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# Hypoxia differently modulates the release of mitochondrial and nuclear DNA

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### Abstract (words: 199/200)

Background: We investigated the influence of hypoxia on the concentration of mitochondrial
and nuclear cell-free DNA (McfDNA and NcfDNA, respectively).

Method: By an ultra-sensitive qPCR-based assay, McfDNA and NcfDNA were measured in the supernatants of different colorectal cell lines, and in the plasma of C57/Bl6 mice engrafted

27 with TC1 tumor cells, in normoxic or hypoxic conditions.

28 Results: Our data when setting cell culture conditions highlighted the higher stability of 29 McfDNA as compared to NcfDNA, and revealed that cancer cells released amounts of nuclear DNA equivalent to the mass of a chromosome over a 6-hour duration of incubation. In cell 30 31 model, hypoxia induced a great increase in NcfDNA and McfDNA concentrations within the first 24 hours. After this period, cfDNA total concentrations remained stable in hypoxia 32 consecutive to a decrease of nuclear DNA release, and noteworthy, to a complete inhibition of 33 34 daily mitochondrial DNA release. In TC1-engrafted mice submitted to intermittent hypoxia, plasma NcfDNA levels are much higher than in mice bred in normoxia, unlike plasma 35 McfDNA concentration that is not impacted by hypoxia. 36

Conclusion: This study suggests that hypoxia negatively modulates nuclear and particularly
mitochondrial DNA releases in long-term hypoxia, and revealed that the underlying
mechanisms are differently regulated.

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41 **Keywords:** Hypoxia, Cancer, nuclear cfDNA, mitochondrial cfDNA.

### **Background**

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Hypoxia plays a key role in tumor progression, cell differentiation and metabolism, as well as 45 in cell death and survival (1-3). The adaptation of cancer cells to the hypoxic tumor 46 microenvironment is critical to their survival and proliferation (4). At the molecular level, 47 48 cancer cells modify their metabolism, promote aerobic glycolysis, and decrease mitochondrial oxidative phosphorylation, independent of cellular oxygenation levels (5). This process is 49 known as the Warburg effect (6-8). Since that discovery, many studies demonstrated the 50 impact of hypoxia on tumor progression, revealing a number of critical effects on 51 angiogenesis (9), metastatic potential (10), protein synthesis(11), nuclear and mitochondrial 52 DNA replication (12,13). Moreover, the aberrant angiogenesis and rapid cell proliferation 53 create tumor areas with different degrees of hypoxia (14). Studies have shown that hypoxic 54 55 tumor cells are more resistant to radiotherapy (15) and to many commonly used chemotherapeutic agents (16). In clinical oncology, the presence of hypoxic cells in solid 56 57 tumors is closely associated with a poor prognosis and survival in patients with many types of cancer (17-19). Epidemiological studies have associated higher mortality and increased 58 cancer aggressivity in patients with intermittent hypoxia due to obstructive sleep apnea 59 60 (20,21). Moreover, recent studies of the plasma of mice under intermittent hypoxia have shown a correlation between oxygen deprivation in the tumor microenvironment and the 61 presence of circulating cell-free DNA (cfDNA) (22,23). Interestingly, several reports have 62 demonstrated the significant potential of cfDNA analysis in clinical oncology (24). For 63 instance, cfDNA detection can allow the identification of minimal residual disease (25,26), 64 the monitoring of drug efficacy or resistance (27–29), and prognosis of the disease (30,31). 65 The potential of circulating cfDNA analysis was further shown in a recent analysis we 66 performed on a large number of plasma samples taken from metastatic colorectal cancer 67

(mCRC) patients, in which we compared the plasmatic concentrations of circulating cfDNA 68 of nuclear (NcfDNA) and mitochondrial (McfDNA) origins. This analysis showed 69 significantly higher NcfDNA concentrations in mCRC patients as compared to healthy 70 71 subjects, while McfDNA concentrations were lower (32-35). However, our understanding of the structure and origins of cfDNA, of their pharmacokinetics, and of the correlation between 72 DNA release and tumor biology in different physiological states, especially hypoxia, remains 73 limited (36). The aim of the present work is to study the effect of hypoxia on the release of 74 75 DNA of both nuclear and mitochondrial origins. First, we set the appropriate cell culture conditions for optimizing biological observations, in particular extracellular cfDNA stability 76 and accumulation with incubation time. Thereafter, we determined the level and kinetics of 77 the DNA release in normoxic and hypoxic conditions in cancer cell lines. We also used an in 78 vivo autologous model to evaluate the amount of circulating NcfDNA and McfDNA in the 79 80 plasma of mice engrafted with tumor cells, which were subjected to normoxia or intermittent hypoxia as previously performed by our group (22). 81

82

#### **Methods**

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#### 86 Cell culture and cell lines

Human colorectal cancer cell lines (SW620, SW480 and HCT116) were cultured in RPMI-87 1640 medium (Wako, Osaka, Japan). DiFi and DLD1 cell lines were cultured in Dulbecco's 88 Modified Eagle medium (DMEM Life Technology, UK). All media were supplemented with 89 10% of fetal bovine serum (FBS, Eurobio) and 100µg/ml of penicillin-streptomycin 90 (Gibco<sup>TM</sup>). For normoxic conditions, the cells were classically incubated at 37°C in 91 humidified atmospheric air with 5% CO<sub>2</sub> addition. For hypoxic incubation, cells were placed 92 93 in an incubator upon 0.5% O2, 94.5% N2 and 5% CO2. Cell lines were routinely tested for mycoplasma contaminations. 94

95

#### 96 **Tumor animal models**

C57BL/6J male mice (7 weeks old) were acquired from Jackson Laboratories (Bar Harbor, 97 ME). Twelve mice were placed in designed environmental chambers and subjected to 98 intermittent hypoxia (IH), in alternating cycles of 90 seconds (6% FIO<sub>2</sub> followed by 21% 99 FIO<sub>2</sub>, 20 cycles/h) for 12 h/d. A control group (n=9) was exposed to continuous circulating 100 room air (RA). After 2 weeks of exposure, 1.5x10<sup>5</sup> TC-1 cells (ATCC, Manassas, VA 20110 101 USA) were suspended in 200 µl sterile PBS and injected into the middle right flank of each 102 animal that were then exposed to the same protocol (RA or IH) during 4 weeks. The tumor 103 growth was monitored three times per week using a calibrated caliper. Carbon dioxide (CO<sub>2</sub>) 104 gas was used for euthanasia, and the depth of anesthesia was monitored by toe pinch followed 105 by cervical dislocation as per the institutionally approved ethical protocol. These procedures 106 were always conducted between 9:00-11:00 am in specially designated surgical room within 107 the institutional vivarium. At the time of sacrifice (28 days after tumor injection), blood was 108

109 collected from the tail, tumors were harvested for volume and weight measurements, and 110 processed for histologic and biochemical analyses. All experimental procedures were 111 approved by The Institutional Animal Care and Use Committee of the University of Chicago 112 (protocol# 2190). Plasma samples were sent to IRCM (France) for blind cfDNA 113 measurements.

114

## 115 Sample treatment and cfDNA extraction

All methods were performed according to the pre-analytical guidelines previously established by our group (37). Supernatants from cultured cancer cell lines or mice plasma were harvested in Eppendorf tubes, centrifuged to remove all cells (1,200g; 10min), and then frozen until use. After thawing, samples were centrifuged at 16,000g for 10 minutes at 4°C to remove cellular debris and organelles (38,39). The supernatants were then transferred to 1.5ml Eppendorf tubes and immediately extracted using the Qiagen Blood Mini Kit (Qiagen, CA), according to the manufacturer's protocol. DNA was eluted from the column with 80µL of elution buffer.

123

# 124 Measurement of cfDNA concentration by qPCR and evaluation of MNR and DNA 125 integrity.

126 Table 1 describes the primers used to selectively amplify human and murine DNA sequences of nuclear and mitochondrial origins. The design of the primer system was performed under a 127 stringent selective process. Quantifications of human NcfDNA and McfDNA were performed 128 129 from the amplification of a 67bp sequence on the KRAS gene (24,31) and a 67bp sequence on the MT-COX-3 gene (short nuclear and mitochondrial amplicons respectively) (32). 130 Fragments of 305bp and 296bp (long nuclear and mitochondrial amplicons, respectively) 131 were amplified to evaluate DNA fragmentation by calculating the DNA Integrity Index (DII) 132 (the ratio between long and short amplicon quantifications) (40,41). Theoretically, the lower 133

the DII, the more cfDNA is fragmented. The Mitochondrial to Nuclear Ratio (MNR) 134 corresponds to the ratio of the concentration of the McfDNA to that of NcfDNA, each 135 calculated via short amplicon quantification. In order to quantify the murine circulating 136 137 cfDNA, primers targeting murine KRAS (61bp for short amplicon, 146bp for long amplicon) or murine COX-1 (114bp for short amplicon) were used for NcfDNA and McfDNA 138 quantifications respectively. Quantitative PCR (q-PCR) was performed in a final reaction 139 volume of 25µl, which was composed of 12.5µl of PCR mixture (Bio-Rad iQ SYBR Green 140 Supermix), 2.5µl of each amplification primer (3pmol/ml), 2.5µl of PCR-quality water, and 141 5µl of DNA sample. Real-time q-PCR was performed as follows: hot polymerization 142 143 activation-denaturation, performed for 3 minutes at 95°C, followed by 40 repeated cycles at 95°C for 10 seconds and then at 60°C for 30 seconds. After amplification, melting curves 144 were generated by increasing the temperature from 60°C to 90°C in increments of 0.2°C, to 145 confirm the specificity of the PCR product. Human McfDNA concentrations were calculated 146 in ng/ml, using an internal standard curve composed of serial dilutions of a 3382bp human 147 148 plasmid vector containing a unique MT-CO3 gene sequence (ABM good®). The 149 concentration and the purity of the vector solution were determined by measuring the optical density with a BioPhotometer® D30 spectrophotometer (Eppendorf). Human NcfDNA 150 151 concentrations were calculated using an internal standard curve composed of serial dilutions of genomic DNA from human colorectal cancer cells previously quantified by a 152 BioPhotometer® D30 spectrophotometer, and expressed as ng/ml. The murine genomic DNA 153 154 from Promega was used to produce a standard curve. Concentrations of the standard curve were expressed as ng/ml, and were used to determine the concentration of NcfDNA and 155 McfDNA in the murine plasma. Mean values were calculated from triplicate reactions, and 156 157 internal negative controls with PCR-quality water were routinely used.

#### 159 Stability of extracellular cfDNA and evaluation of daily released DNA

Supernatants from DLD1 and SW620 cells, previously cultured during 24h in T25 flasks (1 160 161 million cells in 10ml culture medium) were harvested after a 24-hour period of culture, centrifuged and then placed in an incubator at 37°C for 4 days, to evaluate the intrinsic 162 stability of extracellular DNA over time independently of the cells. Each day, DNA was 163 extracted from 400µl of supernatant and McfDNA and NcfDNA concentrations were 164 evaluated by qPCR as described in previous paragraph. Short and long amplicons were 165 quantified to measure concentrations of both NcfDNA (67bp and 305bp respectively) and 166 McfDNA (67bp and 296bp respectively). This allowed us to establish the equation necessary 167 to estimate the amount of daily released extracellular DNA every 24 hours in the culture 168 169 medium:

170 
$$[cfDNA]_{neo-released} = [cfDNA]_{measured} - [cfDNA]_{stable}$$

171

## 172 Statistical analysis

173Data are expressed as the mean (+/-) standard deviation. A non-parametric statistical Mann-174Whitney U test was used to compare different groups of mice (Graph Pad Prism Software175V7). Correlations were assessed using Spearman's non-parametric method. In all figures,176statistical analyses were performed at the conventional significant p-value (p): \*p  $\leq$  0.05, \*\*p177 $\leq$  0.01, \*\*\*p  $\leq$  0.001, \*\*\*\*p  $\leq$  0.0001.

**Results** 

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179

# NcfDNA and McfDNA stability in supernatants from DLD1 and SW620 cell cultures 181 As shown in figures 1a (DLD1 cell line) and 1b (SW620 cell line), the concentration of 182 NcfDNA, measured via the detection of the long nuclear amplicon (black circles, full lines), 183 dropped rapidly at D1: only 4% (DLD1 cells, fig.1a) and 7% (SW620 cells, fig.1b) of the 184 185 concentration measured at D0 could be recovered. On the other hand, NcfDNA, measured via the detection of the short amplicon (black squares, dashed lines), remained relatively stable 186 from D1 to D3 after a loss of 40% between D0 and D1, in DLD1 (fig.1a) or SW620 (fig.1b) 187 188 supernatants. Likewise, McfDNA concentrations (67bp and 296bp amplicons) decreased between D0 and D1 (40% loss), but then remained stable after D1. This stability was 189 highlighted by the mitochondrial DII (DNA Integrity Index) value, which remained constant 190 191 at 0.5 (fig.1c, dashed lines), in both cell lines. These profiles should be compared to the significant decrease of nuclear DII from 0.4 at D0 to 0.01 at D3 (fig.1c, full lines). 192 Noteworthy, MNR values, calculated from short amplicons measurements, remained constant 193 throughout the study delay, whatever the cell line (fig.1d). Thus, we show the high stability of 194 short extracellular DNA amplicons of nuclear and mitochondrial origins in cell culture 195 196 medium in the absence of cells: 60% of NcfDNA and McfDNA were recovered after 24-hour incubation (as compared to D0 of incubation), and 40% of this amount is recovered after 48h 197 of incubation. These results are of importance and will be used to calculate the daily release of 198 199 DNA in normoxic vs hypoxic conditions.

200

# 201 <u>Release of DNA in the supernatant of colorectal cancer cell lines</u>

In order to address the question of the impact of the cell type on DNA release, different colorectal cancer cell lines (DiFi, HCT116 or SW620) were seeded at different concentrations

(25,000, 100,000 or 400,000 cells per well). After 6-hour of incubation, culture media and 204 cells were collected and processed in order to quantify NcfDNA and McfDNA by qPCR. As 205 shown in figure 2, levels of NcfDNA (fig.2a) and McfDNA (fig.2b) increased with the 206 207 number of starting cells, regardless of the cell line tested. The same observation can be made regarding intracellular DNA (evaluated with the same qPCR protocol as the supernatants), 208 209 which showed increased amounts of genomic DNA (fig.2c) and mitochondrial DNA (fig.2d) in cell pellets. Noteworthy, we also observed that the proportion of cfDNA as compared to 210 intracellular DNA is fairly constant, whatever the cell line: between 0.6% and 2.8% of nuclear 211 DNA was released from cells in 6 hours (fig.2e). Lower proportions of mitochondrial DNA 212 213 (from 0.14 to 0.22% of total mitochondrial DNA) were found in the supernatants, as compared to nuclear cfDNA. Finally, we were able to confirm the remarkable stability of the 214 MNR parameter in cell supernatants, regardless of the number of cells (fig.2f). It is also 215 216 interesting to note that the MNR value varied according to cell type: due to a lower mitochondrial DNA release, the SW620 cell line showed relatively lower MNR values in the 217 218 extracellular medium, compared with the DiFi and HCT116 cell lines.

219

### 220 Hypoxia effect on the release of DNA in SW620 cancer cell lines

221 After seeding SW620 cells for 24 hours, the culture medium was replaced with a fresh medium and cells were cultured either in normoxic conditions or hypoxic conditions. 222 Sequential aliquotes of the same supernatant were sampled during 3 days (D1 to D3). In 223 normoxic condition, the total concentrations of NcfDNA and McfDNA increased during the 3 224 days of incubation, from 2.5 to 15.4 ng/ml (p=0.0002) and from 0.05 to 0.14 ng/ml 225 (p=0.0194) respectively (fig.3a and 3b, normoxia panels). Under hypoxic conditions, total 226 NcfDNA concentration was significantly higher in the first day of hypoxia (5 times greater 227 than under normoxic conditions; p=0.01), and stabilized over time at 16.2 ng/ml at D3 (fig.3a, 228

hypoxia panel). The total McfDNA concentration increased significantly in the first day of 229 230 hypoxia (25 times greater than under normoxia; p=0.004), and decreased slightly throughout the period of the study (1.37 to 0.77 ng/ml; Fig. 3b, p=0.0436). When examining DNA release 231 within one day, different cell behaviors can be distinguished. Indeed, thanks to the results 232 described in figure 1, we know that the concentrations of cfDNA measured at D2 include 60% 233 of DNA released during the [0-24h] period, while cfDNA measured at D3 include 60% of 234 DNA released during the [24h-48h] period and 40% of DNA released during the [0-24h] 235 period. Thus, the daily release of DNA can be calculated on the basis of the following 236 algorithm: 237

 $cfDNA_{[0-24h]} = cfDNA_{D1}$ 

239  $cfDNA_{[24-48h]} = cfDNA_{D2} - 60\% cfDNA_{[0-24h]}$ 

240  $cfDNA_{[48-72h]} = cfDNA_{D3} - 60\% cfDNA_{[24-48h]} - 40\% cfDNA_{[0-24h]}$ 

241 Consequently, under normoxic conditions, daily nuclear and mitochondrial DNA releases account respectively for 70% and 65% of the total concentrations measured at D2, and for 242 243 80% and 62% of the total concentrations measured at D3 (fig.3c and 3d, normoxia panels). Under hypoxia, daily release of nuclear DNA decreased down to 50% of the total NcfDNA 244 concentration at D3, while daily mitochondrial DNA release dropped below 0.1% of the 245 initial concentration by D3 (fig.3c and 3d, hypoxia panels). This difference of profile between 246 normoxia and hypoxia is also illustrated in figures 3e and 3f. The nuclear DII remained low 247 under hypoxia during the 3 days of the study (0.03 to 0.14; black triangles; fig.3e), as 248 compared to normoxia (0.299 to 0.48; white squares; fig.3e). MNR also progressively 249 decreased from 0.09 down to 0.04 in hypoxia, while remaining very low in normoxia (from 250 251 0.008 to 0.018; fig.3f).

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#### 253 Hypoxia influences tumor weight and plasma cfDNA levels in grafted mice

Twenty one C57BL/6j mice engrafted with murine TC1 cells were used for in vivo 254 experiment; nine of these mice were exposed to normoxia, while twelve were exposed to 255 intermittent hypoxia according to the experimental procedure depicted on figure 4a. Plasmatic 256 257 circulating cfDNA concentrations were assessed in both conditions. Data showed a significant increase of the NcfDNA concentration in plasma from mice under intermittent hypoxia as 258 compared to normoxia (fig.4b, p= 0.0142). Conversely, McfDNA concentration was slightly 259 decreased (but not significantly; fig.4c, p=0.1886). As a result, intermittent hypoxia greatly 260 reduced the MNR in the plasma of grafted mice (fig.4e, p=0.0022). In contrast, no statistical 261 difference was observed for nuclear DII (fig.4d, p=0.2861). 262

As shown in figure 4f, intermittent hypoxia increased tumor weight (p=0.0001). Conversely, its impact on mice growth (delta body weight, dBWT) was slightly negative (fig.4g; p=0.0359). Correlations between tumor weight and other parameters were assessed in the grafted mice: NcfDNA is positively correlated to tumor weight (supplementary fig.1a; r=0.5992; p=0.0041), whereas MNR is negatively correlated to tumor weight (supplementary fig.1d; r=-0.5054; p=0.0194). McfDNA and nuclear DII are not significantly correlated to tumor weight (Supplementary fig.1b and 1c respectively).

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#### **Discussion**

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DNA molecules of nuclear and mitochondrial origins are found in the extracellular 274 275 compartment, in vitro in the media of cell culture (42,43), and in vivo in the physiological fluids (44,45). While the analysis of circulating DNA from plasma is now optimized and 276 standardized (37), only poor experimental works have been performed with using cell culture. 277 To accurately observe the effect of hypoxia on cells, we first carried out a study on 278 279 standardizing cell culture conditions to avoid any bias. We first examined the stability over time of NcfDNA concentration, as detected via the amplification of a short DNA sequence 280 281 compared to a long DNA sequence to further estimate the DNA integrity (DII) as it was performed in vivo (41). The biphasic shape of the NcfDNA concentration curves suggests that 282 at least two structural entities of different stability coexist in the pool of fragments over 67bp. 283 284 In contrast, fragments over 305bp highly decrease with time of incubation down to nearly disappear after a few days of incubation. Thus, we can conclude that fragments of NcfDNA 285 over 305bp appear less stable than those higher than 67bp in these in vitro conditions (almost 286 40% being still present following 2 days incubation in cell culture supernatant). We 287 previously showed that targeting a sequence as short as possible enables to improve and 288 consequently to accurately determine cfDNA concentration. The decrease of nuclear DII 289 observed in our stability study, corresponding to the degradation of NcfDNA into fragments 290 between 67bp and 305bp, can be explained by the presence of nucleosomal structures or 291 transcription factor-associated complexes, which constitute 90-98% of the fragments detected 292 in CRC patients (46). Conversely, McfDNA concentration is less impacted by incubation 293 time, regardless of the targeted sequence length. This result indicates structural differences 294 295 between nuclear and mitochondrial DNA in cell culture supernatant. McfDNA appears more stable as compared to NcfDNA, certainly due to different structural complexes, not yet 296

characterized. Our group has recently demonstrated that cell culture medium could contain 297 298 cell-free circulating respiratory-competent mitochondria or cell membrane- or debrisassociated mitochondria (47), what could be one of the reason why McfDNA seems protected. 299 300 Noteworthy, the ratio between McfDNA and NcfDNA concentrations, which corresponds to the MNR, is highly stable and reproducible in cell-free culture medium. This observation is 301 confirmed in cell model, as MNR, although varying according to the cell line, is constant 302 303 regardless of the number of cells. This result indicates that MNR could be considered as a relevant biomarker, as it appears less influenced by collateral factors such as DNA 304 conservation or cell number (34). 305

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In cancer cell models, our data revealed a rapid and significant release of DNA into the 307 culture medium. A rapid release of nuclear DNA was also reported by Wang et al (48) in T47-308 309 D (80ng/ml) and MDA-MB-231 (12ng/ml) breast cancer cells over a short period of time (6 hours of incubation). In addition to this, release of nuclear DNA was also observed during the 310 first 24 hours of incubation in the culture medium of the human 143 B osteosarcoma cell line 311 312 (49). As expected, we observed in our study that NcfDNA and McfDNA concentrations increased with the number of cells, corresponding to about 2% and 0.1% of the intracellular 313 content respectively, whatever the cancer cell lines. This difference of proportion may be 314 explained by different mechanisms implied in either nuclear or mitochondrial DNA release. It 315 should be noted that this 2% of NcfDNA is approximately equivalent to the extracellular 316 317 release of one chromosome in 6 hours, highlighting the high genomic dynamics as well as the importance of DNA release in extracellular space, which cannot therefore be considered as a 318 marginal mechanism. From a physiological point of view, these data are of great importance 319 because extracellular nucleic acids have been described as biologically active in inflammatory 320 processes, and as potentially active in cell transformation and communication (50). 321

323 The study of the DNA release and stability allowed us to provide an *in vitro* experimental model avoiding bias as much as possible in the following observations. Indeed, we took into 324 consideration the respective stability of NcfDNA and McfDNA and the accumulation bias by 325 using an algorithm allowing to delineate the daily rate of DNA release. Hence, our data 326 revealed that hypoxia has a critical impact on cfDNA concentration in the supernatant of 327 328 SW620 human colorectal cancer cell line, as compared to normoxic conditions, within the first 24 hours of incubation. After this period of time, cfDNA concentrations did not increase 329 further upon hypoxia. Inverserly, cfDNA concentrations increase with normoxia, which 330 331 allows a progressive accumulation of cfDNA in the cell supernatant. Furthermore, thanks to our stability study and the use of our algorithm, we reveal for the first time the different 332 kinetics of nuclear and mitochondrial DNA release, revealing a biphasic behaviour of the cells 333 334 submitted to hypoxia: a high release during the first 24 hours followed by a reduced release at day 2 and day 3. This effect was much more pronounced for mitochondrial DNA, the release 335 of which is completely abrogated at day 3. This difference clearly indicates that the 336 mechanisms implied in nuclear and mitochondrial DNA releases are different from each 337 338 other.

339

The main mechanisms of nuclear DNA release described in the literature are cell death (apoptosis and necrosis) and active secretion, in particular through microparticles release (36,51). Several structures such as exosomes, apoptotic bodies, nucleosomes and virtosomes which may contain extracellular DNA and which have been shown to be positively regulated by hypoxia, have been described (51) (52,53). Moreover, other studies have shown that increased autophagy in response to hypoxic stress allows cell survival or death (54,55). In addition, under hypoxic conditions, the endogenous antioxidant response of cells may be

insufficient, resulting in an intracellular increase in reactive oxygen species (ROS) (56), and 347 348 the increased release of nuclear and mitochondrial DNA. It may thus be speculated that DNA release may be increased by hypoxia via exosome production, ROS or autophagy in the early 349 steps of our study. However, when the amount of ROS of a cell is too high, the necrotic 350 activity of p53 could be induced, therefore promoting cell death (57,58). Indeed, regulated 351 necrosis includes multiple cell death modalities, resulting in loss of mitochondrial inner 352 membrane potential, disruption of ATP production, mitochondrial dysfunction and 353 consequent necrosis. This could explain our observation that mitochondrial DNA release is 354 more affected than nuclear DNA by late incubation upon hypoxic conditions (59). 355 356 Furthermore, it was shown that mitochondria undergo fission and fusion continually in response to changes in the extracellular environment: hypoxia promotes the production of 357 reactive oxygen species (ROS) that cause an increase in mitochondrial fission (60). 358 359 Noteworthy, recent studies highlighted modifications in the expression of genes involved in oxidative phosphorylation (61), linking hypoxia to mitochondrial adaption to this anaerobic 360 environment. Under hypoxia, glucose consumption increases to maintain ATP production 361 using less efficient anaerobic glycolysis, what induces major structural and dynamical 362 changes characterized by impairment of fusion process that leads to mitochondrial 363 364 depolarization, and finally loss of mitochondrial DNA (62,63).

365

Under normoxic conditions, the MNR remains stable over time. This suggests a balance between cell growth and the release of nuclear DNA and mitochondrial DNA. Converserly, hypoxia leads to an imbalance in this stability. These results suggest that the regulations of mitochondrial and nuclear releases could be valuable parameters to follow-up hypoxia in patients. To date, multiple approaches exist to detect hypoxia either directly or indirectly (64). Tumor hypoxia was shown to be a prognostic biomarker, as it was shown that extracellular vesicles-associated genes could correlate with hypoxic microenvironment and predict
recurrence in lung adenocarcinoma (65). Evaluating hypoxia could also be indicative for the
selection of patients who would most benefit of chemo-radiotherapy (66).

375

The *in vivo* effect of hypoxia on the concentration of circulating NcfDNA and McfDNA was 376 evaluated in the plasma of mice engrafted with an autologous lung epithelial tumor model 377 378 (TC1) cell line. As would be expected from our in vitro results, plasmatic NcfDNA concentration is highly correlated to tumor weight and size, both of which are increased in 379 mice bred in a hypoxic atmosphere, as has been observed in previous study (23). Noteworthy, 380 381 circulating McfDNA is weakly related to hypoxia in the mice model, as its plasmatic concentration is not significantly different in both groups of mice. As a result, McfDNA is not 382 correlated to tumor weight. This result is in phase with the *in vitro* model, since we found that 383 384 after a rapid and huge increase of its concentration in extracellular medium, mitochondrial DNA release is then negatively regulated after 24 hours of incubation, and to a higher extent 385 than nuclear DNA. The lack of difference in McfDNA levels in murine plasma between 386 hypoxia and normoxia may also be explained by the fact that, due to structural similarities 387 with bacterial DNA, mitochondrial componants, including mitochondrial DNA itself, are 388 389 particularly likely to activate the immune system, leading to their degradation (67). This hypothesis should be tested by the use of immunosuppressed xenografted mice. Nevertheless, 390 the McfDNA levels can be used to establish the MNR, which permits a more accurate 391 392 discrimination between normoxic and hypoxic mice than could be done if using NcfDNA levels alone. It would therefore appear that McfDNA measurement allows a normalization of 393 394 individual differences, highlighting the discriminative power of NcfDNA.

The results of our study must be interpreted within the context of their limitations and 396 397 strengths. Despite colorectal cancer cell lines appear to cover the genetic, transcriptional and phenotypic constitution of cancer cells, their characteristics may be far from those of in vivo 398 tumors, as most *in vitro* cell lines are derived from rapidly growing, aggressive transplantable 399 tumor lines. Furthermore, carcinoma cells in *in vivo* models form 3D structures that interact 400 with the surrounding extracellular matrix (ECM) and cells of the tumor stroma. These 401 402 interactions have been shown to be essential for tumor development and progression, which prominently alter signaling pathways in both the tumor cells and the stromal cells (68,69). 403 These preliminary results will need to be consolidated by analysis on a larger number of cell 404 405 lines and mice. To obtain a more complete picture of these processes, it will be necessary to identify the release mechanisms in order to establish how and why, in hypoxic conditions, the 406 high release of mitochondrial DNA is transient and subsequently repressed, while that of 407 408 nuclear DNA is much less affected.

409

410 In summary, this is the first study to delineate concomitantly the effect of hypoxia on the 411 levels of nuclear and mitochondrial cfDNA in cell and murine models. We have clearly shown that cancer cell lines release high amounts of mitochondrial and nuclear DNA in the 412 413 extracellular compartment, and that hypoxia strongly influences the amount and manner in which these are released. We have also demonstrated that cells are able to regulate 414 differentially the daily rate of release of DNA according to hypoxic conditions. In the grafted 415 mice model, we have shown that MNR, which is correlated to tumor size and weight, may 416 characterize the hypoxic condition of the tumor. While it does not fully recapitulate mCRC in 417 patients, our *in vivo* study using mice engrafted with TC1 cells does suggest that analysis of 418 MNR could be relevant in evaluating the degree of hypoxia of human tumors. Moreover, the 419 amount of NcfDNA in plasma could be indicative of tumor size. Our study is a preliminary 420

- 421 one, but could pave the way for the development of blood tests which would evaluate cancer
- 422 progression or residual disease.

424	Additional information
425	
426	Ethics approval and consent to participate
427	All experimental procedures on grafted mice were approved by The Institutional Animal Care
428	and Use Committee of the University of Chicago (protocol # 72190).
429	
430	Consent to publish
431	All authors agree with the original results described in this study and consent to publish them
432	in the present manuscript.
433	
434	Data availability
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445	Authors' contributions
446	AO, JDA and ZA performed in vitro experiments, analyzed the results and wrote the
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design of experiments and to the manuscript writing. ART designed experiments, analyzed theresults, wrote the manuscript and managed the project.

450

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Legends

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#### 641 Figure 1: cfDNA stability in cell culture media

After a 24-hour incubation period of the DLD1 and SW620 cell lines (1 million cells in T25 642 flask), medium was removed, centrifuged and incubated at 37°C in 6-well plates. The 643 concentration of cfDNA was monitored every day (D0, D1, D2 and D3) by qPCR, targeting 644 KRAS or COX3 genes and quantifying amplicons of 67bp and 305bp from nuclear cfDNA, 645 and quantifying amplicons of 67bp and 296bp from mitochondrial cfDNA. The evaluation of 646 cfDNA concentrations (in percentage of D0) is shown according to the cell line (a and b); (c) 647 mitochondrial and nuclear DII; (d) MNR. Average values with (+/-) standard deviations are 648 represented, results having been reproduced in three independent experiments, each 649 performed in triplicate. Abbreviations: cfDNA: extracellular cell-free DNA; DII: DNA 650 651 Integrity Index; MNR: Mitochondrial to Nuclear DNA Ratio; KRAS: Kirsten rat sarcoma; COX3: Cytochrome c oxidase subunit 3. 652

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### **Figure 2: Release of cfDNA by colorectal cancer cells in culture**

Culture media and cell pellets from colorectal cell lines (DiFi, HCT116, SW620) were 655 656 harvested after 6 hours of incubation at a different number of cells per well (25,000; 100,000 or 400,000). Extracellular and intracellular DNA of nuclear (a and c, respectively) or 657 mitochondrial origin (b and d, respectively) were measured by qPCR, as described in the 658 Material and Method section, and estimation was made of the percentage of DNA released in 659 culture medium as compared to intracellular DNA (e) and of MNR (f). Average values with 660 661 (+/-) standard deviations are represented, results having been reproduced in four independent experiments, each performed in triplicate. Abbreviation: MNR: Mitochondrial Nuclear DNA 662 Ratio. 663

#### 665 Figure 3: cfDNA release upon normoxic and hypoxic conditions

After seeding SW620 cells for 24 hours, the culture medium was replaced with a fresh 666 medium and cells were placed in two different incubators: one with normoxic conditions 667  $(21\% O_2)$ , the other with hypoxic conditions  $(0.5\% O_2)$ . Different aliquotes of the same 668 supernatant were sampled during 3 days (D1 to D3, days of sample collection). Total 669 670 concentrations of nuclear (a) and mitochondrial (b) extracellular cfDNA were quantified by qPCR. cfDNA[0-24] corresponds to the concentration of released DNA during the first 24 671 hours; cfDNA[24-48] corresponds to the concentration of released DNA between the 24<sup>th</sup> and 672 48<sup>th</sup> hour of incubation; cfDNA[48-72] corresponds to the concentration of released DNA 673 between the 48<sup>th</sup> and 72<sup>nd</sup> hour of incubation. The proportions of nuclear or mitochondrial 674 675 DNA newly released during each period, as compared to the total concentration measured each day, are shown in (c) and (d) respectively; (e) shows the nuclear DII of supernatants 676 677 from cells cultured in normoxia (white square, dashed line) or in hypoxia (dark triangle, solid 678 line); (f) shows the MNR of supernatants from cells cultured in normoxia (white square, dashed line) or in hypoxia (dark triangle, solid line). Values are presented as mean (+/-) 679 standard error of four independent wells, each performed in triplicate. Abbreviations: 680 681 cfDNA: extracellular cell-free DNA; DII: DNA Integrity Index; MNR: Mitochondrial Nuclear DNA Ratio. 682

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# 684 Figure 4: Effects of intermittent hypoxia

(a) Flow-chart of the *in vivo* experiment: C57BL/6j mice were preexposed during 2 weeks to either room air or intermittent hypoxia, and then injected with  $10^5$  TC1 cells. Blood collection was performed 4 weeks after the graft. The concentrations of circulating cfDNA in plasma

P a g e 28 | 33

from mice subjected to normoxia (open boxes) or hypoxia (gray boxes) were evaluated by 688 qPCR by targeting murine KRAS (b) or COX1 (c) genes. This allowed the evaluation of the 689 nuclear DII (d) and the MNR (e). The effect of hypoxia on tumor weight (f) and mouse body 690 weight gain (g) are also presented. The line from end to end of the whisker represents the 691 minimum and maximum values of the data, the line within each box represents the median, 692 and the lower and upper boundaries of the box indicate the first and third quartiles, 693 respectively. Significant differences between normoxia and intermittent hypoxia were 694 695 estimated using the Mann-Whitney test. P-Values significance: \*P < 0.05, \*\*P < 0.005 and \*\*\* P < 0.0005. Abbreviations: NcfDNA: nuclear cell-free DNA; McfDNA: mitochondrial 696 cell-free DNA; DII: DNA Integrity Index; MNR: Mitochondrial to Nuclear DNA Ratio; 697 dBWT: delta body weight. 698



Figure 2



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P a g e 32 | 33





