

Potential Role of Estrogen Receptor Beta as a Tumor Suppressor of Epithelial Ovarian Cancer

Carine Bossard, Muriel Busson, David Vindrieux, Françoise Gaudin, Véronique Machelon, Madly Brigitte, Carine Jacquard, Arnaud Pillon, Patrick Balaguer, Karl Balabanian, et al.

▶ To cite this version:

Carine Bossard, Muriel Busson, David Vindrieux, Françoise Gaudin, Véronique Machelon, et al.. Potential Role of Estrogen Receptor Beta as a Tumor Suppressor of Epithelial Ovarian Cancer. PLoS ONE, 2012, 7 (9), pp.e44787. 10.1371/journal.pone.0044787 . hal-03002049

HAL Id: hal-03002049 https://hal.science/hal-03002049

Submitted on 18 Jan 2021

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.

1	Potential role of Estrogen Receptor beta as a tumor suppressor of epithelial								
2	ovarian cancer								
3									
4	Carine Bossard ^{1*} , Muriel Busson ^{1*} , David Vindrieux ^{1*} , Françoise Gaudin ² , Véronique Machelon ² ,								
5	Madly Brigitte ¹ , Carine Jacquard ¹ , Arnaud Pillon ³ , Patrick Balaguer ³ , Karl Balabanian ² and								
6	Gwendal Lazennec ^{1#}								
7									
8	¹ INSERM, U844, Site Saint Eloi - Bâtiment INM - 80 rue Augustin Fliche, Montpellier, F-34091,								
9	France ; University of Montpellier I, F-34090, France.								
10	² INSERM UMR_S996, Univ. Paris-Sud, Laboratory of Excellence in Research on Medication and								
11	Innovative Therapeutics (LERMIT), 32 rue des Carnets, Clamart, F-92140, France.								
12	³ Institut de Recherche en Cancérologie de Montpellier, IRCM, 208 rue des Apothicaires,								
13	Montpellier, F-34298, France.								
14									
15	Running title: ERß controls ovarian carcinogenesis								
16									
17	Keywords: ovarian cancer; estrogen receptor; ER α ; ER β ; proliferation; metastasis.								
18									
19	Disclosure statement: The authors have no competing interest								
20									
21	* These authors have equally contributed to the work								
22									
23	[#] Corresponding author:								
24	Gwendal Lazennec, PhD								
25 26	INSERM, 0844, Site Saint Eloi - Bâtiment INM.								
27	80 rue Augustin Fliche - BP 74103 -								
28	34091 Montpellier cedex 5, France								
29 30	Tel: (33) 4 99 63 60 27 Fax: (33) 4 99 63 60 20								
31	E-mail: Gwendal.Lazennec@inserm.fr								
32									
33									
34									
35									

36 Abstract

Ovarian cancer is the gynecological cancer exhibiting the highest morbidity and improvement of 37 treatments is still required. Previous studies have shown that Estrogen-receptor beta (ERB) levels 38 decreased along with ovarian carcinogenesis. Here, we present evidence that reintroduction of 39 ER β in BG-1 epithelial ovarian cancer cells, which express ER α , leads *in vitro* to a decrease of 40 basal and estradiol-promoted cell proliferation. ERß reduced the frequency of cells in S phase and 41 increased the one of cells in G2/M phase. At the molecular level, we found that ERB downregulated 42 total retinoblastoma (Rb), phosphorylated Rb and phospho-AKT cellular content as well as cyclins 43 D1 and A2. In addition, ER^β had a direct effect on ER_α, by strongly inhibiting its expression and 44 activity, which could explain part of the anti-proliferative action of ER^β. By developing a novel 45 preclinical model of ovarian cancer based on a luminescent orthotopic xenograft in athymic Nude 46 mice, we further revealed that $ER\beta$ expression reduces tumor growth and the presence of tumor 47 cells in sites of metastasis, hence resulting in improved survival of mice. Altogether, these findings 48 unveil a potential tumor-suppressor role of $ER\beta$ in ovarian carcinogenesis, which could be of 49 50 potential clinical relevance for the selection of the most appropriate treatment for patients.

51

53 Introduction

The single epithelial cell layer that surrounds ovaries is currently believed to be one of the sources 54 of preneoplastic lesions leading rise to epithelial ovarian tumors, which represent the vast majority 55 of ovarian cancers [1]. Epithelial ovarian cancer (EOC) is the seventh most common cancer. 56 However, it remains the fourth most deadly one because it is difficult to diagnose at early stages 57 and, hence, to treat [2]. Either classified on morphological categories (i.e., serous, mucinous, 58 endometrioid, and clear cells) based on histological criteria and resemblance to epithelial 59 components of the normal reproductive tract, or more recently, classified as low- or high-grade 60 tumors [2], EOC is a complex disease for which the etiology is poorly understood. Novel markers 61 62 and targets for therapies are thus urgently needed.

Ovary is the main organ of production of estrogens, which mainly impact on the growth, 63 differentiation and function of reproductive tissues [3]. Through their mitogenic action, estrogens 64 play roles in ovarian carcinogenesis. Several studies have highlighted an increased risk of ovarian 65 cancer in patients receiving long-term estrogen replacement therapy [4,5,6,7], while patients treated 66 67 with oral contraception combining estrogens and progestins showed a reduced risk of developing an ovarian cancer [8,9]. Estrogen action is mediated by two receptors, ERα and ERβ, two transcription 68 factors of a large family of nuclear receptors [10,11]. About 40 to 60% of ovarian cancers express 69 ERa [12], but it is intriguing to notice that only a small proportion of them will benefit from anti-70 estrogen therapy [13]. The role of ER β in the ovarian biology remains poorly understood, but it 71 seems to be different from that of ER α [14]. ER β knock-out animals (β ERKO) are subfertile, 72 producing fewer litters and pups upon superovulation induction [15,16]. The ovaries of BERKO 73 74 animals contain fewer large antral follicles and corpus luteum compared to wild-type littermates, which is concomitant with lower levels of estradiol produced [17] and a reduced expression of key 75

genes involved in ovary function such as aromatase (*Cyp19a1*), LH receptor (*Lhcgr*), and
prostaglandin synthase 2 (*Ptgs2*) [18].

78 Several studies have unraveled a potential role for ERB in EOC. In particular, ERB levels 79 were lower in ovarian tumors compared to normal tissues [19,20,21,22]. Moreover, the loss of ER β expression could correlate with a shorter overall survival of ovarian cancer patients [23]. ERβ levels 80 are also associated with metastatic lymph node status [24]. A polymorphism (rs127572) of the $ER\beta$ 81 gene has also been identified recently and shown to be associated with an increased risk of 82 83 developing an ovarian cancer [25]. However, it is still unknown whether this polymorphism affects the expression of ER^β. The intracellular location of ER^β in tumor cells seems to be important. 84 Indeed, a recent study has shown that $ER\beta$ was localized in the cytoplasm of tumor cells, while it 85 was mainly nuclear in normal epithelial cells [26]. In addition, cytoplasmic expression of ER β was 86 correlated to a poor outcome for patients with advanced serous ovarian cancer [14]. These findings, 87 combined with the aforementioned clinical correlations between ERB and patient survival, lead us to 88 hypothesize that ER β is a critical factor in ovarian tumor progression and to delineate the precise 89 contribution of this receptor in the molecular pathways underlying EOC carcinogenesis. 90

91 For this purpose, we used BG-1 cells as a cellular model and took advantage of an orthotopic 92 xenograft mouse model we have developed. BG-1 cell line is a human EOC cell line derived from a solid primary tumor tissue from a patient with stage III, poorly differentiated ovarian 93 adenocarcinoma [27]. These cells express ERa and are sensitive to estrogens in terms of 94 95 proliferation [21,28]. . Experimental models of ovarian carcinogenesis are essential to understand the molecular mechanisms involved in the development of the disease but also to evaluate the 96 97 efficacy of novel therapeutic drugs [29]. Several models have been developed, including different xenograft and transgenic models, none being fully satisfactory. The xenograft models that are 98 currently used are either intraperitoneal, subcutaneously or orthotopically intrabursal in the ovary. 99

Only few reports describe orthotopic xenograft. Nevertheless, orthotopic cell implantation can be perceived as more physiological, as the cancer cells are directly inoculated in the ovarian environment and can lead to metastasis. Therefore, to investigate the role of ER β in EOC carcinogenesis, we chose to take advantage of an orthotopic xenograft mouse model based on the use of luciferase (Luc)-expressing human epithelial ovarian cancer BG-1 cells.

We show here that reintroduction of ER^β in BG-1 cells using an adenovirus leads *in vitro* to 105 an inhibition of both basal and estradiol-induced cell proliferation. ERß exerts its anti-proliferative 106 action through a reduction of the frequency of cells in S phase, an increase of cells in G2 phase, 107 along with an altered expression of cell cycle regulators. At the molecular level, ERB was able to 108 repress the expression, the activity and the signaling of ERa, and thus to block its proliferative 109 110 action. Moreover, ER β was able to strongly reduce the development of orthotopic ovarian xenograft as well as the presence of tumor cells the sites of metastasis, leading to an increased survival of the 111 mice. Altogether, these findings support a role for ERβ as tumor-suppressor in EOC carcinogenesis. 112

113

115 **Results**

Previous reports have shown that ERB is weakly expressed in EOC tissues and derived cell lines 116 compared to normal tissue [11]. We took advantage of the human EOC cell line BG-1, which 117 expresses endogenous levels of ERa and is sensitive to estrogens [27]. Here, we first confirm that 118 BG-1 cells display low steady-state levels of ERß products, i.e. mRNA and proteins (Fig. 1A, B). 119 The next step towards assessing the role of $ER\beta$ in ovarian carcinogenesis was to restore its 120 121 expression in ovarian cancer cells. Thus, BG-1 cells were infected with a backbone (Ad5) or human $ER\beta$ (Ad β) encoding adenovirus [30,31]. $ER\beta$ overexpression was indeed obtained in Ad β -infected 122 cells as validated by real-time PCR and Western blot analyses (Fig. 1A, B). Interestingly, ERß 123 levels were strongly down-regulated by estradiol (E2) both at RNA and protein levels. Moreover, in 124 the absence of ER β , ER α levels were also down-regulated by E2, although at a lesser extent. When 125 126 ER β was introduced in the cells, the basal expression level of ER α in the absence of E2 was reduced and by half. The presence of ER β strongly diminished ER α levels in the presence of E2 (more than 127 15 fold decrease in 3 h), suggesting that ER β enhances the degradation of ER α . This is likely due to 128 129 proteasome-dependent degradation of ER α and ER β proteins [32]. The effects of ER β 130 overexpression on estrogen responsiveness were then investigated. We analyzed the ability of ER β to transactivate a synthetic luciferase reporter sensitive to estrogens in BG-1 cells. Endogenous ERa 131 132 was able to activate the reporter in the presence of E2 (Fig. 1C). ER β strongly repressed the activity of ERa in response to E2, suggesting that in the presence of ERa, ERB behaves rather as a repressor 133 than an activator of estrogen signaling. To ensure of the functionality of the receptor produced, we 134 also checked the activity of ER β in the EOC cell line PEO14 [33] that is reported to express low 135 levels of ER α (Fig. 1E) and hence does not respond to estrogens [34]. Both ER α and ER β were able 136 137 to stimulate an estrogen-sensitive reporter upon E2 exposure, even though ER β was a little bit less active than ER α (Fig. 1D). Therefore, in the absence of ER α , ER β retains the ability to transactivate 138 estrogen signaling pathways. When ERa and ERß were coexpressed in PEO-14 cells, the activity of 139

the reporter in the presence of E2 was similar to the one of ERa alone. This suggests that in the ER-140 141 negative PEO-14 cell line, ERβ cannot affect ERα activity. Western blot experiments in PEO-14 cells show that when ER α and ER β were expressed separately, their levels were strongly decreased 142 in the presence of E2 (Fig. 1E). When ER α and ER β were coexpressed, the degradation of ER α in 143 the presence of E2 was slightly increased but not in the proportion seen in BG-1 cells. For ER β , the 144 coexpression of ER α enhanced slightly the degradation of ER β . Overall, these data suggest that ER α 145 146 levels are not regulated in the same manner in BG-1 and PEO-14 cells, which could explain why ER α activity is not drastically reduced by the presence of ER β in PEO-14 in comparison to BG-1 147 cells. . 148

149 We next studied the effects of $ER\beta$ expression on cancer cell proliferation. BG-1 cells infected with Ad5 or Adβ adenoviruses were grown in vitro in the absence or the presence of E2. As 150 expected, E2 stimulated the proliferation of control BG-1 cells (Fig. 2A). Interestingly, ERβ 151 152 repressed by 50% both the basal and E2-dependent proliferation of BG-1 cells. We also observed anti-proliferative action of ER β in ER α - and ER β -negative PEO14 cells. However, this inhibition 153 was not affected by E2 (Supplemental Fig. S2). While the in vitro effects of ER\beta have been 154 observed so far, very little is known of its in vivo action in ovarian cancer models. As a first 155 156 approach to assess this point, we used a model of subcutaneous injection. To enable a sensitive, dynamic and early follow-up of tumor growth, we stably transfected BG-1 cells with a constitutive 157 Luc reporter. Ovariectomized athymic Nude mice were implanted a pellet of cholesterol or E2 and 158 injected with BG-1 cells infected with Ad5 or Adβ adenoviruses. BG-1 cells formed tumors only in 159 the presence of E2 (Fig. 2B). $ER\beta$ expression significantly reduced by 70% the E2-promoted growth 160 161 of BG-1 cells, thus supporting a potential anti-proliferative role for ER β in EOC.

We then explored the mechanisms responsible for the anti-tumoral action of ER β . Cell cycle distribution was compared by flow cytometry in control and ER β -expressing BG-1 cells (Fig. 3A). We did not detect any SubG0 peak, suggesting that no apoptosis occurred. *ER\beta* expression did not

modify the proportion of BG-1 cells in G0-G1 phase, but it strongly reduced that of cells in S phase. 165 We also found that $ER\beta$ expression triggered an increased number of cells in G2-M phase of cell 166 167 cycle. The expression of cell cycle markers was next monitored by Western blot analyses (Fig. 3B). Several cell cycle regulators such as Cyclins A and D1, AKT and Rb are reported to be regulated by 168 169 estrogens [35]. We observed that phosphorylation of AKT was increased upon E2 treatment in Ad5-170 infected BG-1 cells (Fig. 3B). $ER\beta$ expression led to a decrease in phospho-AKT content in both vehicle- and E2-teated cells and this occurred at 3, 6 and 24h. ERß caused similar changes in Cyclin 171 D1, total Rb and phosphorylated Rb expression. Indeed, the levels of cyclin D1, total Rb and 172 173 phosphorylated Rb were up-regulated upon E2 treatment in Ad5 infected cells and this induction was reduced by ER β . Cyclin A2 displayed a late induction 24h after E2 treatment and this was 174 reduced by the presence of ER β . 175

To further explore the *in vivo* role of ER β in ovarian carcinogenesis, we set up a more 176 physiologic model of orthotopic implantation of tumor cells in the ovary. Ad5- or Adβ-infected BG-177 178 1-Luc cells were injected in the left ovary and tumor growth was monitored by bioluminescence. As shown in Fig. 4A, $ER\beta$ expression significantly prevented tumor growth. When euthanized at day 28 179 post-injection, control mice displayed a clear increase of peritoneal volume and of tumor volume in 180 181 the left ovary (Fig. 4B). In sharp contrast, the volume of both peritoneum and ovary appeared much reduced in mice injected with ERβ-expressing BG-1 cells. We next determined whether the 182 183 metastatic process was affected by $ER\beta$ expression. To achieve this, the lung, liver and contralateral right ovary were collected. The extent of tumor cells present in these organs was estimated by 184 measuring the Luc activity in our orthotopic model. Luciferase activity was detected in the lung, 185 186 liver and contralateral ovary from mice injected with Ad5-infected BG-1 cells, (Fig. 5A). Interestingly, $ER\beta$ expression strongly reduced the presence of tumor cells and potentially 187 188 metastasis to all these organs, suggesting that ERB exerts a dual role on the tumor growth and dissemination. This was confirmed by *in vitro* wound healing experiments showing that $ER\beta$ 189

190 expression decreases the motility of BG-1 cells (data not shown). Since ER β impacted on both 191 tumor growth and cell dissemination, we wondered whether this could enable to improve mice 192 survival. Mice were followed-up for 80 days and daily checked for any sign of morbidity. *ER\beta* 193 expression significantly delayed death as two months after injection with Ad β -infected BG-1 cells, 194 50% of mice still survived (Fig. 5B). This is in strong contrast with the 100% death of control mice, 195 which occurs in less than two months.

197 **Discussion**

We report here that the introduction of $\text{ER}\beta$ in ovarian cancer cells displaying endogenous levels of ER α leads to a strong inhibition of *in vivo* growth and cell dissemination, mediated through the control of ER α expression and signaling.

In vitro proliferation experiments show a clear inhibition of the E2-dependent proliferation 201 by ER β in the ER α -positive ovarian cancer cell line BG-1. This is the first demonstration of an anti-202 203 proliferative action of ERβ in an ERα-positive ovarian cancer cell line. Moreover, ERβ could also inhibit the growth of the ERa-negative ovarian cancer cell line PEO-14. These results are in 204 agreement with our previous findings obtained with ERa-negative cell lines from breast [31] and 205 prostate [30] cancer cells and with another study performed in ERa-negative SKOV3 EOC-derived 206 cell line [36]. In cells devoid of estrogen receptors, it is likely that restoration of ERa cannot enable 207 208 a stimulation of proliferation upon E2 treatment, since it triggers a different program of transcriptional regulation, compared to cells expressing naturally ERa, as previously showed in 209 breast cancer cells [37]. Indeed, we observed that endogenous ERa levels in BG-1 cells were 210 211 strongly reduced by the presence of ER β , whereas ER β affected less ER α levels in PEO-14 cells. Moreover, ER^β could inhibit completely ER^α activity in BG-1 cells but not in PEO-14 cells. This 212 could be due to the fact that in BG-1 cells, endogenous ERa is under the control of its own 213 promoter, whereas in PEO-14 cells, exogenous ERa is controlled by a viral promoter. Moreover, 214 one cannot exclude that the cofactors required for ERa and ERB activity in the two cell types are 215 different, which accounts for their differential activity in the BG-1 and PEO-14 cells. 216

The novelty of our study is to have extended these data to two *in vivo* models. If clinical evidences based on ER β levels in normal tissue and cancer suggest that this receptor could act as a potential tumor suppressor, so far, no preclinical proof has been brought to confirm this hypothesis. We first used a classical subcutaneous model, to answer to this question and more precisely to determine if estrogen were required or not. BG-1 *in vivo* growth was clearly dependent on the presence of estradiol and ER β could counteract tumor growth. We also used orthotopic implantation of bioluminescent cells in the ovary. In agreement with *in vitro* experiments, we observed a strong reduction of tumor growth when BG-1 cells express ER β .

Cell cycle analysis demonstrated that $ER\beta$ inhibited cell proliferation, by decreasing the 225 proportion of cells in S phase and increasing the proportion of cells in G2-M phase. This situation is 226 similar to that reported in breast cancer cells [38]. At the molecular level, ER β could decrease the 227 phosphorylation of Akt and Rb. In addition, ERB also reduced the expression of cyclin D1 and 228 cyclin A. Cyclin D1 interacts with Cyclin-Dependent Kinase-4 and -6, which leads to the 229 phosphorylation of Rb and the dissociation of Rb/E2F complex, which causes the progression 230 231 through the G1 [35]. Cyclin A interacts with Cyclin-Dependent Kinase-2 to promote the transition from the S to G2 phase [39]. Moreover, the phosphorylation of AKT favors G1/S transition by 232 blocking the transcriptional activity of Foxo factors, which regulate Cyclin D1 and p21 expression 233 [40]. Based on these findings, we propose that $ER\beta$ leads to a decrease in AKT phosphorylation, 234 which in turn results in a decreased expression of Cyclin D1 and phosphorylation of Rb. 235

To explain how ER β can affect cell proliferation, we have investigated whether it could 236 directly modify ERa expression and signaling in BG-1 cells. It is indeed interesting to notice that 237 ER β has also profound effects of ER α levels as it diminished by about 15 fold ER α expression in 238 239 3h. Although the exact molecular mechanisms accounting for the negative effect of ER β on ER α in BG-1 cells remains to be elucidated, the extent and rate of degradation of ERa is certainly critical 240 for its activity and these parameters change if $ER\beta$ is present or not. Indeed, in parental BG-1 cells, 241 242 expressing only ERa, the receptor is also subjected to E2-dependent degradation. This is likely due to proteasomal degradation of the receptor as shown in a number of cell types by previous studies 243 [41,42]. Paradoxically, the E2-dependent proteasomal degradation of ERα is also required for its full 244 activity through the regulation of the interactions of the receptors with its coactivators [42] and the 245 cycling of ER α on the promoter of its target genes [43]. The situation appears different when ER β is 246

coexpressed with ERa in BG-1 cells. Indeed, we report that ERB could reduce more rapidly and 247 strongly the expression of ERa in BG-1 cells in the presence of E2, compared to cells in which only 248 ERα is present. This is in agreement with what is observed in the ERα-positive breast cancer cell 249 line T47-D transfected with ER^β [44]. This suggests that ER^β could trigger a rapid proteasomal 250 degradation of ER α in the presence of E2. If we suppose that ER α and ER β form heterodimers as 251 previously described [45,46], ER β might increase the degradation of ER α present in the complex, by 252 altering its conformation and preventing it from being active. Consequently, ERa would be less 253 efficient to activate its target genes and could not play its proliferative role. 254

Indeed, in addition to its effects on ER α expression, we cannot exclude that ER β also 255 256 reduces ERa activity, as shown by transfection of an estrogen-responsive reporter in BG-1 cells. This is in agreement with a previous study performed in an ER α -positive breast cancer cell lines in 257 which ER β was transfected, suggesting that ER α and ER β have distinct roles [47]. In turn, this could 258 affect the E2-dependent signaling of ERa, which could not regulate the levels of the activity of key 259 target genes involved in the proliferation, such as AKT, Rb, cyclin D1 or cyclin A2. Moreover, 260 261 other studies have reported a negative action of ER β on ER α signaling [44,48]. In particular, ER β has been shown to alter the recruitment of AP-1 complexes to ERa target genes [44], which is 262 known to act in synergy with ERa. Once heterodimerized with ERa, ERB could also modify the 263 264 ability of ER α to interact with coactivators. A previous study has also suggested a Ying Yang action of ER β in vivo, which is a repressor of ER α signaling in the presence of ER α , but can also replace 265 ER α in the absence of ER α [48]. The down-regulation of ER α expression by ER β may not be the 266 only mechanism of growth inhibition by ER β , as ER β can also reduce cell growth of ER α -negative 267 PEO-14 cells. It is possible that ERβ directly affect factors involved in cell proliferation, such as 268 transcriptional coregulators, cell cycle regulators but also growth factors. 269

We report that $\text{ER}\beta$ could not only reduce the growth of the primary tumor, but could also decrease the extent of metastasis, or at least the presence of tumor cells in different organs. We have previously shown that ER β could inhibit *in vitro* cancer cell invasion [31], which certainly accounts for the decreased dissemination observed. However, we cannot completely exclude the possibility that the reduced growth of the primary tumor leads also to a decreased metastasis. Whatever the effect exerted by ER β , this reduction of metastasis certainly explains the increased survival of the mice implanted with ER β cells.

Taken together, our findings provide evidence for a scenario in which ER^β acts as a potential 277 tumor-suppressor and represents a potential target for future therapies of EOC. To our knowledge, 278 this is the first in vivo demonstration of anti-proliferative and -metastatic actions of ERB in a 279 preclinical orthotopic model of ovarian carcinogenesis. Our results linking ERB and the mestastasis 280 281 process are in complete agreement with clinical studies revealing that ERB is not expressed in metastatic forms of ovarian cancers [20] and the loss of its expression correlates with a shorter 282 overall survival [23]. Here, we further unravel that ER β directly impacts on ER α expression, cell 283 cycle and invasive properties of cancer cells. The reasons accounting for the weak expression of 284 ERβ in ovarian cancer remain elusive. Recent reports suggest possible epigenetic modifications 285 286 leading to $ER\beta$ silencing, as treatment of ovarian cancer cells with DNA methyltransferase or histone deacetylase inhibitors could restore its expression [49,50,51]. Another hypothesis would be 287 a preferential degradation of ER β protein by the proteasome, resulting in low levels of this receptor 288 in cancer cells [32]. These could be the tracks to explore in the future for controlling ER β 289 290 expression and developing novel therapies in ovarian cancer.

- 291
- 292

Materials and Methods

294 **Tumor cell line**

The human ovarian cell lines BG-1 (ER α -positive cells) [52] or PEO14 [33] were obtained from Dr. P Pujol [52] and grown in DMEM supplemented with 10% FCS and gentamycin at 37°C in a humidified atmosphere containing 5% CO₂. To wean the cells off steroids, they were cultured in phenol red-free DMEM-F12 supplemented with 10% charcoal dextran-treated FCS (CDFCS) for 4 days.

The stably transfected BG-1-luc cell line was obtained after transfection with the plasmid CMV-LUC-Neo encoding the luciferase reporter under the control of CMV promoter. Transfected cells were then selected by G418 at a concentration of 0.5 mg/ml. Luminescent clones were identified using photon-counting camera (NightOWL II LB 983 from Berthold, France) by addition of luciferin in the growth medium, and the most responsive clones were isolated.

305 **RNA extraction and real-time PCR**

Total RNA was isolated with TRIzol reagent (Invitrogen) as described by the manufacturer. Reverse transcription was performed using random primers and Superscript II enzyme (Invitrogen). Real-time PCR quantification was then performed using a SYBR Green approach (Light Cycler; Roche), as previously described [53]. For each sample, $ER\alpha$ and $ER\beta$ mRNA levels were normalized with *RS9* mRNA levels. The sequences of the oligonucleotides used were previously described [49].

Recombinant adenovirus construction, propagation and infection. The non-recombinant adenovirus Ad5, and the adenovirus encoding ER α (Ad α) or ER β (Ad β) used in this study have been previously described [31]. BG-1 cells were infected overnight at a multiplicity of infection (MOI) of 25 and PEO-14 at a MOI of 100 in DMEM/F12 10% CDFCS.

316 **Constructs and Transient transfection.** The ERE-TK-LUC construct consists of two ERE in

tandem upstream of TK promoters [49]. 3.10⁵ of steroid-weaned cells were plated in 12-well plates

in phenol red-free DMEM-F12, and supplemented with 10% CDFCS 24 h before transfection. Cells were infected with Ad5, Ad α or Ad β viruses as mentioned above. Transfections were performed using lipofectamine according to the manufacturer's recommendations, using 2 µg of the luciferase reporter, along with 0.5 µg of the internal reference reporter plasmid (CMV-Gal) per well. After 6 h incubation, the medium was removed and the cells were placed into a fresh medium supplemented with a control vehicle (ethanol) or E2. Twenty-four hours later, cells were harvested

and assayed for luciferase activity using a Centro LB960 Berthold luminometer. β -galactosidase

325 was determined as previously described [49].

326 **Protein extracts and Western blots**

BG-1 cells were cultured for 4 days in CDFCS. Cells were treated for 24h with 4 mM thymidine 327 before adenoviral infection with Ad5 or Adβ viruses. Cells were harvested in Tris-glycerol buffer 328 (Tris-HCl 50mM, EDTA 1.5mM, 10% glycerol) supplemented with protease inhibitor cocktail 329 (Roche) and phosphatase inhibitors, and were then sonicated. 30 µg of protein extracts were 330 subjected to SDS-PAGE protein samples Western blot analyses were done using ERa (Santa Cruz, 331 ref SC-543), ERß [31], Cyclin D1 (Cell Signaling, ref 2926), Akt (Cell Signaling, ref 9372), p-AKT 332 (Cell Signaling, ref 9271), Cyclin A2 (Sigma-Aldrich, ref C0244), p-Rb (Cell Signaling, ref 9308), 333 total Rb (Cell Signaling, ref 9309) and β-actin (Santa Cruz, ref: SC-1615) antibodies. 334 Immunoreactivity was detected with Millipore ECL system. Actin was used as a loading control. 335

336 **Proliferation assay.**

337 20000 BG-1 or PEO14 cells were plated in 24-well plates and grown in the presence of control

vehicle ethanol or 10^{-8} M estradiol for 4-days. Cells were then collected their proliferation was

339 quantified by counting the cells on a cell counter.

340 Flow cytometry

 1×10^{6} BG-1 were collected 24h after infection with Ad5 or Ad β adenoviruses. Cells were

resuspended in 75% ethanol and fixed for 12 min. After centrifugation, cells were incubated in PBS

343 containing 40 μ g/ml propidium iodide and 100 μ g/ml RNAse for half an hour at 37°C. Cell cycle

analysis was performed on an Epics-XL flow cytometer (Beckman Coulter, Fullerton, CA, USA)

345 and analyzed with Modfit software (Verity Software, Topsham, ME, USA).

346 Animal xenografts

Female Nu/Foxn1 athymic nude mice, 7 weeks old were obtained from Harlan. Mice were 347 acclimatized for 1 week before the experiment, and were kept under pathogen-free conditions in 348 laminar-flow boxes (5 mice/cage) maintained under standard conditions (22±2 °C, 45±10% relative 349 humidity, 12 h light/12 h dark cycle each day, standard diet and water ad libitum). All experiments 350 were performed in accordance with the French guidelines for experimental animal studies and 351 352 declared to ethical committee (Comité d'Ethique pour l'Expérimentation Animale Languedoc Roussillon (CEEA-LR)) (Permit No. obtained for this study: CEEA-LR-11014). All efforts were 353 made to minimize suffering. 354

When indicated, before cell implantation, a silicone tube (silastic) filled with a solid mixture of E2 and cholesterol as a carrier (1:10) was implanted subcutaneously (sc) in the interscapular region of ovariectomized mice as previously described [54]. Two days later, 5.10^6 BG-1 cells prepared in 75 µl serum-free culture medium, combined with phenol red free Matrigel (1:1, v/v, BD Biosciences) were sc grafted on both flanks of these mice. Alternatively, 1.10^6 BG-1 cells prepared in 20 µl serum-free culture medium combined with matrigel (2:1, v/v) were orthotopically grafted in the left ovary surgically exposed of anaesthetized mice.

362

In vivo bioluminescent imaging BG-1 cells

To measure luciferase activity, mice were first sedated by isoflurane gas anesthesia system (T.E.M., Bordeaux, France). Mice were then injected intraperitoneally with 125 mg/kg body weight of luciferin (sodium salt; Promega) in aqueous solution. Luminescence was measured using NightOWL II LB 981 CCD camera and integrated for a 5-min period. The signal intensities from regions of interest (ROI) were obtained and data were expressed as photon (Ph/s). Background was defined from a region of the same size placed in a non-luminescent area nearby the animal and then subtracted from the measured luminescent signal intensity. The correlation of luciferase signal with tumor volume and weight was demonstrated (Supplemental Fig. S1).

371 Tissues extracts luciferase activity

Lysates from tissue samples were prepared in ceramic beads-containing tubes (Lysing matrix, MP Biomedicals), by disruption in luciferase lysis buffer (25mM Tris Phosphate pH7.8, 2 mM DTT, 2 mM EDTA, 10% Glycerol, 1% Triton X100, 1mg/ml BSA). The samples were subjected to two oscillations at 7,000 r/min for 15 seconds. The lysates were then centrifuged at 10,000 rpm for 30 min at 4°C, and the supernatant was saved and assayed. 10 μ l of the supernatant were loaded onto 96-well white opaque tissue plates (Lumitrac 200), and luciferase activity was measured as previously described [49].

379

380

382 **References**

- Auersperg N, Wong AS, Choi KC, Kang SK, Leung PC (2001) Ovarian surface epithelium: biology, endocrinology, and pathology. Endocr Rev 22: 255-288.
- 2. Cho KR, Shih Ie M (2009) Ovarian cancer. Annu Rev Pathol 4: 287-313.
- 386 3. Rosenfeld CS, Wagner JS, Roberts RM, Lubahn DB (2001) Intraovarian actions of oestrogen. Reproduction 122:
 387 215-226.
- 4. Beral V, Bull D, Green J, Reeves G (2007) Ovarian cancer and hormone replacement therapy in the Million Women Study. Lancet 369: 1703-1710.
- 5. Glud E, Kjaer SK, Thomsen BL, Hogdall C, Christensen L, et al. (2004) Hormone therapy and the impact of estrogen
 intake on the risk of ovarian cancer. Arch Intern Med 164: 2253-2259.
- 6. Lacey JV, Jr., Brinton LA, Leitzmann MF, Mouw T, Hollenbeck A, et al. (2006) Menopausal hormone therapy and
 ovarian cancer risk in the National Institutes of Health-AARP Diet and Health Study Cohort. J Natl Cancer Inst
 98: 1397-1405.
- 7. Rossing MA, Cushing-Haugen KL, Wicklund KG, Doherty JA, Weiss NS (2007) Menopausal hormone therapy and
 risk of epithelial ovarian cancer. Cancer Epidemiol Biomarkers Prev 16: 2548-2556.
- 8. Beral V, Hannaford P, Kay C (1988) Oral contraceptive use and malignancies of the genital tract. Results from the Royal College of General Practitioners' Oral Contraception Study. Lancet 2: 1331-1335.
- 399 9. Deligeoroglou E, Michailidis E, Creatsas G (2003) Oral contraceptives and reproductive system cancer. Ann N Y
 400 Acad Sci 997: 199-208.
- 401 10. Katzenellenbogen BS, Katzenellenbogen JA (2000) Estrogen receptor alpha and estrogen receptor beta: regulation
 402 by selective estrogen receptor modulators and importance in breast cancer. Breast Cancer Res 2: 335-344.
- 403 11. Bardin A, Boulle N, Lazennec G, Vignon F, Pujol P (2004) Loss of ERbeta expression as a common step in
 404 estrogen-dependent tumor progression. Endocr Relat Cancer 11: 537-551.
- 405 12. Greenlee RT, Murray T, Bolden S, Wingo PA (2000) Cancer statistics, 2000. CA Cancer J Clin 50: 7-33.
- Hatch KD, Beecham JB, Blessing JA, Creasman WT (1991) Responsiveness of patients with advanced ovarian
 carcinoma to tamoxifen. A Gynecologic Oncology Group study of second-line therapy in 105 patients. Cancer
 68: 269-271.
- 409 14. Drummond AE, Fuller PJ (2010) The importance of ERbeta signalling in the ovary. J Endocrinol 205: 15-23.
- 410
 15. Krege JH, Hodgin JB, Couse JF, Enmark E, Warner M, et al. (1998) Generation and reproductive phenotypes of
 411 mice lacking estrogen receptor beta. PNAS 95: 15677-15682.
- 412 16. Couse JF, Curtis Hewitt S, Korach KS (2000) Receptor null mice reveal contrasting roles for estrogen receptor alpha
 413 and beta in reproductive tissues. J Steroid Biochem Mol Biol 74: 287-296.
- 414 17. Couse JF, Yates MM, Deroo BJ, Korach KS (2005) Estrogen Receptor-{beta} Is Critical to Granulosa Cell
 415 Differentiation and the Ovulatory Response to Gonadotropins. Endocrinology 146: 3247-3262.
- 416
 18. Emmen JM, Couse JF, Elmore SA, Yates MM, Kissling GE, et al. (2005) In vitro growth and ovulation of follicles
 417
 418 from ovaries of estrogen receptor (ER){alpha} and ER{beta} null mice indicate a role for ER{beta} in
 418 follicular maturation. Endocrinology 146: 2817-2826.
- 419 19. Pujol P, Rey JM, Nirde P, Roger P, Gastaldi M, et al. (1998) Differential expression of estrogen receptor-alpha and 420 beta messenger RNAs as a potential marker of ovarian carcinogenesis. Cancer Res 58: 5367-5373.
- 20. Rutherford T, Brown WD, Sapi E, Aschkenazi S, Munoz A, et al. (2000) Absence of estrogen receptor-beta
 expression in metastatic ovarian cancer. Obstet Gynecol 96: 417-421.
- 423 21. Lazennec G (2006) Estrogen receptor beta, a possible tumor suppressor involved in ovarian carcinogenesis. Cancer
 424 Lett 231: 151-157.
- 22. Chan KK, Wei N, Liu SS, Xiao-Yun L, Cheung AN, et al. (2008) Estrogen receptor subtypes in ovarian cancer: a
 clinical correlation. Obstet Gynecol 111: 144-151.
- 427 23. Halon A, Nowak-Markwitz E, Maciejczyk A, Pudelko M, Gansukh T, et al. (2011) Loss of estrogen receptor beta
 428 expression correlates with shorter overall survival and lack of clinical response to chemotherapy in ovarian
 429 cancer patients. Anticancer Res 31: 711-718.
- 430 24. Burges A, Bruning A, Dannenmann C, Blankenstein T, Jeschke U, et al. (2010) Prognostic significance of estrogen
 431 receptor alpha and beta expression in human serous carcinomas of the ovary. Arch Gynecol Obstet 281: 511 432 517.
- 433 25. Lurie G, Wilkens LR, Thompson PJ, Shvetsov YB, Matsuno RK, et al. (2011) Estrogen Receptor Beta rs1271572
 434 Polymorphism and Invasive Ovarian Carcinoma Risk: Pooled Analysis within the Ovarian Cancer Association
 435 Consortium. PLoS One 6: e20703.
- 436 26. De Stefano I, Zannoni GF, Prisco MG, Fagotti A, Tortorella L, et al. (2011) Cytoplasmic expression of estrogen
 437 receptor beta (ERbeta) predicts poor clinical outcome in advanced serous ovarian cancer. Gynecol Oncol 122:
 438 573-579.

- 439 27. Geisinger KR, Kute TE, Pettenati MJ, Welander CE, Dennard Y, et al. (1989) Characterization of a human ovarian
 440 carcinoma cell line with estrogen and progesterone receptors. Cancer 63: 280-288.
- 28. Baldwin WS, Curtis SW, Cauthen CA, Risinger JI, Korach KS, et al. (1998) Bg-1 ovarian cell line an alternative
 model for examining estrogen-dependent growth in vitro. In Vitro Cellular & Developmental Biology Animal
 34: 649-654.
- Shaw TJ, Senterman MK, Dawson K, Crane CA, Vanderhyden BC (2004) Characterization of intraperitoneal,
 orthotopic, and metastatic xenograft models of human ovarian cancer. Mol Ther 10: 1032-1042.
- 30. Cheng J, Lee EJ, Madison LD, Lazennec G (2004) Expression of estrogen receptor beta in prostate carcinoma cells
 inhibits invasion and proliferation and triggers apoptosis. FEBS Lett 566: 169-172.
- 448 31. Lazennec G, Bresson D, Lucas A, Chauveau C, Vignon F (2001) ER beta inhibits proliferation and invasion of
 449 breast cancer cells. Endocrinology 142: 4120-4130.
- 32. Picard N, Charbonneau C, Sanchez M, Licznar A, Busson M, et al. (2008) Phosphorylation of Activation Function-1
 Regulates Proteasome-Dependent Nuclear Mobility and E6-Associated Protein Ubiquitin Ligase Recruitment
 to the Estrogen Receptor {beta}. Mol Endocrinol 22: 317-330.
- 453 33. Langdon SP, Lawrie SS, Hay FG, Hawkes MM, McDonald A, et al. (1988) Characterization and properties of nine
 454 human ovarian adenocarcinoma cell lines. Cancer Res 48: 6166-6172.
- 455 34. Freund A, Chauveau C, Brouillet JP, Lucas A, Lacroix M, et al. (2003) IL-8 expression and its possible relationship
 456 with estrogen-receptor-negative status of breast cancer cells. Oncogene 22: 256-265.
- 457 35. Foster JS, Henley DC, Ahamed S, Wimalasena J (2001) Estrogens and cell-cycle regulation in breast cancer. Trends
 458 Endocrinol Metab 12: 320-327.
- 36. Treeck O, Pfeiler G, Mitter D, Lattrich C, Piendl G, et al. (2007) Estrogen receptor {beta}1 exerts antitumoral
 effects on SK-OV-3 ovarian cancer cells. J Endocrinol 193: 421-433.
- 461 37. Licznar A, Caporali S, Lucas A, Weisz A, Vignon F, et al. (2003) Identification of genes involved in growth
 462 inhibition of breast cancer cells transduced with estrogen receptor. FEBS Lett 553: 445-450.
- 38. Paruthiyil S, Parmar H, Kerekatte V, Cunha GR, Firestone GL, et al. (2004) Estrogen receptor beta inhibits human
 breast cancer cell proliferation and tumor formation by causing a G2 cell cycle arrest. Cancer Res 64: 423-428.
- 465 39. Johnson DG, Walker CL (1999) Cyclins and cell cycle checkpoints. Annu Rev Pharmacol Toxicol 39: 295-312.
- 466 40. Burgering BM, Medema RH (2003) Decisions on life and death: FOXO Forkhead transcription factors are in command when PKB/Akt is off duty. J Leukoc Biol 73: 689-701.
- 468 41. Alarid ET, Bakopoulos N, Solodin N (1999) Proteasome-mediated proteolysis of estrogen receptor: a novel component in autologous down-regulation. Mol Endocrinol 13: 1522-1534.
- 470 42. Lonard DM, Nawaz Z, Smith CL, O'Malley BW (2000) The 26S proteasome is required for estrogen receptor-alpha
 471 and coactivator turnover and for efficient estrogen receptor-alpha transactivation. Mol Cell 5: 939-948.
- 472 43. Reid G, Hubner MR, Metivier R, Brand H, Denger S, et al. (2003) Cyclic, proteasome-mediated turnover of 473 unliganded and liganded ERalpha on responsive promoters is an integral feature of estrogen signaling. Mol 474 Cell 11: 695-707.
- 44. Matthews J, Wihlen B, Tujague M, Wan J, Strom A, et al. (2006) Estrogen receptor (ER) beta modulates ERalpha mediated transcriptional activation by altering the recruitment of c-Fos and c-Jun to estrogen-responsive
 promoters. Mol Endocrinol 20: 534-543.
- 478 45. Pettersson K, Grandien K, Kuiper GG, Gustafsson JA (1997) Mouse estrogen receptor beta forms estrogen response
 479 element-binding heterodimers with estrogen receptor alpha. Mol Endocrinol 11: 1486-1496.
- 480 46. Cowley SM, Hoare S, Mosselman S, Parker MG (1997) Estrogen receptors alpha and beta form heterodimers on
 481 DNA. J Biol Chem 272: 19858-19862.
- 482 47. Williams C, Edvardsson K, Lewandowski SA, Strom A, Gustafsson JA (2008) A genome-wide study of the
 483 repressive effects of estrogen receptor beta on estrogen receptor alpha signaling in breast cancer cells.
 484 Oncogene 27: 1019-1032.
- 485 48. Lindberg MK, Moverare S, Skrtic S, Gao H, Dahlman-Wright K, et al. (2003) Estrogen Receptor (ER)-{beta}
 486 Reduces ER{alpha}-Regulated Gene Transcription, Supporting a "Ying Yang" Relationship between
 487 ER{alpha} and ER{beta} in Mice. Mol Endocrinol 17: 203-208.
- 488 49. Duong V, Licznar A, Margueron R, Boulle N, Busson M, et al. (2006) ERalpha and ERbeta expression and transcriptional activity are differentially regulated by HDAC inhibitors. Oncogene 25: 1799-1806.
- 490 50. Yap OW, Bhat G, Liu L, Tollefsbol TO (2009) Epigenetic modifications of the Estrogen receptor beta gene in
 491 epithelial ovarian cancer cells. Anticancer Res 29: 139-144.
- 492 51. Suzuki F, Akahira J, Miura I, Suzuki T, Ito K, et al. (2008) Loss of estrogen receptor beta isoform expression and its
 493 correlation with aberrant DNA methylation of the 5'-untranslated region in human epithelial ovarian carcinoma.
 494 Cancer Sci 99: 2365-2372.
- 495 52. Moll F, Katsaros D, Lazennec G, Hellio N, Roger P, et al. (2002) Estrogen induction and overexpression of fibulin 496 1C mRNA in ovarian cancer cells. Oncogene 21: 1097-1107.
- 497 53. Lucas A, Kremer EJ, Hemmi S, Luis J, Vignon F, et al. (2003) Comparative transductions of breast cancer cells by
 498 three DNA viruses. Biochem Biophys Res Commun 309: 1011-1016.

499 54. Pillon A, Servant N, Vignon F, Balaguer P, Nicolas JC (2005) In vivo bioluminescence imaging to evaluate
 500 estrogenic activities of endocrine disrupters. Anal Biochem 340: 295-302.

501

504

503 **Figure legends**

Figure 1: Expression levels and transcriptional activity of ERβ in BG-1. A. BG-1 cells were 505 infected with Ad5 or Ad β adenoviruses and treated for 24h with control vehicle ethanol (Control) or 506 E2 10⁻⁸M (E2). The expression of ER β and rS9 reference gene was measured by real-time PCR. 507 Results represent the mean \pm SD of ER β expression normalized by rS9 of 3 independent 508 experiments. Measurements of Ad β and Ad β + E2 groups were compared by unpaired Student's t 509 test. ** p<0.001. **B.** Proteins were extracted from cells infected in the same conditions as in A and 510 treated for 0, 3, 6 or 24h with E2 10^{-8} M (E2). Levels of ER α and ER β were analyzed by western 511 blot. Actin was used as a loading control. The upper band of ERβ blot labeled with a star 512 corresponds to aspecific staining. C. Transcriptional activity of ERB. BG-1 cells were infected with 513 Ad5 or Adβ adenoviruses and transfected with ERE2-TK-Luc reporter along with β-galactosidase 514 reporter. The cells were treated with ethanol as vehicle (Control) or E2 (10⁻⁸M) for 24h. Results 515 show relative Luc activities (% of values of Ad5-infected cells without E2) \pm SD after normalization 516 with β -gal activity (3 independent experiments). Measurements of Ad5+E2 and Ad β + E2 groups 517 were compared by unpaired Student's t test. * p < 0.05. **D.** PEO14 cells were infected with Ad5, 518 Ada, Ad β or the combination of Ada and Ad β adenovirus and transfected with ERE2-TK-LUC 519 reporter along with β -galactosidase reporter. Cells were treated with control vehicle (Control) or E2 520 (10⁻⁸M) for 24h. Results show relative luciferase activities (% of values of Ad5 infected cells 521 without E2) \pm SD after normalization with β -gal activity (3 independent experiments). 522 Measurements of Ada, Ad β and Ada+ β groups were compared by unpaired Student's *t* test. *** p< 523 0.001. NS: non significant. E. Proteins from PEO14 cells infected in the same conditions as in D 524 and treated with vehicle ethanol (Control) or E2 10⁻⁸M (E2) for 3, 6 or 24h were analyzed by 525 526 western blot with antibodies against ERa and ERβ. Actin was used as a loading control. The upper band labeled with a star in right panel corresponds to aspecific staining. 527

529 Figure 2: ERβ is a negative regulator of BG- cell growth. A. The growth of BG-1 cells,

expressing or not ERB, was monitored in vitro using a cell counter. BG-1 cells were plated in 24-530 well plates and cultured in the presence of vehicle or E2 (10^{-8} M). Proliferation is expressed as % of 531 control cells grown at day 0. Data represent the mean \pm SD from triplicates. Measurements of Ad5 + 532 E2 and Ad β + E2 groups were compared by unpaired Student's *t* test. ** p<0.001. **B.** ER β inhibits 533 tumor growth in a bioluminescent subcutaneous mouse model. BG-1 cells stably expressing Luc and 534 infected with Ad5 or Adß adenoviruses were injected subcutaneously in ovariectomized female 535 Nude mice. Luciferase activity was monitored for 25 days. Results are expressed in photons/s (Ph/s) 536 and represent the mean \pm SD from 8 animals. Measurements of Ad5 + E2 and Ad β + E2 groups 537 were compared by unpaired Student's *t* test. * p < 0.05.

539

538

Figure 3: ERß disturbs cell cycle of BG-1 cells and regulators. A. BG-1 cells were collected 24h 540 after infection with Ad5 or Adβ adenoviruses and analyzed for cell cycle distribution. Results 541 represent the mean \pm SEM of 3 experiments. Ad5 and Ad β groups were compared by unpaired 542 Student's t test. ** p<0.001. **B.** BG-1 cells were infected with Ad5 or Ad β viruses. After infection, 543 cells were treated for 3, 6 or 24h with vehicle (ethanol, C) or 10⁻⁸M E2. 30 µg of protein extracts 544 were used for Western blot. β-actin was used as a loading control. Unless specified, the ratio of 545 target proteins over β-actin is indicated below the gels. Representative of 2 experiments. 546

547

Figure 4: ERß inhibits tumor growth in an orthotopic xenograft mouse model. A. BG-1-Luc 548 549 cells infected with Ad5 or Ad β adenoviruses were injected in the left ovary of Nude mice. Luc activity was monitored for 35 days as described in Fig. 1C. Results are expressed in photons/s (Ph/s) 550 and represent one representative experiment corresponding to the average \pm SD of at least 5 animals 551 per group. Mann-Whitney test was used for comparison. * p<0.05 and ** p<0.01. A representative 552

image of day 35 is shown. B. Representative pictures of whole animals and genital tract of animals
euthanized at day 35 are displayed.

556	<u>Figure 5:</u> ERβ reduces metastasis and improves survival. A. Nude mice injected with BG-1-Luc
557	cells in the same conditions as in Fig. 4. were euthanized 28 days after injection. Lung, liver and
558	right contralateral ovary were taken and Luc activity was assayed as mentioned above. Results are
559	expressed as Photons/s/mg of proteins and represent the mean of 5 animals \pm SEM. Mann-Whitney
560	test was used for comparison. * p<0.05 and ** p<0.01. B. Kaplan-meier survival curve. 10 mice
561	were orthotopically xenografted with BG-1 cells stably expressing Luc, infected with Ad5 or Ad β
562	adenoviruses, followed-up daily for the development of respiratory distress, limb paralysis and
563	weight loss, and euthanized immediately if noted. P value is the one obtained in log-rank tests.

A BG-1





C BG-1





E PEO-14

D









В

Α

	Ad5			Ad β					
Time (h)	0	3	6	24	0	3	6	24	
p-AKT	-	-	-	-	_	-	-	-	(57 kDa)
p-AKT/AKT	0.6	0.9	0.9	0.9	0.2	0.3	0.4	0.1	
Cyclin D1	-	-	-	-	-	-	-	-	(36 kDa)
Cyclin D1/βactin	0.7	1.3	1.0	1.6	0.3	0.4	0.7	0.4	
Cyclin A2	-	-	-	-	-	-	-	-	(56 kDa)
Cyclin A2/βactin	0.6	0.4	0.6	1.3	0.3	0.5	0.7	0.8	
P-Rb	-	-	-	-	-		-		(110 kDa)
P-Rb/βactin	0.4	0.5	0.5	0.6	0.3	0.4	0.5	0.3	
Rb			-	-	-	-	-	ga-a	(110 kDa)
Rb/βactin	0.3	0.9	0.8	0.4	0.2	0.4	0.3	0.2	
AKT	-	-	÷	-	-	-	-	-	(57 kDa)
β-actin	-	-	-	-	-	-	-	-	(42 kDa)

Α





Day 35

В

Ad5

 $\mathsf{Ad}\beta$











В



Days after injection

Supplemental figure legends

Figure S1: In vivo monitoring of orthotopically injected BG-1-luc cells in the left ovary. Cells were injected into the bursal membrane of the left ovary and animals were monitored by bioluminescence. At day 25, animals were euthanized, and bioluminescence, the volume and weight of the ovary were measured. Correlation of the volume of the tumor (left panel) or weight (right panel) with the luciferase is shown.

Figure S2: In vitro growth of PEO14 cells expressing or not ER β . In vitro growth was monitored by counting the cells on a cell counter after 4 days of proliferation. PEO14 cells were infected with Ad5, Ad α or Ad β virus and cultured in the presence of control vehicle ethanol (Control) or E2 (10-8M). Proliferation is expressed as fold of control cells grown at day 4. Data represent the mean ± SD from triplicates. Measurements of Ad α and Ad β groups were compared to Ad5 by unpaired Student's t test. Only Ad β groups were significantly different from Ad5 groups.





