



Contents lists available at ScienceDirect

Biochimica et Biophysica Acta

journal homepage: www.elsevier.com/locate/bbacan

Review

Angiogenic factors as potential drug target: Efficacy and limitations of anti-angiogenic therapy

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ARTICLE INFO

Article history:

Received 19 February 2014

Received in revised form 5 May 2014

Accepted 7 May 2014

Available online xxxx

Keywords:

Tumor angiogenesis

Pro-angiogenic cytokines

Anti-angiogenic therapy

ABSTRACT

Formation of new blood vessels (angiogenesis) has been demonstrated to be a basic prerequisite for sustainable growth and proliferation of tumor. Several growth factors, cytokines, small peptides and enzymes support tumor growth either independently or in synergy. Decoding the crucial mechanisms of angiogenesis in physiological and pathological state has remained a subject of intense interest during the past three decades. Currently, the most widely preferred approach for arresting tumor angiogenesis is the blockade of vascular endothelial growth factor (VEGF) pathway; however, the clinical usage of this modality is still limited by several factors such as adverse effects, toxicity, acquired drug resistance, and non-availability of valid biomarkers. Nevertheless, angiogenesis, being a normal physiological process imposes limitations in maneuvering it as therapeutic target for tumor angiogenesis. The present review offers an updated relevant literature describing the role of well-characterized angiogenic factors, such as VEGF, basic fibroblast growth factor (bFGF), platelet derived growth factor (PDGF), placenta growth factor (PLGF), hepatocyte growth factor/scatter factor (HGF/SF) and angiopoietins (ANGs) in regulating tumor angiogenesis. We have also attempted to discuss tumor angiogenesis with a perspective of 'an attractive target with emerging challenges', along with the limitations and present status of anti-angiogenic therapy in the current state-of-the-art.

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Abbreviations: VEGF, vascular endothelial growth factor; CRC, colorectal cancer; VEGFR, VEGF receptors; PLGF, placental growth factor; HGF, hepatocyte growth factor; IL, Interleukin; Del-1, developmentally-regulated endothelial cell locus 1 protein; FGF, fibroblast growth factors; CXCL1/Groα, growth-regulated alpha protein; CXCL6/GCP2, granulocyte chemotactic protein 2; bFGF, basic fibroblast growth factor; PDGF, platelet derived growth factor; HGF/SF, hepatocyte growth factor/scatter factor; ANG, angiopoietin; VPF, vascular permeability factor; kDa, kilo Dalton; Flt, Fms-like tyrosine kinase; Flk, fetal liver kinase; KDR, kinase insert domain receptor; HIF-1α, hypoxia inducible factors; NRP, neuropilin; SAF-1, serum amyloid A activating factor 1; HSPGs, heparan sulfate proteoglycans; FGFR, fibroblast growth factor receptors; PDGF-B, platelet-derived growth factor-Beta; miR, microRNA; FP1039, Five Prime Therapeutics; EC, endothelial cell; MMP, matrix metalloproteases; ET-1, endothelin-1; TGF, transforming growth factor; TNF, tumor necrosis factor; PO₂, partial pressure of oxygen; SMCs, smooth muscle cells; HUVEC, human umbilical vein endothelial cell; MAPK, Mitogen-activated protein kinase; PI3K, Phosphoinositide 3-kinase; PKC-zeta, Protein kinase C zeta; Sp1, specificity protein 1; U1snRNA, U1 small nuclear RNA; Tie-2, tunica intima endothelial kinase 2; GBM, glioblastoma multiforme; Erk, extracellular signal-regulated kinase; TKIs, tyrosine kinase inhibitors; mTOR, mammalian target of rapamycin; EGFR, epidermal growth factor receptor; DLL4, delta-like ligand 4; ECP, endothelial cell progenitor; G-CSF, granulocyte colony-stimulating factor; SDF, stromal derived factor; CECs, circulating endothelial cells; VCAMS, vascular cell adhesion proteins; NPDD, nanoparticle mediated drug delivery; hCG, human chorionic gonadotropin; ESDN, endothelial and smooth muscle cell-derived neuropilin-like protein

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0304-419X/© 2014 Published by Elsevier B.V.

Please cite this article as: R.N. Gacche, R.J. Meshram, Angiogenic factors as potential drug target: Efficacy and limitations of anti-angiogenic therapy, Biochim. Biophys. Acta (2014), <http://dx.doi.org/10.1016/j.bbcan.2014.05.002>

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56

57 1. Introduction

58 Since the publication of Judah Folkman's hypothesis that tumor
59 growth is angiogenesis-dependent and a solid tumor must obtain an in-
60 dependent blood supply for its sustainable growth [107], the literature
61 on angiogenesis research is accumulating in logarithmic fashion. Angio-
62 genesis is a physiological process of development of new blood vascular
63 network required for normal body functioning; however, clinically and
64 pathologically it has been recognized as a basic prerequisite for progres-
65 sion, proliferation and metastatic spread of solid tumors. At the site of
66 angiogenesis, new capillaries sprout from pre-existing vessels and
67 there occurs remodeling transition from avascular to vascular phases
68 via neovascularization. Cascade of events activated by several pro-
69 angiogenic factors happens during the process of tumor angiogenesis
70 involving mainly dissolution of vascular basal membrane, increased
71 vascular permeability and degradation of extracellular matrix resulting
72 in endothelial cell migration, invasion, proliferation and tube formation
73 [250]. Physiological angiogenesis is a complex process that is tightly
74 controlled & regulated by numerous pro-angiogenic peptides as well
75 as by an array of inhibitory factors; however, in pathological angiogen-
76 esis, there occurs an imbalance between pro- and anti-angiogenic fac-
77 tors [49]. Tumors can exist in dormant state for months or years
78 without neovascularization by balancing pro- and anti-angiogenic fac-
79 tors. However, during tumor growth there is a change in angiogenic
80 switch more in favor of pro-angiogenic phenotype. Subsets of the
81 tumor with a pro-angiogenic phenotype secrete their own angiogenic
82 factors and also retrieve angiogenic substances from the surrounding
83 extracellular matrix, and induce host cells (monocytes/macrophages)
84 to synthesize angiogenic molecules. Thus there occurs a shift in the mi-
85 croenvironment of the tumor in favor of the pro-angiogenic stimuli, ei-
86 ther by down-regulation of endogenous angiogenic inhibitors or
87 through up-regulation of pro-angiogenic cytokines. As a result of this
88 shift, an angiogenic switch is activated causing a continuous neovessel
89 formation emanating from the normally quiescent vasculature, which
90 sustains tumor growth [6,130,131].

91 A plethora of research findings have accumulated in the literature,
92 especially the pioneer angiogenesis research by Folkman [106–109,
93 Q3 261], and [98,100,104,274] has unraveled the fundamental and baseline
94 secrets of angiogenic switch and played a leading role in establishing
95 angiogenesis as a therapeutic target in the mainstream of anticancer re-
96 search. This fundamental research was successfully transformed into
97 therapeutic modality by Dr. Ferrara and his team at Genentech Ltd.
98 (San Francisco, USA) which led to the development of Bevacizumab
99 (Avastin), the first (VEGF) targeted anti-angiogenesis cancer therapy,
100 approved by the FDA in 2004. In the current clinical practices, Avastin
101 has been prescribed as a treatment of first-line therapy for colorectal
102 cancer (CRC), neoadjuvant chemotherapy for breast cancer, metastatic
103 breast cancer, non-small-cell lung cancer, metastatic renal cell carcino-
104 ma, and as second-line therapy in CRC and glioblastoma multiforme [23,
105 85,101]. Thus, development of a humanized anti-VEGF antibody for the
106 treatment of cancer targeting angiogenesis stands out as landmark
107 achievements in anti-cancer research.

108 Advances in the molecular biology, clinical biochemistry and patho-
109 physiology of tumor growth led to a concrete understanding about the
110 up- and down-regulation of angiogenic switch. Nevertheless, different

111 strategies have been designed to stimulate or arrest the growth of
112 new blood vessels and also identified potential ways to interfere with
113 the process of tumor growth. The concept of treating solid tumors by
114 targeting tumor angiogenesis is not new; rather it is more discussed in
115 recent years owing to its significance as targeted anticancer therapy ex-
116 tending the life span of cancer patients. A plethora of literature has accu-
117 mulated in recent years describing the significance of targeting tumor
118 angiogenesis for the design and development of novel antitumor agents
119 that arrest tumor growth [47,49,115,116,163,197,222]. A review pro-
120 viding a comprehensive information on functional and structural pecu-
121 liarities of the various angiogenic peptides, especially emphasizing
122 more on structural opportunities available for manipulating functions
123 of major angiogenic peptides has been recently published [114].

124 2. How many angiogenic factors support tumor growth?

125 A series of pro-angiogenic peptides especially the cytokines belong-
126 ing to the vascular endothelial growth factor (VEGF) family such as
127 VEGF A, B, C, D and VEGF receptors (VEGFR1, & 2), placental growth
128 factor (PLGF), hepatocyte growth factor (HGF), axon guidance factors
129 (semaphorin-4D, slit-2), interleukins (ILs-1, 6, 8 and stromal cell-
130 derived factor 1), pro-angiogenic chemokines such as developmentally-
131 regulated endothelial cell locus 1 protein (Del-1), β -estradiol, ephrins,
132 fibroblast growth factors (FGF 1 & 2), follistatin, chemokines like
133 Growth-regulated alpha protein (CXCL1/Gro α), Granulocyte chemotac-
134 tic protein 2 (CXCL6/GCP2) and angiopoietins have been reviewed in re-
135 lation to their functional attributes with tumor angiogenesis [97,119,191,
136 216,249]. Fig. 1 summarizes the role of various angiogenic factors
137 discussed in this study.

138 Effective novel targeted therapies with improved therapeutic index
139 are warranted and angiogenesis is being considered as an attractive tar-
140 get. Designing strategies for targeting the pro-angiogenic peptides for
141 the treatment of angiogenesis linked human ailments remains an excit-
142 ing research area for further investigation. Extensive research on angio-
143 genesis in recent years has discovered a series of new pro-angiogenic
144 factors having direct or indirect influence in tumor angiogenesis. An up-
145 dated list of more than 40 endogenous molecules that directly or indi-
146 rectly influence angiogenesis, along with few others, being assessed
147 and suspected for their angio-regulatory activities are summarized in
148 Table 1.

149 With the advancement of technology and thereby more clear under-
150 standing about the pathophysiology of tumor development and the sig-
151 naling pro-angiogenic factors, significant efforts have been made in
152 converting these factors as therapeutic targets for designing novel
153 antiangiogenic drugs [47,95,149,222]. An updated literature describing
154 the role of best-characterized angiogenic factors such as VEGF, bFGF,
155 PDGF, PLGF, HGF/SF and ANGs in regulating tumor angiogenesis is de-
156 scribed below with special reference to the currently available drugs de-
157 signed against these pro-angiogenic factors.

158 2.1. VEGF cytokine family

159 The pioneer work on vascular permeability factor (VPF) by [261],
160 and the sequencing of VEGF by Ferrara and Henzel [100], revealed the
161 identical nature of both factors that brought together important

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