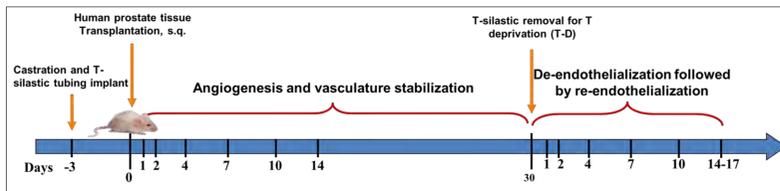
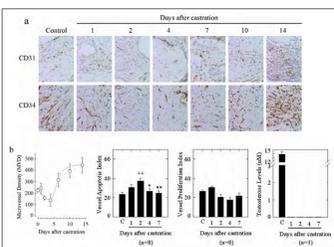


## Introduction

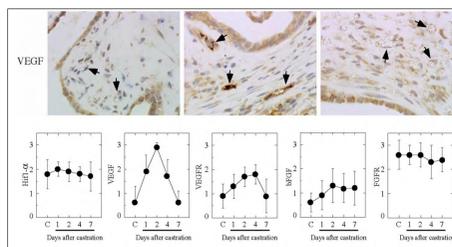
- Human endothelial cells (EC) lining the tumor vasculature of human prostate adenocarcinoma are preserved in primary xenografts of intact surgical remnant tissue.
- Androgen deprivation (AD) causes apoptosis in AR-expressing endothelial cells.
- Testosterone-deprivation (T-D) leads to a rapid loss of 40-60% of Ecs resulting in de-endothelialization of the vasculature of primary xenografts.
- De-endothelialization is followed by re-endothelialization with human endothelial cells in the absence of T.
- This study determined the consequences of targeted perturbation of human prostate endothelium on access of chemotherapeutic agents to prostate cancer (CaP) cells.



**Fig 1. Model overview** - SCID or nude mice were “humanized” to mimic human circulating T. Mice were castrated and implanted with T-silastic tubing 3-7 days before subcutaneous (s.q.) transplantation with 8-10 pieces of fresh clinical prostate tissue. Over the initial 14 days after transplantation there was a burst of angiogenesis by the human endothelial cells resulting in a 5-10 fold increase in MVD. Endothelium stabilized by 2 weeks after implantation. Removal of T-silastic tubing (T-D) induced acute endothelial cell involution that can be monitored over the 14-17 days after T-D.



**Fig 2. T-D induced dynamic vascular changes.**



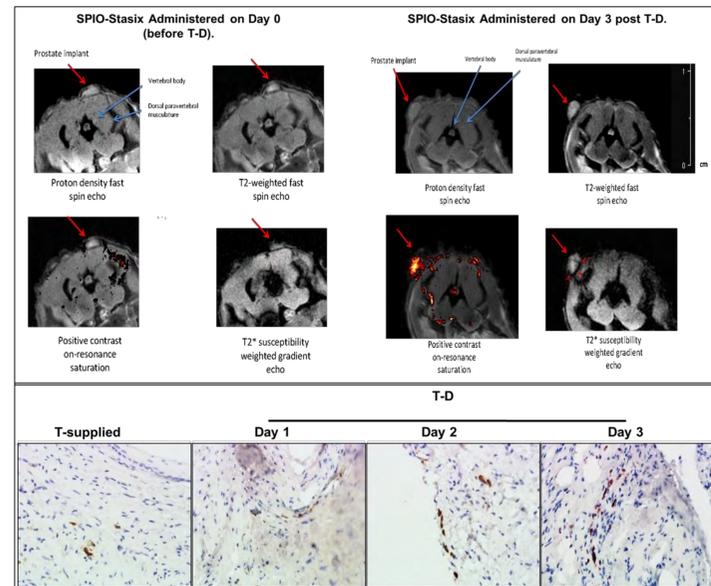
**Fig 3. Angiogenic signaling molecules were upregulated after T-D.**

## Experimental Procedures

- Fresh clinical prostate tissue and tissue transplanted onto “humanized” mice were used.
- Vasculature leakage was measured using MRI (contrast dye), MS (nano particles), IHC (lectins), and photo-acoustic imaging (hemoglobin).
- Cell isolation: Tissue specimens were disaggregated enzymatically. Epithelial cells and endothelial cells were enriched using human EpCAM- and CD31-conjugated magnetic beads, respectively. Cells in the final flow-through after the cell type-specific enrichment steps was considered as stromal cells.
- Transcriptomes of isolated cells of each cell type were acquired using RNASeq.
- Cisplatin (Cis-Pt) was investigated due to its membrane transporter/pump regulated uptake and efflux, and efficiency in targeting slow-growth cancer cells.
- Cis-Pt DNA adducts were analyzed using specific antibody or Cytof.

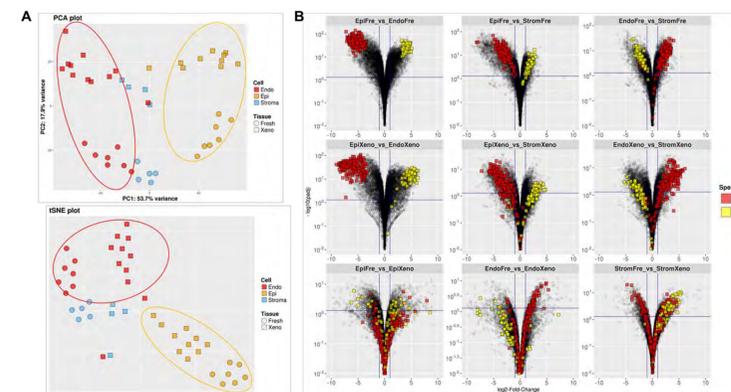
## Results

### Compromised Endothelial Barrier Upon T-D



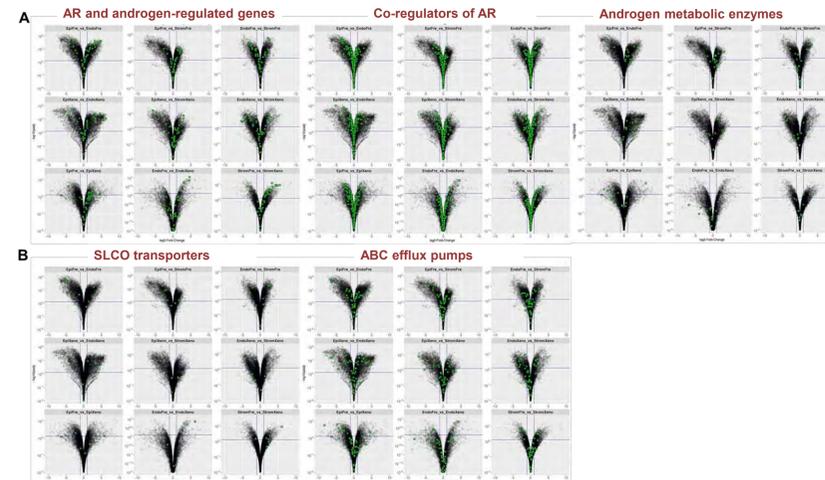
**Fig 4. Increased tissue localization of Stasix® particles (platelets) in prostate tissue following T-D.** Upper panel shows MRI signals. Lower panel shows IHC staining using the platelet specific marker CD42b. Platelets were injected via the tail vein on Day 3 post T-D and allowed to circulate for 15 minutes. Stasix® particles were from Entegriom, Inc., Research Triangle Park, NC. Imaging was performed by Dr. Christopher Lascola, MD, Duke University Medical Center with a 5T Bruker MRI.

Transcriptomes were distinctive among cell types but similar in cells of the same cell type isolated from fresh tissue and tissue transplant



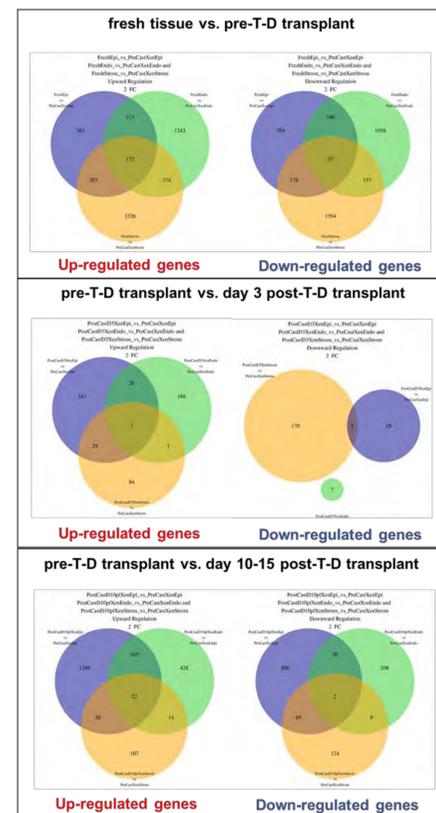
**Fig 5. RNASeq data demonstrated successful isolation of the 3 cell types.** Epithelial cells and endothelial cells were clustered separately by global genes, whereas stromal cells showed gene profiles overlapping epithelial and endothelial cells (A). Epithelial cell-specific and endothelial cell-specific gene sets each maintained similar in general between fresh tissue (Fre) and pre-castration transplant (Xeno) (B).

### Cell type-specific expression of AR-related genes and drug uptake/efflux membrane transporter/pumps genes



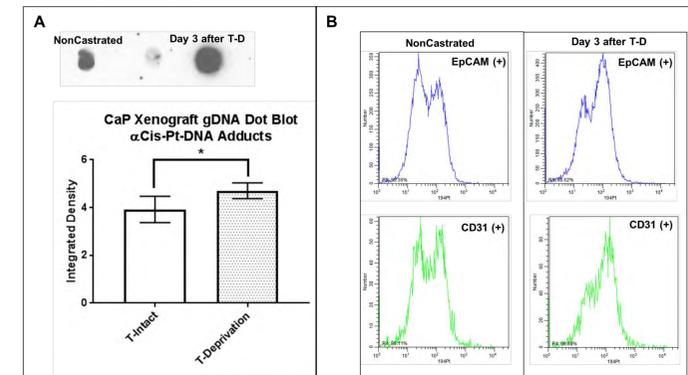
**Fig 5. RNASeq data analysis compared AR-related genes (A) and drug uptake/efflux-related genes (B).** Both cell type-specific and ubiquitous genes were noted. Same type of cells from fresh tissue and tissue transplant shared similar gene profiles.

### Global gene expression showed dynamic changes in cells in response to T-D



**Fig 6. RNASeq data analysis showed dynamic changes in all 3 cell types in response to T-D.** FC, fold of change  $\geq 2$ .

### T-D increased tissue exposure to Cis-Pt



**Fig 7. Mice were treated with Cis-Pt before T-D or 3 days after T-D.** (A) Genomic DNA was prepared using tissue transplants. Cis-Pt DNA adducts were assessed using dot blotting and an antibody specific to DNA-Cis-Pt. (B) Genomic DNA was prepared from epithelial cells (EpCAM +) or endothelial cells (CD31+). DNA-Cis-Pt adducts were measured using mass cytometry.

## Summary of key findings

- T-D induced a “window” for increased access of therapeutics to prostate tissue.
- T-D increased tissue and cellular exposure to Cis-Pt.
- Cell type-specific enrichment was efficient.
- Transcriptomes were comparable within the same cell type isolated from fresh tissue and pre-T-D tissue transplant.
- T-D induced dynamic changes in transcriptomes in epithelial, endothelial and stromal cells.
- Transcriptomes evolved over the time after T-D.
- Transcriptomes of endothelial cells before and after T-D were different markedly.
- Profiles of uptake transporters and efflux pumps varied among cell types, and evolved in response to T-D.

## Conclusions

- Primary tissue transplants provide a unique tool for analysis of the roles of targeted microvascular damage in organ-specific therapies.
- Evolution of the endothelial compartment and stromal compartment in response to iatrogenic intervention may be important to cancer biology and delivery of therapeutics.

## Support for research

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