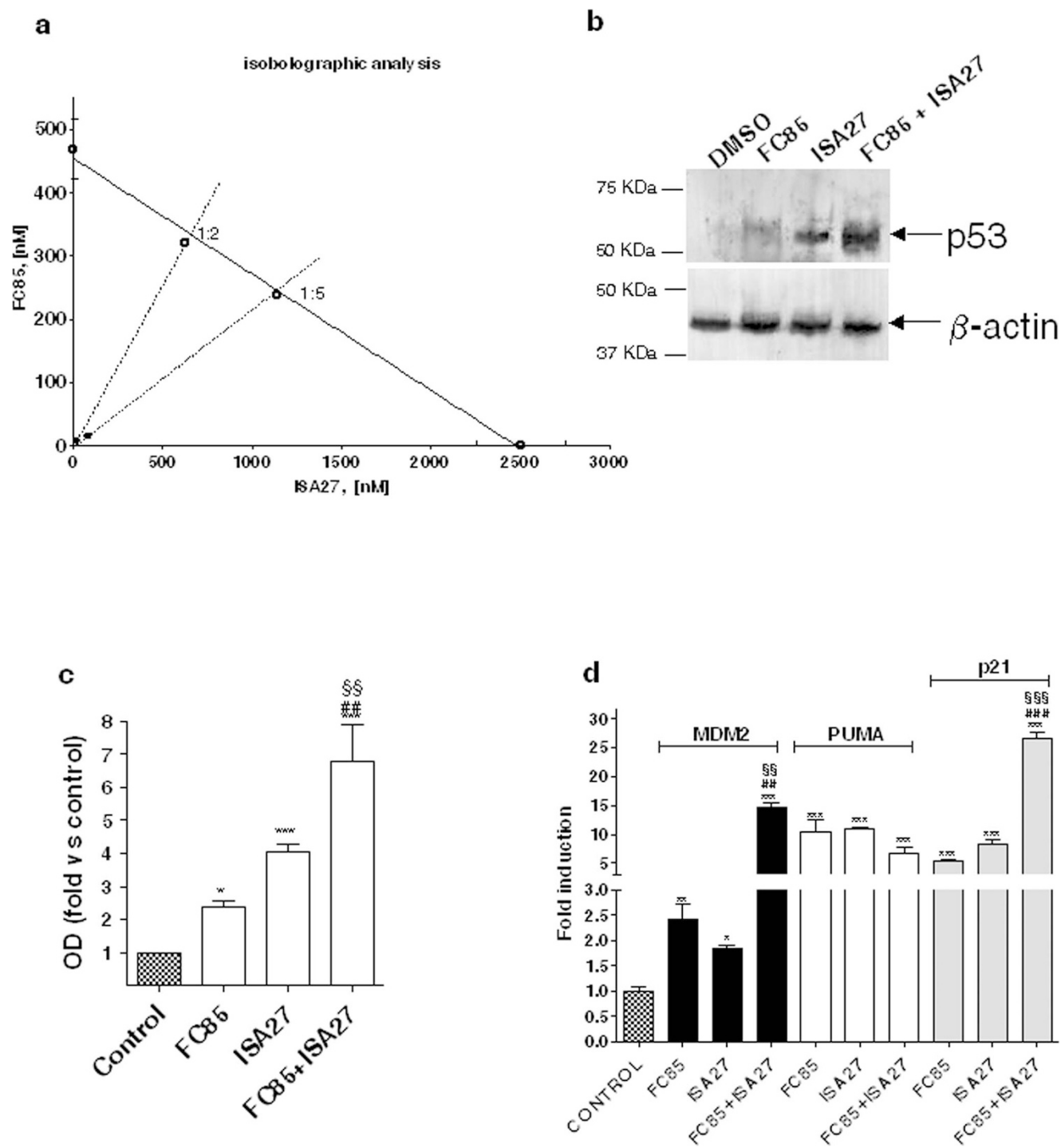


Figure 3 | Synergistic effect of FC85 and ISA27 on the survival/growth of U87MG cells and on the reactivation of p53 pathway. (a) Isobologram 2-D showing the interactions between FC85 and ISA27 in MTS viability tests performed in U87MG cells treated for 24 h with FC85 and/or ISA27.

The IC_{50} values for FC85 and ISA27 are shown on the X- and Y-axis, respectively. The open points (\circ) on the additivity line depict the theoretical $IC_{50,add}$ values for total dose expressed as the proportion of FC85 and ISA27 that produced a 50% effect. The solid points (\bullet) depict the experimental $IC_{50,mix}$ values for total dose expressed as the proportion of FC85 and ISA27 that produced a 50% effect. **(b)** U87MG cells were treated for 6 h with DMSO (control), 500 nM FC85 or 2.5 μ M ISA27, alone or in combination. Lysates were subjected to western blot analysis using an antibody to p53. One representative Western blot is presented **(b)** for each cell treatment. β -actin was used as the loading control. The bar graph **(c)** shows the quantitative analysis of the Western blots, performed using ImageJ. The data are expressed as the percentage of optical density of the immunoreactive band relative to that of the control, set to 100%, and are the mean values \pm SEM of three different experiments. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: * $p < 0.05$, *** $p < 0.001$ vs. control; ## $p < 0.01$ vs. FC85 alone; §§ $p < 0.01$ vs. ISA27 alone. Full-length blots are presented in the Supplementary Information section titled "Full-length blots relative to the cropped images showed in the main Figures". **(d)** U87MG cells were treated as in **b**. The relative mRNA quantification of p53 target genes (PUMA, p21 and MDM2) was performed by real-time RT-PCR as describe in the Methods section. The data are the mean values \pm SEM of three different experiments, each performed in duplicate. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: *** $p < 0.001$ vs. control; ## $p < 0.01$, ### $p < 0.001$ vs. FC85 alone; §§ $p < 0.01$, §§§ $p < 0.001$ vs. ISA27 alone.



higher accumulation of p53. When cells were treated with FC85 and ISA27, a significant enhancement of p53 protein accumulation with respect to cells treated with FC85 or ISA27 alone was observed (Fig. 3b and c). In line with these data, short-term (6 h) treatment of U87MG cells with FC85 or ISA27 led to a significant increase in the mRNA levels of certain p53 target genes (Fig. 3d): p21, a cell cycle inhibitor; PUMA, a gene product required for p53-controlled intrinsic apoptosis pathway; and MDM2, physiological inhibitor of p53, and its main transcriptional target. These results suggested that p53 stabilization in FC85-treated GBM cells led to an increase in MDM2, PUMA and p21 mRNA levels in a manner that was consistent with the activation of the p53 pathway. Moreover, a significant enhancement of the transcription of p53 target genes was observed in FC85-ISA27 co-treated cells with respect to single agent-treated cells (Fig. 3d).

In parallel experiments, neither nutlin-3 (10 μ M) nor everolimus (50 nM) alone induced a significant accumulation of p53 protein in short-term (6 h) treatment (Suppl. Fig. 3a and b). These data are consistent with those previously reported for nutlin-3¹⁸. When combined, the reference agents produced a significant p53 accumulation after 6 h of treatment (Suppl. Fig. 3a and b).

Real time RT-PCR experiments showed that nutlin-3 did not induce any significant increase in p53 target gene products after 6 h of treatment (Suppl. Fig. 3c), according to published data¹⁸. Similar results were obtained with everolimus (Suppl. Fig. 3c). When the two drugs were used together, a significant increase in MDM2 mRNA was noticed (Suppl. Fig. 3c). These data are consistent with those obtained in western blotting analysis and suggest that the combined therapy could reactivate p53 function with increased efficacy compared with single therapy.

To examine whether the p53 function was effectively reactivated after a prolonged exposure time, U87MG cells were incubated with everolimus and/or nutlin-3 for 24 h. Both agents caused a significant induction of MDM2 and p21 mRNA levels (Suppl. Fig. 3d). Moreover, a synergistic and significant induction of PUMA mRNA level was noticed when the two drugs were combined (Suppl. Fig. 3d). Globally, these results demonstrate that nutlin-3 and everolimus caused a slower re-activation kinetics of p53 function with respect to FC85 and ISA27.

Effect of FC85, ISA27 and of their combined treatment on the induction of apoptosis and cell cycle block. Challenging U87MG cells with FC85 (500 nM) induced a significant phosphatidylserine externalization, both in the absence (early apoptosis) or presence of 7-amino-actinomycin binding to DNA (late apoptosis/death; Fig. 4a and b). These data are consistent with the observed increase of PUMA mRNA level (Fig. 3d). Similar results were observed with the MDM2 inhibitor ISA27 (Fig. 4a and b). When the two drugs were combined together, a significant enhancement in the percentage of cells in late apoptosis/death was detected, with respect to cells treated with ISA27 or FC85 alone (Fig. 4a and b). These findings suggest that the combined therapy may accelerate apoptosis induction in U87MG cells.

In contrast, everolimus or nutlin-3 did not induced a significant level of apoptosis in U87MG cells within 24 h of treatment (Suppl. Fig. 4), consistent with previously published data^{17,18,32,33}. However, the co-treatment induced a slight but significant induction of apoptosis (Suppl. Fig. 4), suggesting that everolimus could accelerate the induction of apoptosis elicited by nutlin-3 in more prolonged treatment^{17,18}. These data are consistent with those observed in real-time RT-PCR experiments: after 24 h of incubation, the levels of PUMA mRNA, a p53-target gene product mainly involved in cellular apoptosis, were indeed significantly higher only when nutlin-3 and everolimus were used in combination.

Cell cycle analysis demonstrated that challenging U87MG cells with FC85, as well as with ISA27, for 24 h arrested cell-cycle

progression in the G0/G1-phase (Fig. 4c and d). U87MG incubation with both FC85 and ISA27 was able to induce a significantly higher blockage in the G0-G1 phase compared with single-compound treated cells (Fig. 4c and d). These results suggest that cell cycle arrest may have been a contributing factor in the observed increased sensitivity of GBM cells to the combined therapy.

Effects of FC85, ISA27 and of their combined treatment on GSC viability. A hyper activation of the AKT/mTOR pathway has been reported to play a pivotal role in GBM proliferation as well as in the self-renewal and propagation of GSCs. On this basis, we evaluated the effects of FC85 on GSCs, isolated from U87MG cells as previously reported³⁴. As depicted in Figure 5a, when GSCs were incubated with this new compound (1 μ M or 10 μ M), a significant inhibition of cell proliferation occurred starting from four days of treatment. Similar results were obtained using ISA27 (Fig. 5b). A dose-response curve of FC85 and ISA27 was then performed after seven days of treatment: the two compounds were able to induce a concentration-dependent inhibition of GSC proliferation, with IC₅₀ values of 104 \pm 12 nM and 540 \pm 68 nM, respectively (Fig. 5c).

In parallel experiments, nutlin-3 reduced GSC proliferation starting from four days of incubation, yielding an IC₅₀ value of 18.5 \pm 2.1 μ M after seven days of incubation (Suppl. Fig. 5b and c). Everolimus exhibited a high ability in reducing GSC proliferation starting from 24 h of cell treatment and showing an IC₅₀ value of 15.0 \pm 1.2 nM (Suppl. Fig. 5a and c).

The effects of a combined administration of FC85 and ISA27 were then investigated in GSCs. Isobolographic analysis revealed a marked synergic effect on the reduction of GSC proliferation, when the two compounds were used together (Suppl. Table S3; Fig. 5d), suggesting that a combined therapy with an inhibitor of the MDM2/p53 complex and an inhibitor of the AKT/mTOR pathway can be useful in GSC-orientated therapy. Similar synergistic interactions were confirmed also using everolimus and nutlin-3 (Suppl. Fig. 5d; Suppl. Table S4).

Next, we assessed whether FC85 and/or ISA27-treated cells could resume proliferation after drug removal. After GSC challenging with FC85 or ISA27, and a wash-out period of seven and fourteen days, the percentages of proliferating/viable cells did not significantly increase, suggesting an overall inability to recover normal growth (Fig. 5e). These effects were particularly evident when the two compounds were used simultaneously (Fig. 5e).

Effects of FC85, ISA27 and of their combined treatment on the induction of GSC apoptosis. We then investigated whether the reduction of GSC proliferation elicited by the two compounds was associated with apoptosis. After seven days of GSC treatment, both FC85 and ISA27 induced a significant phosphatidylserine externalization, both in the absence (early apoptosis) or in the presence of 7-amino-actinomycin 11 binding to DNA (late apoptosis/death; Fig. 6a and b). The simultaneous incubation of GSCs with the two compounds induced both early and late apoptosis; the percentage of late apoptosis-death was significantly higher with respect to those observed with the two compounds alone (Fig. 6a and b). Of note, whereas nutlin-3 alone did not show any significant effects on GSC apoptosis, everolimus induced slight but significant early apoptosis after seven days of treatment (Suppl. Fig. 6). When used together, the two reference drugs caused a strong induction of early apoptosis, with significantly higher effects with respect to those obtained in single agent-treated GSCs (Suppl. Fig. 6). These results confirmed that the chosen combined therapy could accelerate the induction of GSC apoptosis.

Effects of FC85, ISA27 and of their combined treatment on GSC morphology and differentiation. The effects of FC85 and ISA27 on GSC morphology were evaluated by quantifying the area occupied by the cells in culture plates as well as the outgrowth of cellular

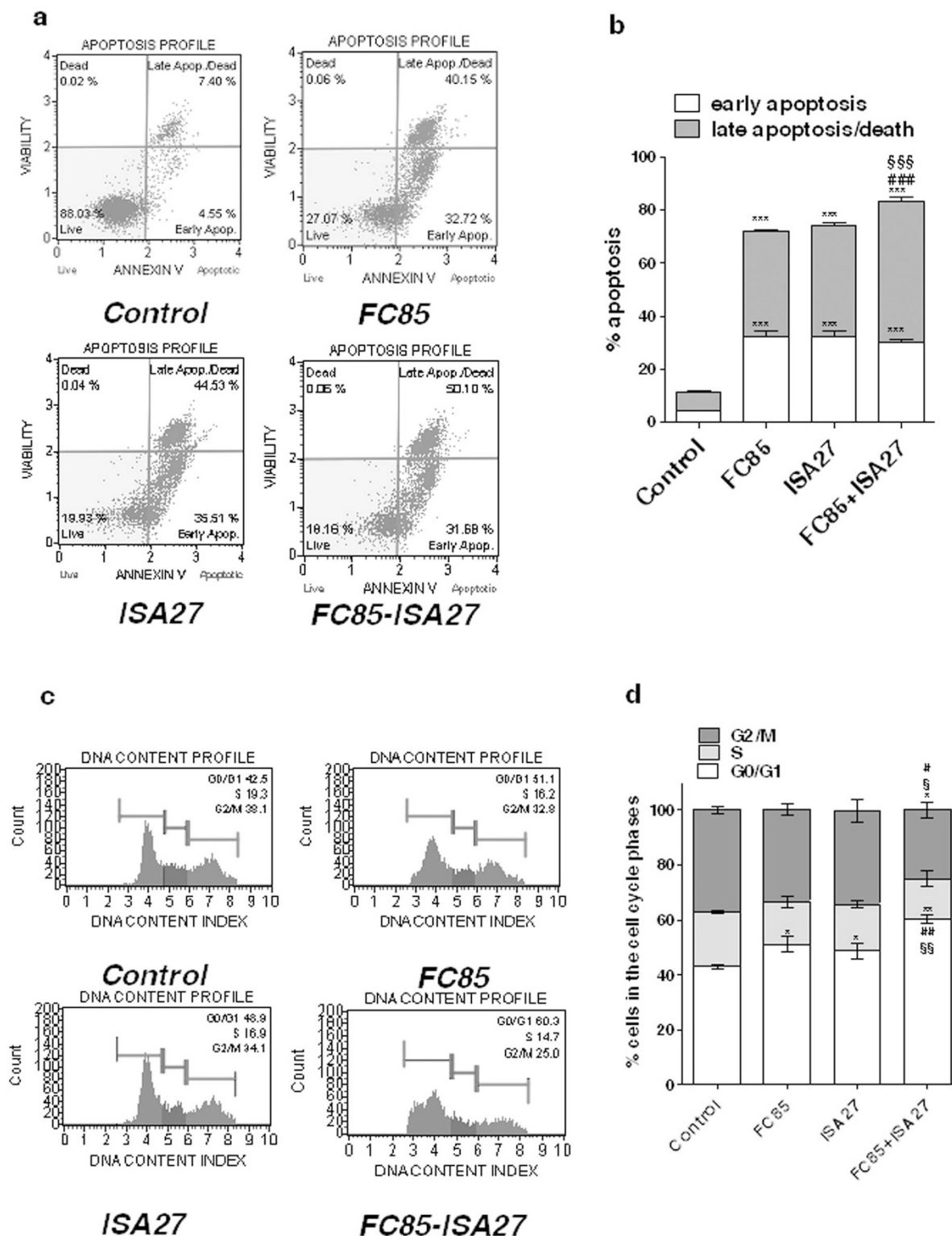


Figure 4 | The effect of FC85 and/or ISA27 on U87MG cell apoptosis and cell cycle. **(a, b)** U87MG cells were treated for 24 h with DMSO (control), or 500 nM FC85 or 2.5 μ M ISA27, alone or in combination. At the end of the treatment period, the cells were collected, and the level of phosphatidylserine externalisation was evaluated using the Annexin V-staining protocol, as described in the Methods section. **(b)** The data are expressed as the percentage of apoptotic cells (the data for the early-stage apoptotic cells shown in white, and the data for the late-stage apoptotic/necrotic cells shown in grey) versus the total number of cells. The data shown represent the mean \pm SEM of three different experiments. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: *** $p < 0.001$ vs. control; ### $p < 0.001$ vs. FC85 alone; \$\$\$ $p < 0.001$ vs. ISA27 alone. **(c, d)** U87MG cells were treated as in **a**. At the end of the treatment periods, the cell cycle was analysed as described in the Methods section. Representative cell cycle histograms of untreated and treated cells are shown **(c)**. The data are expressed as the percentage of cells in the different phases (G0/G1, G2 or S) versus the total cell number and are the mean values \pm SEM of three different experiments. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: * $p < 0.05$, ** $p < 0.01$ vs. control in the respective cellular phase; # $p < 0.05$, ## $p < 0.01$ vs. FC85 alone; § $p < 0.05$, §§ $p < 0.01$ vs. ISA27 alone.

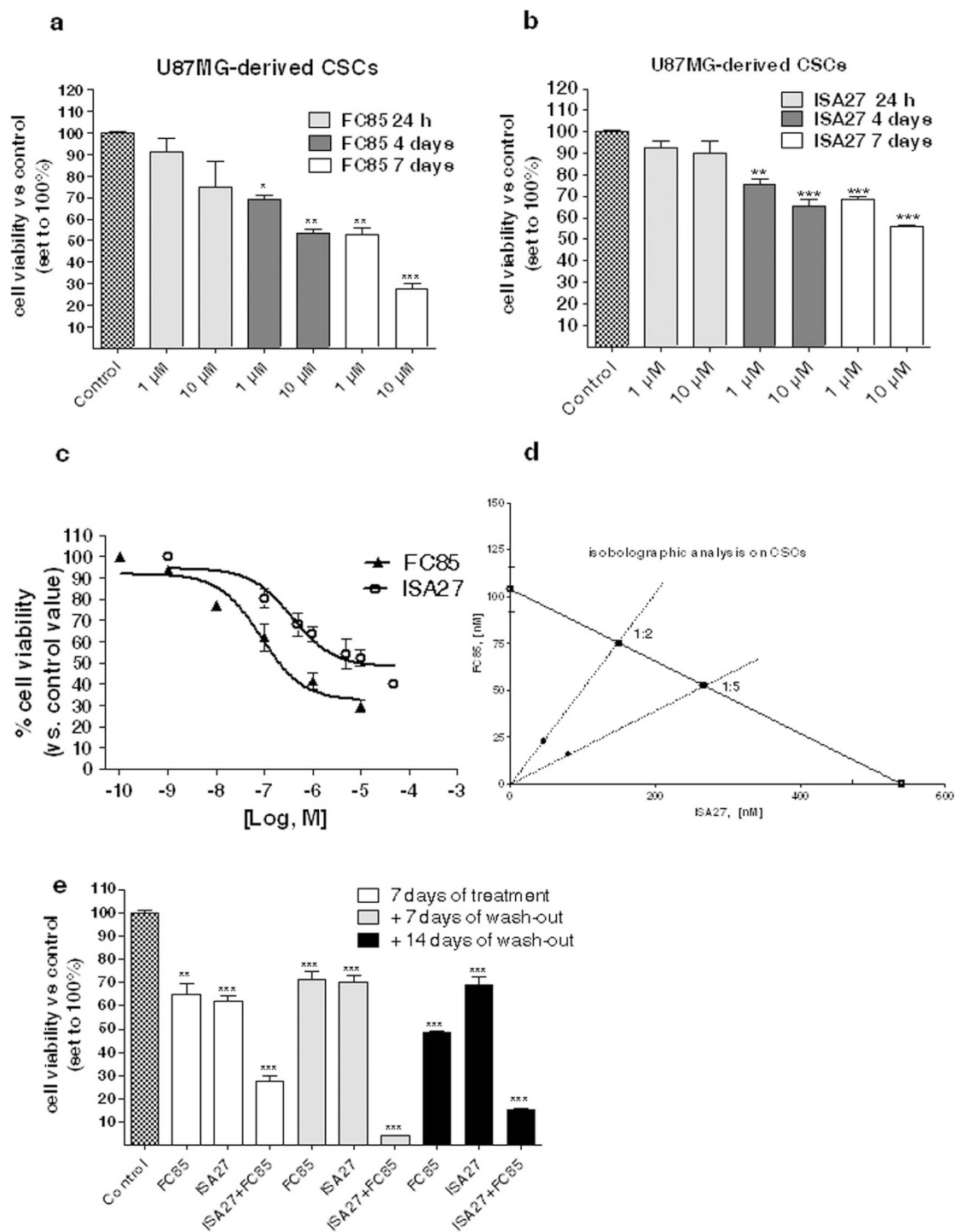


Figure 5 | Effect of FC85 and/or ISA27 on GSC proliferation/viability. U87MG-derived GSCs were incubated with the indicated concentrations of FC85 (a) or ISA27 (b) for 24 h, four days or seven days. At the end of the treatment periods, cell viability was measured using the MTS assay. (c) U87MG-derived GSCs were incubated for 7 days with increasing concentrations of FC85 or ISA27, and cell viability was measured using the MTS assay. The data are expressed as a percentage with respect to that of untreated cells (control), which was set to 100%, and are the mean values \pm SEM of three independent experiments, each performed in duplicate. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$ vs. control. (d) Isobologram 2-D showing the interactions between FC85 and ISA27 in MTS viability tests performed in U87MG-derived CSCs treated for seven days with FC85 and/or ISA27. The IC₅₀ values for FC85 and ISA27 are shown on the X- and Y-axis, respectively. The open points (○) on the additivity line depict the theoretical IC_{50,add} values for total dose expressed as the proportion of FC85 and ISA27 that produced a 50% effect. The solid points (●) depict the experimental IC_{50,mix} values for total dose expressed as the proportion of FC85 and ISA27 that produced a 50% effect. (e) U87MG-derived GSCs were incubated with FC85 and/or ISA27 for seven days; then, the medium was replaced with drug-free fresh medium for other seven or fourteen days. At the end of the treatment period, cell viability was measured using the MTS assay. The data are expressed as a percentage with respect to that of untreated cells (control), which was set to 100%, and are the mean values \pm SEM of three independent experiments, each performed in duplicate. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: ** $p < 0.01$, *** $p < 0.001$ vs. control.

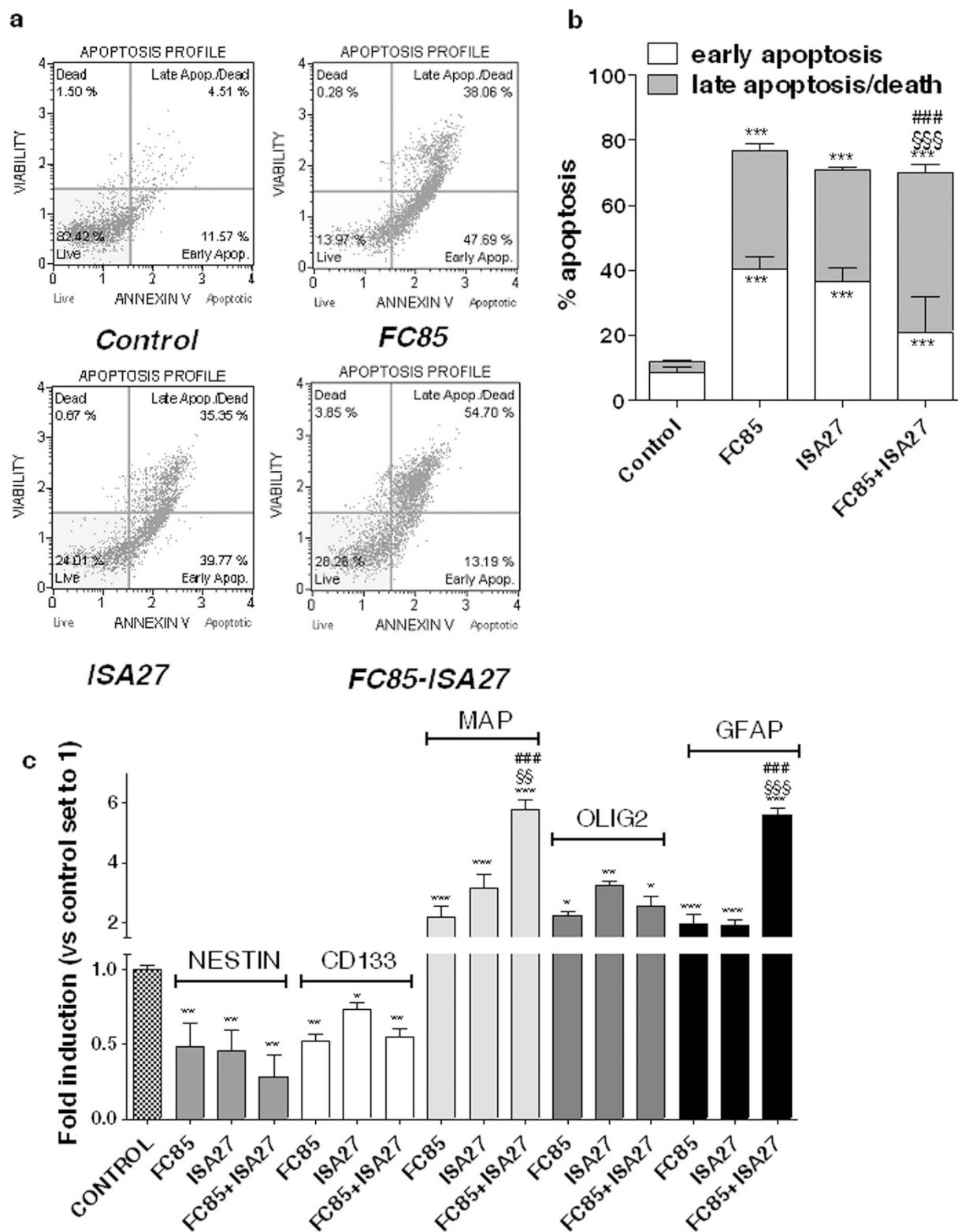


Figure 6 | The effect of FC85 and/or ISA27 on GSC apoptosis/differentiation. (a, b) GSCs were treated for 7 days with NSC medium containing DMSO (control), or 500 nM FC85 or 2.5 μ M ISA27, alone or in combination. At the end of treatments, the cells were collected and the degree of phosphatidylserine externalisation was evaluated using the Annexin V protocol, as described in the Method section. (b) The data were expressed as the percentage of apoptotic cells (early-apoptotic in white, late-apoptotic/necrotic in grey) relative to the total number of cells. The data are the mean values \pm SEM of three different experiments. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: *** $p < 0.001$ vs. control; ### $p < 0.001$ vs. FC85 alone; \$\$\$ $p < 0.001$ vs. ISA27 alone. (c) GSCs were treated as in a; total RNA was extracted, and the relative mRNA quantification of the stem cell markers CD133 and nestin, the neuronal marker MAP, the astrocyte marker GFAP, and of the oligodendrocyte marker Olig2 was performed by RT-PCR. The data are expressed as the fold change vs. the levels of the control and are the mean values \pm SEM of three different experiments. The significance of the differences was determined with a one-way ANOVA with Bonferroni post-test: * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$ vs. control; ### $p < 0.001$ vs. FC85 alone; \$\$ $p < 0.01$, \$\$\$ $p < 0.001$ vs. ISA27 alone.



processes. When GSCs were incubated with FC85 for seven days, an almost complete reduction in the area occupied by the floating spheres was noticed, and the cells showed prominent outgrowth of processes (Fig. 7a-c), as previously reported as a response to other AKT/mTOR inhibitors^{35,36}. Similar results were obtained with the MDM2/p53 inhibitor (Fig. 7a-c), suggesting that the reactivation of the p53 pathway could also induce GSC differentiation. In both cases, the morphology of differentiated cells appeared to be heterogeneous, suggesting that FC85 and ISA27 could promote cell differentiation towards more than one phenotype. When FC85 and ISA27 were combined, a marked reduction in the size of neurospheres was evidenced, with few cells presenting small cellular processes (Fig. 7a-c).

To investigate the mechanisms through which FC85 and ISA27 affect GSC morphology, we then assessed the levels of stem and differentiation markers upon stimulation with the two compounds. In FC85-treated GSCs, a significant decrease in the stemness markers, CD133 and Nestin, was noticed (Fig. 6c) accompanied by a significant increase of MAP and GFAP content, demonstrating that FC85 was able to promote GSC differentiation towards a neuronal and a glial phenotype. Similar results were obtained with ISA27 (Fig. 6c). Surprisingly, despite the fact that no significant cellular processes had been noticed in the morphological analysis, when cells were treated with the two drugs, a significant decrease in the stemness markers was evidenced, together with a marked increase in the MAP, GFAP and Olig2 content (Fig. 6c). Moreover, the enhancement of the neuronal and of the astrocyte markers were significantly higher in FC85+ISA27-treated cells with respect to that observed in single agent-treated cells (Fig. 6c). Comparing the morphological/apoptosis analysis and RT-PCR data indicated that combined ISA27 and FC85 not only induced the apoptosis of GSCs but also promoted the differentiation of these cells.

Effects of FC85, ISA27 and of their combined treatment on the kinetics of AKT and ERK1/2 phosphorylation. The putative intracellular signalling pathways underlying the effects elicited by the MDM2/p53 and the AKT/mTOR inhibitors were then investigated. Different signalling pathways have been demonstrated to play a pivotal role in GSC proliferation and differentiation³⁷; among these, several evidence suggested that a crosstalk between the PI3K/AKT/mTOR and MEK/ERK pathways in the maintenance of self-renewal and tumorigenicity of GSCs³⁸. To study in depth the mechanism underlying the observed effects, the kinetics of AKT and ERK1/2 inhibition were investigated. GSC incubation with FC85 and/or ISA27 did not alter total ERK or AKT levels (Suppl. Fig. 7). Both FC85 and ISA27 induced a fast and significant inhibition of AKT phosphorylation, which persisted up to 60 min (Fig. 8a). Challenging cells with both compounds prolonged p-AKT inhibition up to 120 min, with significantly higher percentages of inhibition with respect to single agent-treated cells (Fig. 8a).

Both ligands also affected p-ERK1/2, although showing a transient blockage (up to 30 min of GSC incubation, Fig. 8b). In contrast, FC85+ISA27 produced a significant and sustained inhibition of ERK1/2 activity (up to 120 min); as in the case of p-AKT, the percentages of inhibition were significantly higher with respect to single agent-treated cells at 60 and 120 min of GSC treatment (Fig. 8b). These results are in line with the additive/synergic effect on GSC differentiation elicited by the co-treatment FC85+ISA27, and support the previous demonstration that the dual and sustained inhibition of PI3K/AKT/mTOR and MEK/ERK signalling induced differentiation and inhibited the tumorigenicity of GSCs³⁸.

Discussion

In this study, we report the interactions of PI3K/AKT/mTOR and MDM2/p53 pathways in GBM cells, following the simultaneous inhibition of AKT/mTOR signalling and re-activation of the p53

pathway. First, we showed that a combined therapy utilizing the novel mTOR/AKT inhibitor FC85 and the MDM2/p53 inhibitor ISA27 produced a synergistic effect on the inhibition of GBM cell viability as well as on the reactivation of p53 pathway. Most importantly, similar synergistic effects were shown in GBM-derived CSCs, where the simultaneous use of the two compounds induced a strong differentiation of GSCs, as well as apoptosis. A synergistic inhibition of cell viability of both GBM and its derived CSCs was evidenced also using the mTOR inhibitor everolimus and the MDM2 inhibitor nutlin-3 as reference compounds. These findings suggest that a combination strategy aimed at inhibiting AKT/mTOR signalling and re-activating p53 signalling may be potentially effective in GBMs and GSCs.

The multi-targeted strategy has assumed great importance in GBM therapy, based on the evidence that single-agent therapy is often not sufficient to control this tumour³⁹⁻⁴¹. Because the hyperactivation of the PI3K/AKT/mTOR pathway and the inactivation of wild-type p53 by MDM2 over-expression are frequent molecular events in highly proliferative tumours, and the aforementioned pathways are directly related²⁹, a combined therapy with an inhibitor of AKT/mTOR pathway and a compound able to inhibit the MDM2/p53 interaction may represent a valuable approach in GBM. In this respect, a cell-based screen has demonstrated the efficacy of such combined therapy in several cancer cells⁴², thus providing a framework for the rational design of new clinical trials.

We found that FC85 inhibited mTOR and AKT constitutive activity in U87MG cells; as a result, the new compound decreased cell viability, induced cell cycle block, and triggered apoptosis. Moreover, the inhibition of cell viability was long-lasting and directed preferentially towards tumour cells, as demonstrated by the significantly lower effects observed in HUVECs. Real time RT-PCR and western blotting analyses demonstrated that FC85 alone led to the accumulation of p53 protein levels and to an increase of the mRNA levels of p53-target genes, demonstrating a reactivation of the p53 pathway. Challenging cells with FC85 and the MDM2/p53 inhibitor ISA27 caused an amplification response on the reactivation of the p53 signalling pathway. As a result, such combined therapy produced synergistic effects on the inhibition of cell viability and enhanced the induction of p53-mediated apoptosis and cell cycle block with respect to those elicited by the use of a single agent.

A synergistic inhibition of GBM cell viability was confirmed using the mTOR inhibitor everolimus and the MDM2 inhibitor nutlin-3. However, slight differences were noted. When used alone, everolimus and nutlin-3 caused slower reactivation kinetics of p53 function compared with FC85 and ISA27, displaying a significant induction of p53 target genes only after 24 h of cell treatment, accordingly to data previously reported for the MDM2 inhibitor¹⁸. Moreover, neither everolimus nor nutlin-3 alone induced apoptosis of U87MG cells within 24 h of treatment, in line with literature findings, reporting a non-apoptotic mechanism for everolimus^{32,33} and a tardive induction of apoptosis for nutlin-3^{17,18,41}. Interestingly, the co-treatment induced a slight but significant induction of apoptosis, suggesting that everolimus could accelerate the induction of apoptosis elicited by nutlin-3 in prolonged treatment^{17,18}. The different reactivation kinetics of p53 function and induction of apoptosis elicited by the two MDM2 inhibitors could be attributed to the more rapid accumulation of p53 protein levels caused by ISA27 with respect to nutlin-3¹⁸. With regard to everolimus and FC85, it is important to mention the intricacy of the AKT/mTOR pathway. mTOR protein kinase interacts with multiple proteins via its two distinct multiprotein complexes, mTORC1 and mTORC2^{43,44}, which have been shown to have distinct signalling in GBM⁴⁵. Rapamycin and rapalogs, including everolimus, suppress mTOR activity via an allosteric mechanism and have been found to be incomplete inhibitors of mTORC1^{46,47}. On this basis, and considering the lack of information on the detailed mechanism of AKT/mTOR inhibition elicited by

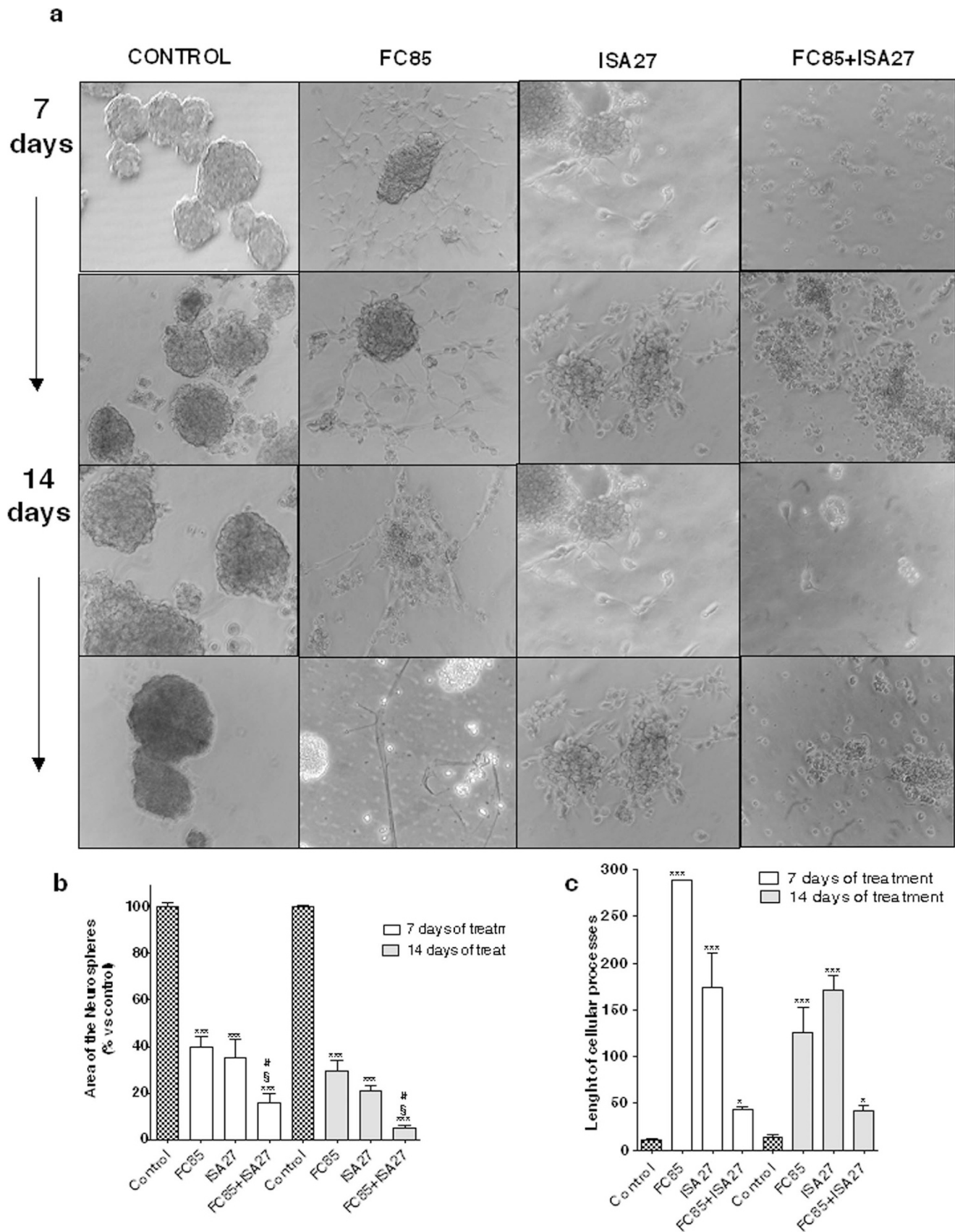


Figure 7 | Effect of FC85 and/or ISA27 on sphere-derived cell morphology. GSCs were treated for seven or fourteen days with complete NSC medium containing DMSO (control), or 500 nM FC85, or 2.5 μ M ISA27, alone or in combination. (a) Representative cell micrographs after seven and fourteen days of treatment are shown. The area of the culture plates occupied by the spheres (b) and the length of cellular processes (c) were scored after seven and fourteen days of treatment. The counts represent the mean values \pm SEM of two independent experiments. The significance of differences was determined with a one-way ANOVA with Bonferroni post-test: * $p < 0.05$, *** $p < 0.001$ vs. control; # $p < 0.05$ vs. FC85 alone; § $p < 0.05$ vs. ISA27 alone.

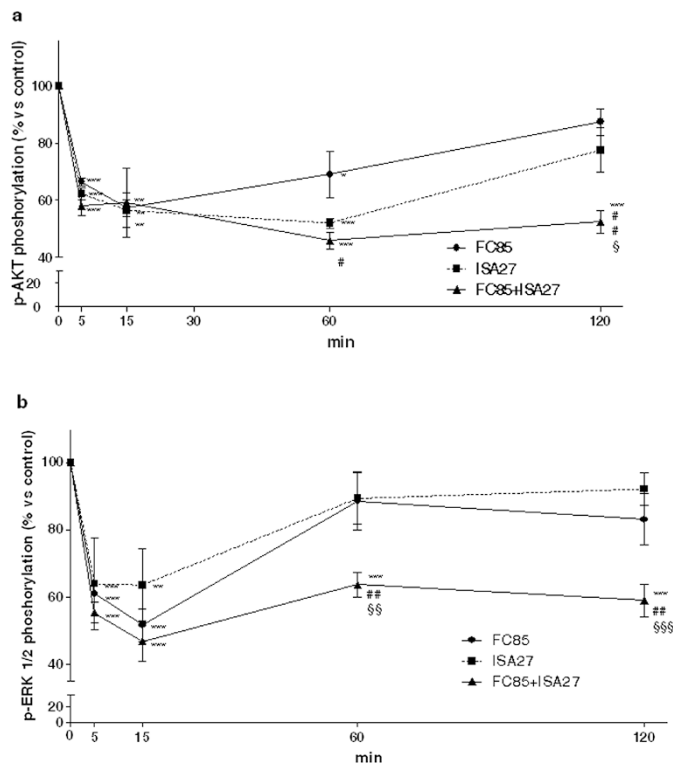


Figure 8 | Kinetics of FC85 and/or ISA27 inhibition of AKT and ERK1/2 phosphorylation. U87MG-derived CSCs were treated for the indicated times (0–120 min) with NSC medium containing DMSO (control), or 500 nM FC85, or 2.5 μ M ISA27, alone or in combination. At the end of the treatment periods, the levels of AKT (a) and ERK 1/2 (b) phosphorylation were evaluated using ELISA kits, as described in the Methods section. The data are expressed as the percentage of phosphorylated AKT or ERK1/2 relative to those of untreated cells (control), which were set at 100%, and are the mean values \pm SEM of three independent experiments performed in triplicate. The significance of differences was performed using one-way ANOVA with Bonferroni post-test: * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$ vs. control; # $p < 0.05$, ## $p < 0.01$ vs. FC85 alone; § $p < 0.05$, §§ $p < 0.01$, §§§ $p < 0.001$ vs. ISA27 alone.

FC85, further investigations are needed to obtain insight into the signalling pathways that are the basis of such differences.

We next characterized our compounds, alone or in combination, in GSCs isolated from U87MG cells. First, we demonstrated that both FC85 and ISA27 induced a time- and concentration-dependent inhibition of GSC proliferation and triggered apoptosis. In addition, in GSCs, the combined therapy produced synergistic effects, accelerating the induction of apoptosis and enhancing the inhibition of GSC viability. Such synergistic interactions were shown also using the reference compounds nutlin-3 and everolimus, thus confirming that a combined therapy with an inhibitor of MDM2/p53 complex and an inhibitor of the AKT/mTOR pathway is useful in anti-proliferative strategy in GSCs.

To investigate the mechanism underlying these effects, the morphology and stemness/differentiation of GSCs upon treatment with the compounds were evaluated. Morphological and RT-PCR analyses demonstrated that FC85 and ISA27 alone significantly decreased the stemness of GBM-derived cells, and promoted their differentiation toward a neuronal-glial phenotype. Globally, these effects elicited by FC85 and ISA27 are in line with the differentiating/pro-apoptotic properties previously reported for AKT/mTOR inhibitors in GSCs^{36,48}, as well as with the abilities of p53 to induce differentiation and to suppress self-renewal in human embryonic stem cells⁴⁹ and in breast CSCs⁵⁰, respectively.

When cells were concomitantly treated with the two drugs, a significant decrease in the stemness markers was evidenced, together with a marked increase in neuronal and glial markers, demonstrating that combining ISA27 and FC85 not only induced apoptosis of GSCs but also induced the differentiation of these cells.

Then, the signalling pathways most likely implicated in the aforementioned effects were investigated. It has been demonstrated that the AKT/mTOR signalling pathway is critical for the maintenance of the properties of glioma CSCs^{36,48}; on the other hand, in the same cells the MEK-ERK signalling is required for MDM2 expression, which prevents p53 activation and subsequent suppression of O(6)-methylguanine DNA methyltransferase expression, thus contributing to TMZ resistance⁵¹. In this study, we showed that FC85 and ISA27 alone inhibited AKT and ERK1/2 phosphorylation up to 30 or 60 min, respectively. Challenging cells with both compounds prolonged such inhibitions up to 120 min, with significant higher percentages of inhibition with respect to single agent-treated cells. These results are in line with the additive/synergic effect on GSC differentiation elicited by the co-treatment FC85+ISA27, and support the previous demonstrations that the dual inhibition of PI3K/AKT/mTOR and MEK/ERK signalling induced the differentiation of and inhibited the tumourigenic potential of GSCs³⁸.

Globally, our findings suggest that FC85 actively enhances downstream p53 signalling and that a combination strategy aimed at inhibiting PI3K/AKT/mTOR signalling and activating p53 signalling is potentially effective in GBM and in its CSC subpopulation, where TP53 mutations are rare, and the downstream p53 signalling is intact. The promising anti-tumour effects, confirmed by the combined use of everolimus and nutlin-3, sustain the strength of the present pharmacological approach, and encourage the extension of preclinical investigations that, above all, focus on molecular mechanisms at the basis of such cellular responses.

Methods

Chemical synthesis. Melting points were determined on a Kofler apparatus and are uncorrected. Chemical shift (δ) is reported as part per million downfield from tetramethylsilane and referenced from solvent references. ¹H NMR and ¹³C NMR spectra of all compounds were obtained with a Varian Gemini 200 spectrometer (Labexchange, Burladingen, Germany) operating at 200 MHz, in a ~2% solution of DMSO-*d*₆. The >95% purity of tested compounds was confirmed by combustion analysis.

Analytical TLC was performed on Merck 0.2-mm pre-coated silica gel aluminium (60 F₂₅₄) sheets that were visualized under a UV lamp. Evaporation was performed *in vacuo* (rotating evaporator). Sodium sulfate was used as the drying agent. Commercially available chemicals were purchased from Sigma-Aldrich. The 5-amino-1,3-dihydro-2H-indol-2-one (1) was prepared according to reported procedures²⁰.

4-methyl-N-(2-oxoindolin-5-yl)benzenesulfonamide (2). To a stirred solution of 5-amino-2-oxindole 1 (148 mg, 1 mmol) in water (10 mL) was added TsCl (228.8 mg, 1.2 mmol) at room temperature, and stirring was continued until the reaction was complete. Then, the solution was evaporated to dryness. The crude residue was diluted with MeOH, and the solid product was filtered off from the mixture. The collected solid was washed with diethyl ether and air-dried. (109 mg, 0.36 mmol, 36% yield); mp 210–212 °C. ¹H NMR: δ 2.37 (s, 3H, Me); 3.44 (s, 2H, CH₂); 6.65 (d, 1H, $J = 8.2$ Hz, Ar); 6.84 (d, 1H, $J = 8.2$ Hz, Ar); 6.95 (s, 1H, Ar); 7.32 (d, 1H, $J = 8.1$ Hz, Ar); 7.58 (d, 1H, $J = 8.1$ Hz, Ar); 9.89 (br s, 1H); 10.30 (br s, 1H) ppm. ¹³C NMR: δ 170.06, 141.81, 137.46, 135.73, 133.61, 128.85, 128.11, 127.25, 121.99, 117.19, 110.54, 36.42, 21.87 ppm. Anal. Calcd. for C₁₅H₁₄N₂O₃S: C, 59.59; H, 4.67; N, 9.27. Found: C, 59.38; H, 4.46; N, 9.03.

(3Z)-N-(3-((1H-imidazol-5-yl)-methylene)-2-oxoindolin-5-yl)-4-methylbenzenesulfonamide (FC85). To a solution of 4-methyl-N-(2-oxoindolin-5-yl)benzenesulfonamide (2) (118 mg, 0.39 mmol) in ethanol (7 mL) was added the 1H-imidazole-5-carboxaldehyde (41.32 mg, 0.43 mmol) and a catalytic amount of piperidine. The resulting solution was stirred and refluxed for 12 h; then, the solution was evaporated to dryness. The crude residue was purified by crystallization from EtOH, affording FC85 as Z-isomer (79 mg, 0.21 mmol, 53% yield); mp 219–217 °C. ¹H NMR: δ 2.31 (s, 3H, Me); 6.70–6.82 (m, 2H, Ar); 7.32 (d, 1H, $J = 8.1$ Hz, Ar); 7.40 (s, 1H, Ar); 7.59 (d, 1H, $J = 8.1$ Hz, Ar); 7.73 (s, 1H, Ar); 7.77 (s, 1H, Ar); 8.02 (s, 1H, H-vinyl); 9.94 (br s, 1H); 10.95 (br s, 1H) ppm. ¹³C NMR: δ 168.90, 139.05, 136.74, 135.45, 134.95, 131.88, 131.40, 130.72, 128.46, 127.59, 127.44, 126.68, 121.33, 117.95, 111.01, 110.12, 21.30 ppm. Anal. Calcd. for C₁₉H₁₆N₄O₃S: C, 59.99; H, 4.24; N, 14.73. Found: C, 60.12; H, 4.46; N, 14.87.



GBM cell culture and GSC isolation. The U87MG cell line was obtained from the National Institute for Cancer Research of Genoa (Italy) and cultured as described¹⁸. To isolate GSCs, approximately 2.0×10^6 cells were suspended in 1 mL of a defined serum-free Neural Stem Cell (NSC) medium³⁴. After 3–4 days of culture, the neurospheres were collected, suspended in NSC medium, dissociated into single cells, and plated for the assays. For the long-term treatment of cells, NSC or complete medium containing drugs was replaced every two to three days.

Cell proliferation/viability assays of GBM cells and CSCs. The human U87MG cells or GSCs were seeded at a density of 3×10^3 cells/well. After 24 h, the cells were treated for one to 7 days with fresh growth medium containing different concentrations of FC85, ISA27, everolimus or nutlin-3. Following the treatment period, cell viability was determined using the MTS assay according to manufacturer's instruction. The absorbance of formazan at 490 nm was measured in a colorimetric assay with an automated plate reader (Victor Wallac 2, Perkin Elmer).

For wash-out experiments, U87MG cells or GSCs were treated with FC85 and/or ISA27 for 96 h (U87MG cells) or seven days (GSCs). At the end of treatments, medium containing drugs was replaced by fresh medium, and cells were allowed to grow for the indicated days (one or three days in the case of U87MG, seven or fourteen days in the case of GSCs). At the end of treatments, cell viability was measured by the MTS assay. The results were calculated by subtracting the mean background from the values obtained from each evaluation and were expressed as the percentage of the control (untreated cells). Sigmoid dose-response curve was generated, from which the IC_{50} values were derived.

The effects of compound treatment on U87MG cell viability were also evaluated using the trypan blue exclusion assay. Cells were treated with different concentrations (100 nM, 1 μ M or 10 μ M) of FC85. Following the treatment period, cells were collected and centrifuged at $300 \times g$ for 5 minutes. The harvested cells were mixed with an equal volume of 0.4% trypan blue dye, and the blue (dead cells) and white (living cells) cells in each well were manually counted. The number of live cells for each condition was reported as the percentage of living cells relative to that in the control sample.

Isobolar analysis. A graphical assessment of synergy with regard to growth inhibition was performed using isobolographic analysis⁵². In the present study, the dose of ISA27 or nutlin-3 required to give a 50% effect¹⁸ was plotted on the abscissa, and the iso-effective dose of FC85 or everolimus was plotted on the ordinate. The theoretical additive effect of the two drugs is represented by the straight line connecting the two points. If the experimentally determined data points and their confidence interval fall on this line, the drug effects are additive (no interaction). If the points lie below this line, there is superadditivity (synergy), and if the points lie above this line, there is subadditivity (antagonism). To determine whether the interaction between the two drugs was synergistic, additive or antagonistic, the theoretical additive $IC_{50,add}$ was estimated from the dose-response curves of each drug administered individually. The interaction index, denoted by γ , is an assessment of the degree of synergism or antagonism. The index is defined by the isobolar relationship as follows^{53,54}:

$\gamma = a/A + b/B$ where A and B are the doses of drug A (alone) and B (alone) that give the specified effect, and (a,b) are the combination doses that produce the same effect.

p53 stabilization analysis in U87MG cells. The western blot analysis for the evaluation of p53 protein levels was performed as previously described¹⁸. In brief, U87MG cells were treated with DMSO (control) or with 500 nM FC85 and 2.5 μ M ISA27, alone or in combination. Alternatively, cells were incubated with 50 nM everolimus and/or 10 μ M nutlin-3, alone or in combination. Cells were then lysed for 60 min at 4°C, and equal amount of the cell extracts (40 μ g of proteins) were diluted in Laemmli solution and resolved by SDS-PAGE⁴¹.

RNA extraction and Real Time PCR analysis in U87MG cells and in CSCs. U87MG cells or GSCs were treated with DMSO (control), 500 nM FC85 and/or 2.5 μ M ISA27 for 6 h or seven days, respectively. In some experiments, U87MG cells were incubated with 50 nM everolimus and/or 10 μ M nutlin-3 for 6 h or 24 h. At the end of treatment, the cells were collected, and total RNA was extracted using RNeasy® Mini Kit (Qiagen, Hilden, Germany) according to the manufacturer's instructions. cDNA synthesis was performed with 500 ng of RNA using the i-Script cDNA synthesis kit (BioRad, Hercules, USA) following the manufacturer's instructions. RT-PCR reactions consisted of 25 μ L of Fluocycle® II SYBR® (Euroclone, Milan, Italy), 1.5 μ L of both 10 μ M forward and reverse primers, 3 μ L of cDNA, and 19 μ L of H₂O. All reactions were performed for 40 cycles using the following temperature profiles: 98 °C for 30 seconds (initial denaturation); T °C (see Suppl. Table S5) for 30 seconds (annealing); and 72 °C for 3 seconds (extension)³⁴.

Cell cycle analysis in U87MG cells. The measurement of the percentage of cells in the different cell phases was performed using the Muse™ Cell Analyser, Merck KGaA, Darmstadt, Germany). Briefly, U87MG cells were treated for 24 h with DMSO or 500 nM FC85 and 2.5 μ M ISA27, alone or in combination. Adherent cells were collected and centrifuged at $300 \times g$ for 5 minutes. The pellet was washed with PBS and suspended in 100 μ L of PBS; finally, the cells were slowly added to 1 ml of ice cold 70% ethanol and maintained o/n at -20°C. Then, a cell suspension aliquot (containing at least 2×10^5 cells) was centrifuged at $300 \times g$ for 5 minutes, washed once with PBS and suspended in the fluorescent reagent (Muse™ Cell Cycle reagent)⁴¹.

Annexin V and 7-AAD staining in U87MG cells and in GSCs. Dual staining with Annexin V conjugated to fluorescein-isothiocyanate (FITC) and 7-amino-actinomycin (7-AAD) was performed using the commercially available kit (Muse Annexin V and Dead Cell Kit; Merck KGaA, Darmstadt, Germany). U87MG cells or GSCs were treated with DMSO (control), FC85 and/or ISA27 for 6 h or seven days, respectively. In some experiments, U87MG cells were incubated with 50 nM everolimus and/or 10 μ M nutlin-3 for 24 h. At the end of the treatment periods, the percentages of living, apoptotic and dead cells were acquired and analysed by Muse™ Cell Analyser, as previously described⁴¹.

Quantification of the occupied area and the cellular processes of neurospheres. GSCs were plated in complete growth medium (day 0) and treated for seven or fourteen days with 500 nM FC85 and/or 2.5 μ M ISA27. At the end of the treatment period, the drug-containing media were replaced with fresh NSC medium, and the GSCs were allowed to grow for another 7 or 14 days. Images of the neurospheres were captured at days 0, 7, 14 and 21. Three different wells were analysed for each condition, and 15 images of each well were captured^{34,55}. The response of the cultures to the various treatments was quantified by measuring the area occupied by neurospheres that had formed, using the ImageJ program (version 1.41; Bethesda, MD, USA). The cellular processes extending from the six to eight differentiating neurospheres per condition in three independent experiments were evaluated.

ERK and AKT phosphorylation assays. U87MG cells were cultured in 96-well microplates (5,000 cells/well) and treated for 2 hours with different FC85 concentrations (100 nM, 1 μ M and 10 μ M). In kinetic experiments, GSCs were treated for different times with 500 nM FC85 and/or 2.5 μ M ISA27. At the end of the treatment period, the GSCs were centrifuged at $500 \times g$ for 3 minutes; cells were washed twice using fresh saline and rapidly fixed with 4% (for adherent U87MG cells) or 8% (for suspension GSCs) formaldehyde to preserve the activation of specific protein modification. The levels of total and phosphorylated AKT and ERK1/2 were determined using specific primary antibodies. The subsequent incubation with a secondary HRP-conjugated antibody and the developing solution allowed for the colorimetric quantification of the levels of total and phosphorylated proteins. The relative number of cells in each well was then determined using the crystal violet assay. The results were calculated by subtracting the mean background value from the values obtained under each test condition: values were normalized to the number of cells in each well and are expressed as the percentages of the control (untreated cells) values.

Statistical analyses. The nonlinear multipurpose curve-fitting program Graph-Pad Prism (GraphPad Software Inc., San Diego, CA) was used for data analysis and graphic presentations. All data are presented as the mean \pm SEM. Statistical analysis was performed by one-way analysis of variance (ANOVA) with Bonferroni's corrected t-test for post-hoc pair-wise comparisons. $P < 0.05$ was considered statistically significant.

- Sathornsumetee, S. Rich, J. N., Reardon, D. A. Diagnosis and treatment of high-grade astrocytoma. *Neurol. Clin.* **25**, 1111–1139 (2007).
- Liu, G. *et al.* Analysis of gene expression and chemoresistance of CD133+ cancer stem cells in glioblastoma. *Mol. Cancer.* **5**, 67 (2006).
- Frank, N. Y., Schatton, T., Frank, M. H. The therapeutic promise of the cancer stem cell concept. *J. Clin. Invest.* **120**, 41–50 (2010).
- Soni, D., King, J. A., Kaye, A. H., Hovens, C. M. Genetics of glioblastoma multiforme: mitogenic signaling and cell cycle pathways converge. *J. Clin. Neurosci.* **12**, 1–5 (2005).
- Reardon DA, Rich JN, Friedman HS, Bigner DD. Recent advances in the treatment of malignant astrocytoma. *J. Clin. Oncol.* **24**, 1253–1265 (2006).
- Fleming, T. P., *et al.* Amplification and/or overexpression of platelet-derived growth factor receptors and epidermal growth factor receptor in human glioblastoma tumors. *Cancer Res.* **52**, 4550–4553 (1992).
- Wong, A. J., *et al.* Structural alterations of the epidermal growth factor receptor gene in human gliomas. *Proc. Natl. Acad. Sci. U S A.* **89**, 2965–2969 (1992).
- Haas-Kogan, D., *et al.* Protein kinase B (PKB/Akt) activity is elevated in glioblastoma cells due to mutation of the tumor suppressor PTEN/MMAC. *Curr. Biol.* **8**, 1195–1198 (1998).
- Holland, E. C., *et al.* Combined activation of Ras and Akt in neural progenitors induces glioblastoma formation in mice. *Nat. Genet.* **25**, 55–57 (2000).
- Mayo, L. D., Donner, D. B. A phosphatidylinositol 3-kinase/Akt pathway promotes translocation of Mdm2 from the cytoplasm to the nucleus. *Proc. Natl. Acad. Sci. U S A.* **98**, 11598–115603 (2001).
- Haupt, Y., Maya, R., Kazan, A., Oren, M. Mdm2 promotes the rapid degradation of p53. *Nature* **387**, 296–299 (1997).
- Momand, J., Wu, H. H., Dasgupta, G. MDM2—master regulator of the p53 tumor suppressor protein. *Gene.* **242**, 15–29 (2000).
- Burris, H. A. 3rd. Overcoming acquired resistance to anticancer therapy: focus on the PI3K/AKT/mTOR pathway. *Cancer Chemother. Pharmacol.* **71**, 829–842 (2013).
- Mendiburu-Eliçabe, M., Gil-Ranedo, J., Izquierdo, M. Efficacy of rapamycin against glioblastoma cancer stem cells. *Clin. Transl. Oncol.* **16**, 495–502 (2014).
- Höland, K., *et al.* Targeting class IA PI3K isoforms selectively impairs cell growth, survival, and migration in glioblastoma. *PLoS One* **9**, doi: 10.1371/journal.pone.0094132 (2014).



16. England, B., Huang, T., Karsy, M. Current understanding of the role and targeting of tumor suppressor p53 in glioblastoma multiforme. *Tumour. Biol.* **34**, 2063–2074 (2013).
17. Villalonga-Planells, R., et al. Activation of p53 by nutlin-3a induces apoptosis and cellular senescence in human glioblastoma multiforme. *PLoS. One* **6**, 18588–18600 (2011).
18. Costa, B., et al. Human glioblastoma multiforme: p53 reactivation by a novel MDM2 inhibitor. *PLoS. One* **8**, 72281–72300 (2013).
19. Kojima, K., et al. The dual PI3 kinase/mTOR inhibitor PI-103 prevents p53 induction by Mdm2 inhibition but enhances p53-mediated mitochondrial apoptosis in p53 wild-type AML. *Leukemia* **22**, 1728–1736 (2008).
20. Nesi, G., et al. Synthesis of novel 3,5-disubstituted-2-oxindole derivatives as antitumor agents against human nonsmall cell lung cancer. *ACS. Med. Chem. Lett.* **4**, 1137–1141 (2013).
21. Barnett, C. M., Everolimus: targeted therapy on the horizon for the treatment of breast cancer. *Pharmacotherapy* **32**, 383–396 (2012).
22. Yuan, R., Kay, A., Berg, W. J., Lebowitz, D., Targeting tumorigenesis: development and use of mTOR inhibitors in cancer therapy. *J. Hematol. Oncol.* **2**, 45–56 (2009).
23. Kai, L. V., et al. Synthesis and in vitro antitumor activity of 1-(3-dimethylamino)propyl indolin-2-one derivatives. *Med. Chem. Res.* **2**, 1723–1729 (2013).
24. Arnaiz, D., et al. Indolinone derivatives and their use in treating disease-states such as cancer. *Patent No. US 07105563* (2006).
25. Scozzafava, A., Owa, T., Mastrolorenzo, A., Supuran, C. T. Anticancer and antiviral sulfonamides. *Curr. Med. Chem.* **10**, 925–953 (2003).
26. Noaman, E., Fahmy, N., Yousef, R., El Shawi, O., Ghazy, M. Evaluation of the antitumor and radiosensitizing activity of a novel quinoline sulfonamide derivative (piqsa) as a histone deacetylase inhibitor. *J. Cancer Ther.* **2**, 567–578 (2011).
27. Gomez-Monterrey, I., et al. Identification of the spiro(oxindole-3,3'-thiazolidine)-based derivatives as potential p53 activity modulators. *J. Med. Chem.* **53**, 8319–8329 (2010).
28. Wang, S. I., et al. Somatic mutations of PTEN in glioblastoma multiforme. *Cancer Res.* **57**, 4183–4186 (1997).
29. Mayo, L. D., Donner, D. B. A phosphatidylinositol 3-kinase/Akt pathway promotes translocation of Mdm2 from the cytoplasm to the nucleus. *Proc. Natl. Acad. Sci. U S A.* **98**, 11598–11603 (2001).
30. Ray-Coquard, I., et al. Effect of the MDM2 antagonist RG7112 on the P53 pathway in patients with MDM2-amplified, well-differentiated or dedifferentiated liposarcoma: an exploratory proof-of-mechanism study. *Lancet. Oncol.* **13**, 1133–1140 (2012).
31. Carol, H., et al. Initial testing of the MDM2 inhibitor RG7112 by the Pediatric Preclinical Testing Program. *Pediatr. Blood Cancer* **60**, 633–641 (2013).
32. Chiong, E., et al. Effects of mTOR inhibitor everolimus (RAD001) on bladder cancer cells. *Clin. Cancer Res.* **17**, 2863–2873 (2011).
33. Yu, C. C., et al. RAD001 enhances the radiosensitivity of SCC4 oral cancer cells by inducing cell cycle arrest at the G2/M checkpoint. *Anticancer Res.* **34**, 2927–2935 (2014).
34. Daniele, S., Zappelli, E., Natali, L., Martini, C., Trincavelli, M. L. Modulation of A₁ and A_{2B} adenosine receptor activity: a new strategy to sensitise glioblastoma stem cells to chemotherapy. *Cell Death Dis.* **5**, 1539–1553 (2014).
35. Zhuang, W., et al. Induction of autophagy promotes differentiation of glioma-initiating cells and their radiosensitivity. *Int. J. Cancer.* **129**, 2720–2731 (2011).
36. Sunayama, J., et al. Dual blocking of mTOR and PI3K elicits a prodifferentiation effect on glioblastoma stem-like cells. *Neuro Oncol.* **12**, 1205–1209 (2010).
37. Cho, D. Y., et al. Targeting cancer stem cells for treatment of glioblastoma multiforme. *Cell Transplant.* **22**, 731–739 (2013).
38. Sunayama, J., et al. Crosstalk between the PI3K/mTOR and MEK/ERK pathways involved in the maintenance of self-renewal and tumorigenicity of glioblastoma stem-like cells. *Stem Cells* **28**, 1930–1939 (2010).
39. Woo, S. R., et al. KML001, a telomere-targeting drug, sensitizes glioblastoma cells to temozolomide chemotherapy and radiotherapy through DNA damage and apoptosis. *Biomed. Res. Int.* **2014**, 747415–747424 (2014).
40. Hegde, M., et al. Combinational targeting offsets antigen escape and enhances effector functions of adoptively transferred T cells in glioblastoma. *Mol. Ther.* **21**, 2087–2101 (2014).
41. Daniele, S., et al. Apoptosis therapy in cancer: the first single-molecule co-activating p53 and the translocator protein in glioblastoma. *Sci. Rep.* **4**, 4749–4761 (2014).
42. Saiki, A. Y., et al. MDM2 antagonists synergize broadly and robustly with compounds targeting fundamental oncogenic signaling pathways. *Oncotarget* **5**, 2030–2043 (2014).
43. Showkat, M., Beigh, M. A., Andrabi, K. I. mTOR signaling in protein translation regulation: implications in cancer genesis and therapeutic interventions. *Mol. Biol. Int.* **2014**, 686984–686997 (2014).
44. Takei, N., Nawa, H. mTOR signaling and its roles in normal and abnormal brain development. *Front. Mol. Neurosci.* **7**, 28–39 (2014).
45. Jhanwar-Uniyal, M., et al. Distinct signaling mechanisms of mTORC1 and mTORC2 in glioblastoma multiforme: a tale of two complexes. *Adv. Biol. Regul.* **57**, 64–74 (2015).
46. Dowling, R. J., Topisirovic, I., Fonseca, B. D., Sonenberg, N. Dissecting the role of mTOR: lessons from mTOR inhibitors. *Biochim. Biophys. Acta.* **1804**, 433–439 (2010).
47. Ballou, L. M., Lin, R. Z. Rapamycin and mTOR kinase inhibitors. *J. Chem. Biol.* **1**, 27–36 (2008).
48. Friedman, M. D., Jeevan, D. S., Tobias, M., Murali, R., Jhanwar-Uniyal, M. Targeting cancer stem cells in glioblastoma multiforme using mTOR inhibitors and the differentiating agent all-trans retinoic acid. *Oncol. Rep.* **30**, 1645–1650 (2013).
49. Maimets, T., Neganova, I., Armstrong, L., Lako, M. Activation of p53 by nutlin leads to rapid differentiation of human embryonic stem cells. *Oncogene* **27**, 5277–5287 (2008).
50. Xin, S., et al. P53 sensitizes breast cancer stem cells to let-7 miRNAs induced repression. *Int. J. Cancer Clin. Res.* **1**, 1–6 (2014).
51. Sato, A., et al. MEK-ERK signaling dictates DNA-repair gene MGMT expression and temozolomide resistance of stem-like glioblastoma cells via the MDM2-p53 axis. *Stem Cells* **29**, 1942–1951 (2011).
52. Tallarida, R. J. Statistical analysis of drug combinations for synergism. *Pain* **49**, 93–97 (1992).
53. Tallarida, R. J., Stone, D. J. R., McCary, J. D., Raffa, R. B. Response surface analysis of synergism between morphine and clonidine. *J. Pharmacol. Exp. Ther.* **289**, 8–13 (1999).
54. Tallarida, R. J. The interaction index: a measure of drug synergism. *Pain* **98**, 163–168 (2002).
55. Fernando, P., Brunette, S., Megeny, L. A. Neural stem cell differentiation is dependent upon endogenous caspase 3 activity. *FASEB. J.* **19**, 1671–1673 (2005).

Acknowledgments

This work was supported by the FIRB, Bando Futuro in Ricerca 2010 (Grant RBFR10ZJQT).

Contributions

S.D., E.Z. and E.D.P. performed most of the biological work. S.S., G.N. and P.C. synthesized the compounds. B.C. and S.R. conceived the idea and conducted the design. C.M. coordinated the project. S.D., B.C. and S.R. wrote the main manuscript text. L.M. and E.N. provided important help in the significance of the results and in writing article discussion section. All authors reviewed the manuscript.

Additional information

Supplementary information accompanies this paper at <http://www.nature.com/scientificreports>

Conflict of interest: The authors declare no conflicts of interest.

How to cite this article: Daniele, S. et al. Combined inhibition of AKT/mTOR and MDM2 enhances Glioblastoma Multiforme cell apoptosis and differentiation of cancer stem cells. *Sci. Rep.* **5**, 9956; DOI:10.1038/srep09956 (2015).



This work is licensed under a Creative Commons Attribution 4.0 International License. The images or other third party material in this article are included in the article's Creative Commons license, unless indicated otherwise in the credit line; if the material is not included under the Creative Commons license, users will need to obtain permission from the license holder in order to reproduce the material. To view a copy of this license, visit <http://creativecommons.org/licenses/by/4.0/>