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Pharmacological targeting Netrin-1 inhibits EMT in cancer

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36

37 Epithelial-to-Mesenchymal transition (EMT) regulates tumour initiation, progression,
38 metastasis and resistance to anti-cancer therapy¹⁻⁷. Whereas great progress had recently
39 been made in understanding the role and mechanisms that regulate EMT in cancer, no
40 therapeutic strategy to pharmacologically target EMT had been identified so far. Here,
41 we found that Netrin-1 is upregulated in a primary mouse model of skin squamous cell
42 carcinoma (SCCs) presenting spontaneous EMT. Pharmacological inhibition of Netrin-1
43 by administrating NP137, an anti-Netrin-1 blocking monoclonal antibody currently used
44 in clinical trials in human cancer⁸, decreased the proportion EMT tumour cells in skin
45 SCCs, as well as decreased the number of metastasis and increased the sensitivity of
46 tumour cells to chemotherapy. Single-cell RNA-seq revealed the presence of different
47 EMT states including epithelial, early and late hybrid EMT as well as fully EMT states in
48 control SCCs. In contrast, administration of NP137 prevents the progression of cancer
49 cells towards a late EMT state and sustains tumour epithelial states. ShRNA knockdown
50 (KD) of Netrin-1 and its receptor Unc5b in EPCAM+ tumour cells inhibited EMT *in vitro*
51 in the absence of stromal cells and regulated a common gene signature promoting tumour
52 epithelial state and restricting EMT. To assess the relevance of these findings to human
53 cancers, we treated mice transplanted with A549 human cancer cell line that undergoes
54 EMT following TGF- β 1 administration^{9,10} with NP137. Netrin-1 inhibition decreased
55 EMT in A549 cells *in vivo*. Altogether, our results identify a new pharmacological strategy
56 to target EMT in cancer opening novel therapeutic interventions for anti-cancer therapy.
57

58 **Introduction**

59 Epithelial-to-Mesenchymal Transition (EMT) in which tumour cells (TCs) lose their
60 epithelial characteristics and acquire mesenchymal features, is a key driver of tumour
61 heterogeneity and has been associated with tumour initiation, progression, metastasis and
62 resistance to chemotherapy or immunotherapy^{2,4-7,11,12}. Whereas great progress in the
63 understanding of the role and the mechanisms by which EMT regulates these different cancer
64 features has been achieved, there is still very little non-genetic pharmacological interventions
65 that allow to inhibit EMT in primary tumours, decrease their metastatic potential or potentiate
66 the response to anti-cancer therapy.

67

68 **Netrin-1 is expressed in EMT skin SCC**

69 To identify novel therapeutic strategies that can inhibit EMT, we searched in RNA-
70 sequencing from epithelial and mesenchymal TCs isolated from a skin squamous cell
71 carcinoma (SCC) model that presented spontaneous EMT
72 (*Lgr5CREER/KRasG12D/p53cKO/Rosa-YFP or LKPR*)¹³⁻¹⁵ for secreted factors preferentially
73 expressed by mesenchymal EPCAM- TCs compared to epithelial EPCAM+ TCs and for which
74 specific therapy targeting this factor was available and currently administrated to cancer
75 patients. We found that *Netrin-1* and its receptor *Unc5b* were overexpressed in EPCAM- EMT
76 TCs as compared to EPCAM+ epithelial TCs (Fig. 1a, b). Netrin-1 has been shown to regulate
77 tumour progression in multiple cancer models by preventing apoptosis of TCs, promoting neo-
78 angiogenesis and controlling the pro-tumorigenic cancer associated fibroblast function¹⁶⁻²⁷. The
79 therapeutic anti-Netrin-1 blocking antibody NP137 is currently tested in clinical trial for the
80 treatment of cancer patients⁸.

81

82

83 **Netrin-1 overexpression increases EMT**

84 To assess Netrin-1 promotes EMT, we first overexpressed human NETRIN-1 in LKPR
85 mouse (*Lgr5CREER/KRasG12D/p53cKO/Rosa-YFP/Rosa-NETRIN-1*) (Extended data 1a-c).
86 Following NETRIN-1 overexpression, there was an increase in the number of tumours per
87 mouse (Fig. 1c) and the proportion of TCs that underwent EMT as compared to control mice
88 (Fig. 1d, Extended data 1d). As previously reported, EMT is not a binary process and occurs in
89 a step wise manner through the presence of intermediate states of EMT^{3,6,7,15,28-30}. We have thus
90 assessed by histological analysis and by immunofluorescence the impact of NETRIN-1
91 overexpression on the different tumour states including epithelial (KRT14+/VIM-), hybrid
92 EMT (KRT14+/VIM+) and late EMT (KRT14-/VIM+) previously described in this model¹⁵.
93 Immunostaining revealed that control skin SCCs were heterogeneous and 20% of them were
94 epithelial (KRT14+/VIM-), 35% presented hybrid EMT (KRT14+/ VIM+) and 45% had full
95 EMT (KRT14-/VIM+) (Fig. 1e, f). By contrast, overexpression of NETRIN-1 led to a
96 significant increase in tumours with full EMT (70%) and a decrease of SCCs with epithelial
97 phenotype (3%) (Fig. 1e, f), in good accordance with the EPCAM expression quantified by
98 FACS (Fig. 1d). These data demonstrate that overexpression of NETRIN-1 promotes tumour
99 initiation and EMT in a primary model of skin SCC.

100

101 **Targeting Netrin-1 inhibits EMT**

102 Although previous studies reported *in vitro* an upregulation of Netrin-1 occurring in
103 several cancers presenting EMT³¹⁻³⁴, the effect of pharmacological inhibition of Netrin-1 on
104 EMT *in vivo* has not been investigated so far. To assess whether the pharmacological inhibition
105 of Netrin-1 inhibits EMT, we administrated an anti-Netrin-1 blocking monoclonal antibody
106 (NP137) to LKPR mice 4 weeks following Tamoxifen administration and determined the
107 impact of Netrin-1 inhibition on tumour formation and EMT (Extended data 1e). NP137

administration three times per week led to a decrease of 50% in the number of SCCs per mouse (Fig. 1g). FACS quantification of the percentage of YFP+/EPCAM+ TCs (i.e., epithelial cells) and YFP+/EPCAM- TCs (i.e. cells that underwent EMT) showed that NP137 administration decreased the proportion of EPCAM- TCs that underwent EMT (41% in NP137-treated vs 77% in control mice) in primary skin SCCs presenting spontaneous EMT, showing that in the LKPR mouse model, pharmacological targeting of Netrin-1 inhibits EMT (Fig. 1h). To determine whether Netrin-1 inhibition differentially affects the different EMT states, we assessed by immunofluorescence the proportions of tumours states. NP137 administration increased the proportion of epithelial state (54% in NP137-treated vs 31% in the control mice), whereas the proportion of hybrid EMT was unchanged (16% in NP137-treated vs 12% in the control mice) and the proportion of late EMT state was decreased (30% in NP137-treated vs 56% in the control mice) (Fig. 1i, j). These data demonstrate that pharmacological targeting of Netrin-1 inhibits EMT in primary mouse model of cancer.

Targeting Netrin-1 inhibits metastasis

EMT has been shown to play an important role for metastasis formation in different mouse models and is associated with resistance to anti-cancer therapy^{1,4-6,11,12,35}. We first assessed whether pharmacological inhibition of Netrin-1 in LKPR mice decreased primary metastasis formation. NP137 administration strongly decreased the number of lung metastasis in LKPR mice (Fig. 2a), suggesting that Netrin-1 is important for the formation of spontaneous lung metastasis. As the number of tumours was reduced in LKPR mice treated with NP137, it is possible that the reduction of the number of lung metastases was the consequence of the reduced number of tumours. To clarify this issue, we injected YFP+ TCs intravenously and assessed the number of lung metastases upon pharmacological Netrin-1 inhibition. NP137 administration strongly decreased the number of lung metastases following tail vein injection

of FACS isolated YFP+ TCs from LKPR mice, demonstrating that Netrin-1 inhibition directly inhibits metastasis formation (Fig. 2b).

NP137 sensitizes cancer cells to chemotherapy

EMT has been shown to promote resistance to chemotherapy in skin SCCs^{2,36}. To assess whether pharmacological targeting of Netrin-1 can sensitize TCs to chemotherapy, we administrated Cisplatin/5-Fluoracil (5-FU), a standard chemotherapy for the treatment of human SCCs^{37,38} and assessed the impact of Netrin-1 inhibition on the response to chemotherapy. The combination of NP137 with Cisplatin/5-FU significantly potentiated the effect of Cisplatin/5-FU on the inhibition of tumour growth in primary SCCs from LKPR mice (Fig. 2c). These data demonstrate that pharmacological targeting of Netrin-1 can decrease the cancer features associated with EMT including metastasis and resistance to therapy.

Effect of NP137 on stromal cells

To assess in a comprehensive manner the impact of Netrin-1 inhibition on the different EMT tumour states and the composition of the tumour stroma, we performed single-cell RNA-sequencing (10x Genomics Chromium) of TCs and their associated stromal cells in 2 control and 2 NP137-treated primary skin SCCs. Unsupervised clustering revealed the presence of different cell populations in primary skin SCCs (Extended data 2), including TCs identified by *Yfp* expression and *Epcam* (Extended data 3a, b), immune cells (marked by *CD45/Ptprc* expression), combined each other with *CD86* for myeloid cells, *Cxcr2* for neutrophils or *Cd3d* for lymphocytes T cells), cancer associated fibroblasts (CAFs, expressing *Acta2* and *Pdgfra* and negative for *Yfp*), and endothelial cells (expressing *Pecam1*) (Extended data 3c, d). This clustering reveals that *Ntn1* is expressed in EMT TCs and CAFs in skin SCC from LKPR presenting spontaneous EMT (Extended data 3e).

After integration of the tumour of the tumour microenvironment across the conditions, we observed that NP137 administration decreased the proportion of TCs and changed the composition of the tumour stroma, with a relative increase in the proportion of CAFs (Extended data 4a-d). Using scCODA to perform differential abundance analysis, we found no significant difference in the proportion of the different CAF clusters (3 myCAFs, 2 iCAFs, proliferative and glycolysis CAFs) or gene expression within these clusters between the two control and two NP137-treated mice (Extended data 4e-h). Immunostaining analyses confirmed the relative increase of CAFs following NP137 administration (Extended data 4i).

Impact of NP137 on tumour cell states

To assess more specifically the impact of Netrin-1 inhibition on the tumour states, we clustered at higher resolution the YFP⁺ TCs of control and NP137-treated mice (Fig. 3a, b). In the control tumour, different clusters corresponding to distinct EMT cell states ranging from epithelial (*Epcam*⁺/*Krt14*⁺/*Vim*⁻), early hybrid EMT (*Epcam*⁻/*Krt14*⁺/*Vim*⁺), late hybrid EMT (*Epcam*⁻/*Krt14*⁻/*Krt8*⁺/*Vim*⁺/*Pdgfra*⁻), and late EMT (*Epcam*⁻/*Krt14*⁻, *Krt8*⁻/*Vim*⁺/*Pdgfra*⁺) were identified (Fig. 3a, Extended data 5a). NP137 administration was associated with an increase in the proportion of epithelial TC state, a similar proportion of early, a decreased proportion of late hybrid EMT and a strong decrease in the late EMT as compared to control (Fig. 3b, c, Extended data 5b, c). *In situ* immunofluorescence for KRT14, VIM, KRT8 and PGFRA confirmed the increase of epithelial states and the decrease of the late EMT tumour state upon NP137 administration (Fig. 3d).

Spatial transcriptomic analysis using Visium 10x unravelled the spatial localization of the different tumour states identified by single-cell RNA-seq and showed that they were localised in distinct niches as previously reported¹⁵. NP137 administration increased the

epithelial state (*Epcam*⁺/*Krt14*⁺) and inhibited the occurrence of late EMT state (*Krt14*⁻/*Krt8*⁻/*Vim*⁺) blocking EMT progression at the hybrid EMT state (*Krt8*⁺/*Vim*⁺) (Fig. 3e, f, Extended data 6).

To further understand the mechanisms and signalling pathways by which NP137 administration regulates EMT, we have performed pathway analyses using the MSigDB Hallmark genesets³⁹ on the single-cell RNA-seq data. These analyses revealed that pathways associated with EMT, hypoxia, angiogenesis and inflammatory response were all significantly decreased in TCs following Netrin-1 inhibition (Fig. 3g).

Lineage trajectory analysis revealed that two distinct lineage trajectories could be identified in the control tumour, with a trajectory going from epithelial cells towards hybrid EMT and another trajectory going from the epithelial state toward the late full EMT state (Fig. 4a). NP137-treated tumour cells were characterized by different lineage trajectories with the absence of a trajectory toward the late EMT state expressing high level of *Aqp1* and the appearance of two new trajectories toward epithelial states (Epithelial-B1 and Epithelial-B2), and two different hybrid EMT trajectories (Fig. 4b). Epithelial-B1, was characterized by high expression of *Krt15*, while gene ontology (GO) terms enrichment analysis of marker genes of cells belonging to Epithelial-B2 revealed an upregulation of glycolysis and a higher keratinization (Fig. 4b, c).

In situ analysis using RNA-fish and Visium 10x spatial transcriptomic on tumour sections of control and NP137-treated tumours showed a decrease of *Aqp1* expressing cells (Fig. 4d) and an increase of TCs expressing *Krt15* following Netrin-1 inhibition confirming the inhibition of the late EMT trajectory and the increase of epithelial states upon NP137 administration (Fig. 4e). Altogether these data reveal that EMT is characterized by the presence

of different EMT tumour states with two different differentiation trajectories of epithelial state toward distinct EMT states and that the pharmacological targeting of Netrin-1 inhibits the switch of epithelial into the late EMT state and promotes tumour cell differentiation into epithelial state.

Netrin-1/Unc5b axis promotes EMT

Netrin-1 has been proposed to play a pleiotropic role in cancer including a cellular autonomous role in tumour proliferation and apoptosis as well as a non-cellular autonomous mechanism regulating tumour growth by controlling tumour angiogenesis and CAFs functions¹⁶⁻²⁷. Our single-cell analysis shows that NP137 administration modulates the composition of the tumour microenvironment and the proportion of the different EMT tumour cell states. NP137 has been shown to specifically inhibit the interaction of Netrin-1 with its receptor Unc5b⁴⁰. To assess whether the regulation of EMT and the promotion of pro-epithelial states by NP137 administration is the consequence of a disruption of a paracrine or an autocrine Netrin-1/Unc5b signalling axis that directly regulates EMT states, we studied the impact of genetic knockdown (KD) of *Netrin-1* and *Unc5b* on EMT states in a tumour cell autonomous manner *in vitro* in the absence of the tumour microenvironment. FACS isolated EPCAM+ TCs from primary SCCs from LKPR mice and cultured *in vitro* progressively underwent EMT as shown by the progressive loss of EPCAM expression by TCs (Fig. 5a) with an average of 60% of EPCAM+ TCs that switch to EPCAM- TCs over 2 weeks in culture. Interestingly, both ShRNA KD of *Netrin-1* and *Unc5b*, resulted in a strong decrease of the ability of EPCAM+ TCs to switch to the EPCAM- EMT phenotype (Fig. 5a). The inhibition of EMT upon ShRNA KD of *Netrin-1* and *Unc5b* was accompanied by a decrease in cell migration that was not further enhanced by NP137 administration (Fig. 5b).

To assess the molecular mechanisms by which Netrin-1 and Unc5b signalling regulate EMT, we performed bulk RNA-seq of EPCAM⁺ TCs from control, *Netrin-1* KD, and *Unc5b* KD TCs cultured *in vitro* 6 days after plating of FACS isolated Epcam⁺ TCs. We found that more than 50% of the genes downregulated and upregulated following *Unc5b* KD were also differentially regulated by *Netrin-1* KD (Fig. 5c), showing that Netrin-1 and Unc5b regulate a similar signalling pathway and transcriptional program. Consistent with the results of the single-cell RNA-seq following NP137 administration, *Netrin-1* and *Unc5b* KD promote the expression of genes associated with the epithelial state (eg: *Krt14*, *Krt15*, *Involucrin*, *Claudin*) (Fig. 5d) and decrease the expression of genes associated with EMT and promoting EMT (eg: *Aqp5*, *Nrp1*, *Nr2f2*, *Twist1*, *Twist2*) (Fig. 5e-g). Altogether, these data demonstrate that targeting Netrin-1/Unc5b signalling axis in TCs decrease EMT and promote epithelial state in skin SCCs in a cellular autonomous manner independently of the tumour microenvironment.

NP137 prevents EMT in human cancer

To assess the human and clinical relevance of our findings, we first assessed the correlations between Netrin-1 expression, Unc5b expression and EMT signature in human non-small cell lung carcinoma (lung SCC and lung adenocarcinoma) and melanoma. We used several human EMT signature previously described^{12,39,41} and the gene expression dataset from the panTCGA version of lung SCC (LUSCC) (484 primary tumors), lung adenocarcinoma (LUAD) (510 primary tumors) and skin cutaneous melanoma (SKCM) (76 primary tumors, 367 metastasis). While Netrin1 expression was not strongly associated with the EMT score, there was a very good correlation between the expression of Netrin1 receptor Unc5b and the different EMT scores in these 3 cancers (Fig 6a, b).

To assess the functional relevance of these data, we then assessed the impact of blocking Netrin-1/Unc5b signaling on EMT in A549 human lung adenocarcinoma cell line, the most

commonly used human cancer cell line that can undergo EMT in a plastic manner upon TGF- β 1 administration^{9,10}. A549 cells were treated with recombinant TGF- β 1 *in vitro* for 3 days, which promoted mesenchymal cell morphology, increased Netrin-1 expression and promoted EMT as shown by the upregulation of Vimentin and downregulation of E-cadherin expression (Fig. 6c, d). We next performed subcutaneous grafting of these A549 cells that underwent EMT cells into immunodeficient mice and administrated anti-Netrin-1 antibody every two days. Interestingly, immunostaining analysis revealed that Netrin-1 inhibition significantly increases the number of TCs expressing high levels of epithelial marker E-cadherin (Fig. 6e, f), demonstrating that Netrin-1 inhibition decreases EMT in human cancer cells *in vivo*. Treatment of a human endometrial adenocarcinoma cell line (Ishikawa cells) with NP137 following their transplantation into immunodeficient mice decreased tumour growth (Extended data 7a) and resulted in an increase in epithelial gene expression (Extended data 7b), further demonstrating that targeting Netrin1 inhibits EMT. Consistent with the decrease of EMT induced by Netrin1 inhibition, we found that NP137 administration decreased cell migration *in vitro* (Extended data 7c).

Discussion

Our study demonstrates that pharmacological targeting of Netrin-1 using NP137, an anti-Netrin-1 blocking monoclonal antibody currently tested in phase II clinical trials for the treatment of different solid tumours is a safe and effective strategy to target EMT in primary mouse and human tumours, decreasing lung metastasis and increasing the response of tumour cells to chemotherapy.

Our bioinformatics analysis of single-cell RNA-seq data upon Netrin-1 inhibition combined with *in situ* characterization revealed the molecular mechanisms by which Netrin-1 regulates EMT and promotes a late EMT differentiation trajectory. Inhibition of Netrin-1

induces a switch in the lineage differentiation of tumour cells that redirect the tumour differentiation toward an epithelial tumour state that is more sensitive to chemotherapy and less prone to give rise to metastasis. Netrin-1 exerts its pro-EMT function by signalling to Unc5b, which regulates positively the expression of a mesenchymal transcriptional program and negatively the expression of genes controlling cell-cell adhesion and promoting the epithelial differentiation program. The sensitization of tumour cells to chemotherapy following NP137 administration suggests that the combination of anti-Netrin-1 antibody with might be beneficial for patients with cancer presenting EMT features.

We also demonstrated the human relevance of pharmacological targeting EMT following treatment with anti-Netrin-1 blocking antibody in human lung cancer cell line and endometrial adenocarcinoma that presents EMT plasticity, demonstrating that pharmacological inhibition of EMT can be achieved in human cancers *in vivo* in pre-clinical settings.

Altogether, our study provides the proof of principle that pharmacological targeting of EMT in primary mouse tumour model and human cancers is now possible. These results have important implications for developing new strategies for anti-cancer therapy combining Netrin-1 inhibition in patients with cancer presenting EMT, for the development of novel biomarkers that will help to better stratify the cancer patients that are more likely to respond to anti-Netrin-1 therapy.

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AUTHOR CONTRIBUTION

J.L., I.P., S.V. and C.B. designed the experiments and performed data analysis. J.L. and I.P. performed most of biological experiments. S.V. performed most of bioinformatic analysis for single-cell sequencing. N.R., Y.S. and A.S. helped for bioinformatic analysis. J.V.H. helped with 10x single-cell sequencing. R.M.S. helped with RNA-Scope analysis. V.M., A.B., S.S., S.L., S.G. and S.B. helped with cell culture experiments immunostainings, blocking antibody injection and follow-up of the mice. I.S., J.A., E.Z, C.D. and A.C. performed immunostaining and quantification of EMT in human cancer samples. B.D., M.B and N.B performed biological *in vivo* and *in vitro* experiments on Ishikawa endometrial cell lines. C.S and D.V. performed

bioanalysis from TCGA. C.D. performed FACS sorting. T.V. helped and supervised the single-cell data analysis. P.M. and A.B. helped with the design of the experiments, data analysis and provided NP137 antibody. All authors read and approved the final manuscript.

COMPETING INTERESTS

Authors declare potential competing interests.

J.L., P.M. A.B., B.D., M.B and N.B are employees of NETRIS Pharma, Lyon, France.

T.V. is co-inventor on licensed patents WO/2011/157846 (Methods for haplotyping single cells); WO/2014/053664 (High-throughput genotyping by sequencing low amounts of genetic material); WO/2015/028576 (Haplotyping and copy number typing using polymorphic variant allelic frequencies).

DATA AVAILABILITY STATEMENT

All raw data sequencing data for mouse RNA-seq, single cell RNA-seq and 10x Visium have been deposited in the gene expression Omnibus with the following accession number: GSE234267

FIGURE LEGENDS

Figure 1. Targeting Netrin-1 inhibits EMT. **a, b**, Relative mRNA expression of *Ntn1* (**a**) and *Unc5b* (**b**) in EPCAM+ (n= 4) as compared to EPCAM- (n= 10) tumour cells (TCs) defined by qRT-PCR (data are normalized to *Tbp* gene, mean \pm s.e.m., two-tailed Mann-Whitney U test). **c**, Dot plot showing the number of tumours in control (n= 16) and NETRIN-1 gain of function (n= 17) mice (mean \pm s.e.m., two-tailed t test). **d**, Proportion of EPCAM+ TCs in control (n= 34 tumours from n= 16 mice) and NETRIN-1 gain of function mice (n= 70 tumours from n= 17 mice) (mean \pm s.e.m., two-tailed t test). **e**, Co-immunostaining of YFP and KRT14 or Vimentin in primary control and NETRIN-1 gain of function tumours (n= 21 tumours from 11 control mice and n= 34 tumours from 9 NETRIN-1 gain of function mice) (Scale bars, 20 μ m). **f**, Percentage of tumours presenting epithelial (KRT14+/VIM-), hybrid EMT (KRT14+ and VIM+) and full EMT (KRT14-/VIM+) (n= 21 tumours from n= 11 control mice and n= 34 tumours from n= 9 NETRIN-1 gain of function mice). **g**, Dot plot showing the number of tumours in control (n= 10) and NP137 treated (n= 15) mice (mean \pm s.e.m., two-tailed t test). **h**, Proportion of EPCAM+ TCs in control (n= 148 tumours from n= 20 mice) and NP137 - treated (n= 117 tumours from 16 mice) skin SCC mice (mean \pm s.e.m., two-tailed t test). **i**, Co-immunostaining of YFP and KRT14 or Vimentin in control and NP137-treated skin SCC (n= 32 tumours from 10 control mice and n= 24 NP137 treated SCCs from 9 mice) (Scale bars, 20 μ m). **j**, Percentage of tumours presenting epithelial (KRT14+/VIM-), hybrid EMT (KRT14+ and VIM+) and full EMT (KRT14-/VIM+) (n= 32 tumours from 10 control mice and n= 24 NP137-treated SCCs from 9 mice).

Figure 2. Targeting Netrin-1 reduces metastasis and sensitizes tumour cells to chemotherapy in skin SCC. **a**, Dot plot showing the number of spontaneous lung metastases

in control (n= 12) and NP137-treated (n= 11) mice presenting skin SCC (mean \pm s.e.m, two-tailed t test). **b**, Dot plot showing the number of lung metastases arising from the intravenous injection of 1000 EPCAM- TCs (n= 18 mice injected control mice and n= 18 mice injected for NP137-treatment) (mean \pm s.e.m, two-tailed t test). **c**, Relative tumour volume overtime of control tumours (n= 29 from 5 mice) or upon therapy with Cisplatin/5-Fluoracil (5-FU) (n= 58 from 8 mice), anti-Netrin-1 antibody (n= 29 from 5 mice) or combination of Cisplatin/5-FU and anti-Netrin-1 (n= 59 from 8 mice) (mean \pm s.e.m., two-tailed t test). Tumour volumes were normalized to the tumour volume at the 1st day of chemotherapy.

Figure 3. Pharmacological inhibition of Netrin-1 inhibits late EMT and promotes epithelial tumour states. **a, b**, Uniform Manifold Approximation and Projection (UMAP) plots coloured by the EMT states for control (**a**) and NP137-treated YFP+ TCs skin SCC (**b**). The colours represent the different tumour states. **c**, Boxplot depicting the proportion of the different tumour states for the 4 samples in control and NP137-treated conditions. The centre line, top and bottom of the boxplots represent respectively the median, 25th and 75th percentile and whiskers are $1.5 \times$ IQR. Significant proportion changes are indicated by $FDR < 0.2$. **d**, Co-immunostaining of YFP and KRT14, KRT8, Vimentin or PDGFRA in control (left) and anti-Netrin-1 treated skin SCC (right) that define areas with different degrees of EMT (n= 3 control tumours, n= 3 NP137-treated tumours) (Scale bars, 20 μ m). **e**, Spatial transcriptomic using 10x VISIUM was conducted on tumour sections of control and NP137-treated mice. Normalized gene expression values are visually represented as a colour gradient. **f**, Summary of the different areas presenting different tumour states based on the expression of *Epcam*, *Krt14*, *Krt8* and *Vim* (green area highlights epithelial state: *Epcam*+/*Krt14*+/*Vim*-; orange area highlights early hybrid EMT state: *Epcam*-/*Krt14*+/*Vim*+; red area defines late hybrid EMT state: *Epcam*-/*Krt14*-/*Krt8*+/*Vim*+; dark red defines late full EMT state: *Epcam*-/*Krt14*-/*Krt8*-/*Vim*+). **g**,

Combined boxplot and violin plot displaying the activity of 4 MSigDB³⁷ hallmark gene sets (Epithelial-to-Mesenchymal Transition, Hypoxia, Angiogenesis and Inflammatory response) in control (n=2) and NP137-treated (n=2) tumours. The “Area Under the Curve” (AUC) value depicts whether the different hallmark gene sets are enriched between control and NP137 treated tumours (the center line, top and bottom of the boxplots represent respectively the median, 25th and 75th percentile and whiskers are $1.5 \times$ the interquartile range (IQR), two-sided Wilcoxon rank-sum test with Bonferroni correction).

Figure 4. Pharmacological inhibition of Netrin-1 inhibits late EMT promotes epithelial differentiation trajectories of tumour cells. **a, b**, Pseudotemporal analysis using Monocle2 showing lineage trajectories in control skin SCC showing two EMT trajectories (hybrid and full EMT trajectories) (**a**) and in NP137-treated skin SCC showing the absence of the late EMT trajectory and the appearance of new epithelial trajectories (**b**). Dots represent single cells. Green, orange, red and dark red colors respectively represent the epithelial state, the early hybrid, the late hybrid EMT and the late EMT state. Gene expression is visualized as a colour gradient with blue indicating no expression and red indicating maximum expression. Two new branches were detected in the NP137-treated trajectory, indicated by Epithelial-B1 and Epithelial-B2. **c**, Combined boxplot and violin plot displaying the activity of glycolysis and keratinization gene sets for the TCs belonging to the new epithelial state and other EMT states based on GO terms analysis in NP137-treated tumours (n=2) (the centre line, top and bottom of the boxplots represent respectively the median, 25th and 75th percentile and whiskers are $1.5 \times$ IQR, two-sided Wilcoxon rank-sum test with Bonferroni correction). **d**, Immunostaining for YFP and RNA in situ hybridization (RNA-scope) for *Krt14*, *Vim*, or *Aqp1* in control and NP137-treated skin SCCs (n = 2 independent biological replicates, Scale bars, 20 μ m). **e**, *Krt15* expression spots using 10x VISIUM spatial transcriptomic on tumour sections. Gene expression

values have been normalized in the control and treated sample and are visualized as colour gradient (scale bars, 500 μ m).

Figure 5. Netrin-1 and Unc5b knockdown inhibits EMT and promotes epithelial state. a, EPCAM expression following *in vitro* culture of FACS isolated primary EPCAM⁺ tumour cells transduced with empty vector, *Ntn1* and *Unc5b* ShRNA KD (n= 8 independent replicates for empty vector, n= 6 independent replicates for *Unc5b* KD and n= 3 independent replicates for *Ntn1* KD; mean \pm s.e.m., two-tailed t test) **b,** Percentage of migrated Epcam – LKPR cells quantified with crystal violet staining (n=2 independent replicates, 3 wells per condition; mean \pm s.e.m, two-tailed Mann-Whitney U test). **c,** Venn diagram showing the overlap between the genes upregulated and downregulated in *Ntn1* and *Unc5b* KD cell lines. **d,** mRNA expression of upregulated epithelial genes as defined by RNA-sequencing of EPCAM⁺ cells 6 days after plating of 100% EPCAM + TCs (Histograms represent mean, n= 2 for empty vector, *Ntn1* KD and *Unc5b* KD). **e,** mRNA expression of mesenchymal genes downregulated upon *Ntn1* KD and *Unc5b* KD, as defined by RNA-sequencing in EPCAM⁺ cells 6 days after plating of 100% EPCAM⁺ TCs (Histograms represent mean, n= 2). **f, g,** *In situ* hybridization (RNA-scope) for *Nrp1* (**f**) and *Aqp5* (**g**) in empty vector control, *Ntn1* and *Unc5B* KD cell line. (n = 2 independent biological replicates, Scale bars, 20 μ m).

Figure 6. Anti-Netrin-1 therapy inhibits EMT in human cancer cells. a, Scatterplots of *NTN1* and *UNC5B* expression versus Hallmark EMT signatures are shown across Lung squamous cell carcinoma (LUSCC) (n= 484 primary tumors), and Lung adenocarcinoma (LUAD) (n= 510 primary tumors) cancer types from TCGA, one dataset per row. Spearman correlations are shown in each panel top left corner. **b,** Barplots with Spearman correlations between *NTN1*, *UNC5B* expression and three EMT signatures^{12,39,41} are shown across lung SCC

(LUSCC) (n = 484 primary tumors), lung adenocarcinoma (LUAD) (n = 510 primary tumors), and skin cutaneous melanoma (SKCM) (n = 443 tumors including 76 primary tumors and 367 metastases) cancer types from TCGA, as well as 95% confidence intervals (eventually clipped at 0 for low correlations). **c**, Microscopic appearance of A549 NSCLC cell line not treated or after 3 days upon TGF- β 1 treatment (n = 3, scale bars, 20 μ m). **d**, Western blot analysis of Netrin-1, E-cadherin and Vimentin expression in human A549 NSCLC cell line in control conditions or following 3 days of TGF- β 1 treatment. **e**, Co-immunostaining of E-cadherin and Pan-cytokeratin on tumours arising from subcutaneous grafting into immunodeficient mice of A549 NSCLC cell line pre-treated with TGF- β 1 *in vitro* for 6 days. The mice were treated with physiologic serum or NP137 for 25 days and the tumours were collected for histological analysis (scale bars, 20 μ m) **f**, Percentage of Pan-cytokeratin + TCs expressing high levels of epithelial marker E-cadherin in tumours (each dot represents the mean of CDH1 high cells in 4 representative areas from each tumour, n= 6 control tumours and n= 6 NP137 treated tumours) (mean \pm s.e.m., two-tailed t test).

464 **References**

- 465 1 Ye, X. & Weinberg, R. A. Epithelial-Mesenchymal Plasticity: A Central Regulator of
466 Cancer Progression. *Trends Cell Biol* **25**, 675-686, doi:10.1016/j.tcb.2015.07.012
467 (2015).
- 468 2 Shibue, T. & Weinberg, R. A. EMT, CSCs, and drug resistance: the mechanistic link and
469 clinical implications. *Nat Rev Clin Oncol* **14**, 611-629, doi:10.1038/nrclinonc.2017.44
470 (2017).
- 471 3 Lambert, A. W. & Weinberg, R. A. Linking EMT programmes to normal and neoplastic
472 epithelial stem cells. *Nat Rev Cancer* **21**, 325-338, doi:10.1038/s41568-021-00332-6
473 (2021).
- 474 4 Puisieux, A., Brabletz, T. & Caramel, J. Oncogenic roles of EMT-inducing transcription
475 factors. *Nat Cell Biol* **16**, 488-494, doi:10.1038/ncb2976 (2014).
- 476 5 Brabletz, S., Schuhwerk, H., Brabletz, T. & Stemmler, M. P. Dynamic EMT: a multi-tool
477 for tumor progression. *EMBO J* **40**, e108647, doi:10.15252/emboj.2021108647 (2021).
- 478 6 Pastushenko, I. & Blanpain, C. EMT Transition States during Tumor Progression and
479 Metastasis. *Trends Cell Biol* **29**, 212-226, doi:10.1016/j.tcb.2018.12.001 (2019).
- 480 7 Nieto, M. A., Huang, R. Y., Jackson, R. A. & Thiery, J. P. Emt: 2016. *Cell* **166**, 21-45,
481 doi:10.1016/j.cell.2016.06.028 (2016).
- 482 8 <https://clinicaltrials.gov/ct2/show/NCT02977195>.
- 483 9 Kasai, H., Allen, J. T., Mason, R. M., Kamimura, T. & Zhang, Z. TGF-beta1 induces human
484 alveolar epithelial to mesenchymal cell transition (EMT). *Respir Res* **6**, 56,
485 doi:10.1186/1465-9921-6-56 (2005).
- 486 10 Kim, J. H. *et al.* Transforming growth factor beta1 induces epithelial-to-mesenchymal
487 transition of A549 cells. *J Korean Med Sci* **22**, 898-904, doi:10.3346/jkms.2007.22.5.898
488 (2007).
- 489 11 Voon, D. C., Huang, R. Y., Jackson, R. A. & Thiery, J. P. The EMT spectrum and
490 therapeutic opportunities. *Mol Oncol* **11**, 878-891, doi:10.1002/1878-0261.12082
491 (2017).
- 492 12 Tan, T. Z. *et al.* Epithelial-mesenchymal transition spectrum quantification and its
493 efficacy in deciphering survival and drug responses of cancer patients. *EMBO Mol Med*
494 **6**, 1279-1293, doi:10.15252/emmm.201404208 (2014).
- 495 13 Lapouge, G. *et al.* Skin squamous cell carcinoma propagating cells increase with
496 tumour progression and invasiveness. *EMBO J* **31**, 4563-4575,
497 doi:10.1038/emboj.2012.312 (2012).
- 498 14 Latil, M. *et al.* Cell-Type-Specific Chromatin States Differentially Prime Squamous Cell
499 Carcinoma Tumor-Initiating Cells for Epithelial to Mesenchymal Transition. *Cell Stem*
500 *Cell* **20**, 191-204 e195, doi:10.1016/j.stem.2016.10.018 (2017).
- 501 15 Pastushenko, I. *et al.* Identification of the tumour transition states occurring during
502 EMT. *Nature* **556**, 463-468, doi:10.1038/s41586-018-0040-3 (2018).
- 503 16 Paradisi, A. *et al.* Combining chemotherapeutic agents and netrin-1 interference
504 potentiates cancer cell death. *EMBO Mol Med* **5**, 1821-1834,
505 doi:10.1002/emmm.201302654 (2013).
- 506 17 Paradisi, A. *et al.* Netrin-1 up-regulation in inflammatory bowel diseases is required for
507 colorectal cancer progression. *Proc Natl Acad Sci U S A* **106**, 17146-17151,
508 doi:10.1073/pnas.0901767106 (2009).

509 18 Paradisi, A. *et al.* NF-kappaB regulates netrin-1 expression and affects the conditional
510 tumor suppressive activity of the netrin-1 receptors. *Gastroenterology* **135**, 1248-
511 1257, doi:10.1053/j.gastro.2008.06.080 (2008).

512 19 Fitamant, J. *et al.* Netrin-1 expression confers a selective advantage for tumor cell
513 survival in metastatic breast cancer. *Proc Natl Acad Sci U S A* **105**, 4850-4855,
514 doi:10.1073/pnas.0709810105 (2008).

515 20 Delloye-Bourgeois, C. *et al.* Netrin-1 acts as a survival factor for aggressive
516 neuroblastoma. *J Exp Med* **206**, 833-847, doi:10.1084/jem.20082299 (2009).

517 21 Sung, P. J. *et al.* Cancer-Associated Fibroblasts Produce Netrin-1 to Control Cancer Cell
518 Plasticity. *Cancer Res* **79**, 3651-3661, doi:10.1158/0008-5472.CAN-18-2952 (2019).

519 22 Park, K. W. *et al.* The axonal attractant Netrin-1 is an angiogenic factor. *Proc Natl Acad Sci U S A* **101**, 16210-16215, doi:10.1073/pnas.0405984101 (2004).

520
521 23 Arakawa, H. Netrin-1 and its receptors in tumorigenesis. *Nat Rev Cancer* **4**, 978-987,
522 doi:10.1038/nrc1504 (2004).

523 24 Brisset, M., Grandin, M., Bernet, A., Mehlen, P. & Hollande, F. Dependence receptors:
524 new targets for cancer therapy. *EMBO Mol Med* **13**, e14495,
525 doi:10.15252/emmm.202114495 (2021).

526 25 Hao, W. *et al.* The pan-cancer landscape of netrin family reveals potential oncogenic
527 biomarkers. *Sci Rep* **10**, 5224, doi:10.1038/s41598-020-62117-5 (2020).

528 26 Dumartin, L. *et al.* Netrin-1 mediates early events in pancreatic adenocarcinoma
529 progression, acting on tumor and endothelial cells. *Gastroenterology* **138**, 1595-1606,
530 1606 e1591-1598, doi:10.1053/j.gastro.2009.12.061 (2010).

531 27 Kefeli, U. *et al.* Netrin-1 in cancer: Potential biomarker and therapeutic target? *Tumour Biol* **39**, 1010428317698388, doi:10.1177/1010428317698388 (2017).

532
533 28 Haerinck, J. & Berx, G. Partial EMT takes the lead in cancer metastasis. *Dev Cell* **56**,
534 3174-3176, doi:10.1016/j.devcel.2021.11.012 (2021).

535 29 Simeonov, K. P. *et al.* Single-cell lineage tracing of metastatic cancer reveals selection
536 of hybrid EMT states. *Cancer Cell* **39**, 1150-1162 e1159,
537 doi:10.1016/j.ccell.2021.05.005 (2021).

538 30 Yang, J. *et al.* Guidelines and definitions for research on epithelial-mesenchymal
539 transition. *Nat Rev Mol Cell Biol* **21**, 341-352, doi:10.1038/s41580-020-0237-9 (2020).

540 31 Jin, X. *et al.* Netrin-1 interference potentiates epithelial-to-mesenchymal transition
541 through the PI3K/AKT pathway under the hypoxic microenvironment conditions of
542 non-small cell lung cancer. *Int J Oncol* **54**, 1457-1465, doi:10.3892/ijo.2019.4716
543 (2019).

544 32 Zhang, X. *et al.* Netrin-1 elicits metastatic potential of non-small cell lung carcinoma
545 cell by enhancing cell invasion, migration and vasculogenic mimicry via EMT induction.
546 *Cancer Gene Ther* **25**, 18-26, doi:10.1038/s41417-017-0008-8 (2018).

547 33 Yan, W. *et al.* Netrin-1 induces epithelial-mesenchymal transition and promotes
548 hepatocellular carcinoma invasiveness. *Dig Dis Sci* **59**, 1213-1221,
549 doi:10.1007/s10620-013-3016-z (2014).

550 34 Han, P. *et al.* Netrin-1 promotes cell migration and invasion by down-regulation of
551 BVES expression in human hepatocellular carcinoma. *Am J Cancer Res* **5**, 1396-1409
552 (2015).

553 35 Revenco, T. *et al.* Context Dependency of Epithelial-to-Mesenchymal Transition for
554 Metastasis. *Cell Rep* **29**, 1458-1468 e1453, doi:10.1016/j.celrep.2019.09.081 (2019).

555 36 DeConti, R. C. Chemotherapy of squamous cell carcinoma of the skin. *Semin Oncol* **39**,
556 145-149, doi:10.1053/j.seminoncol.2012.01.002 (2012).

557 37 Khansur, T. & Kennedy, A. Cisplatin and 5-fluorouracil for advanced locoregional and
558 metastatic squamous cell carcinoma of the skin. *Cancer* **67**, 2030-2032,
559 doi:10.1002/1097-0142(19910415)67:8<2030::aid-cncr2820670803>3.0.co;2-k
560 (1991).

561 38 Chen, Q. Y. *et al.* miR-206 regulates cisplatin resistance and EMT in human lung
562 adenocarcinoma cells partly by targeting MET. *Oncotarget* **7**, 24510-24526,
563 doi:10.18632/oncotarget.8229 (2016).

564 39 Liberzon, A. *et al.* The Molecular Signatures Database (MSigDB) hallmark gene set
565 collection. *Cell Syst* **1**, 417-425, doi:10.1016/j.cels.2015.12.004 (2015).

566 40 Grandin, M. *et al.* Structural Decoding of the Netrin-1/UNC5 Interaction and its
567 Therapeutical Implications in Cancers. *Cancer Cell* **29**, 173-185,
568 doi:10.1016/j.ccell.2016.01.001 (2016).

569 41 Mak, M. P. *et al.* A Patient-Derived, Pan-Cancer EMT Signature Identifies Global
570 Molecular Alterations and Immune Target Enrichment Following Epithelial-to-
571 Mesenchymal Transition. *Clin Cancer Res* **22**, 609-620, doi:10.1158/1078-0432.CCR-
572 15-0876 (2016).

573 42 Srinivas, S. *et al.* Cre reporter strains produced by targeted insertion of EYFP and ECFP
574 into the ROSA26 locus. *BMC Dev Biol* **1**, 4, doi:10.1186/1471-213x-1-4 (2001).

575 43 Barker, N. *et al.* Identification of stem cells in small intestine and colon by marker gene
576 *Lgr5*. *Nature* **449**, 1003-1007, doi:10.1038/nature06196 (2007).

577 44 Tuveson, D. A. *et al.* Endogenous oncogenic K-ras(G12D) stimulates proliferation and
578 widespread neoplastic and developmental defects. *Cancer Cell* **5**, 375-387,
579 doi:10.1016/s1535-6108(04)00085-6 (2004).

580 45 Jonkers, J. *et al.* Synergistic tumor suppressor activity of BRCA2 and p53 in a conditional
581 mouse model for breast cancer. *Nat Genet* **29**, 418-425, doi:10.1038/ng747 (2001).

582 46 Boussouar, A. *et al.* Netrin-1 and Its Receptor DCC Are Causally Implicated in
583 Melanoma Progression. *Cancer Res* **80**, 747-756, doi:10.1158/0008-5472.CAN-18-1590
584 (2020).

585 47 Satija, R., Farrell, J. A., Gennert, D., Schier, A. F. & Regev, A. Spatial reconstruction of
586 single-cell gene expression data. *Nat Biotechnol* **33**, 495-502, doi:10.1038/nbt.3192
587 (2015).

588 48 Traag, V. A., Waltman, L. & van Eck, N. J. From Louvain to Leiden: guaranteeing well-
589 connected communities. *Sci Rep* **9**, 5233, doi:10.1038/s41598-019-41695-z (2019).

590 49 Zappia, L. & Oshlack, A. Clustering trees: a visualization for evaluating clusterings at
591 multiple resolutions. *Gigascience* **7**, doi:10.1093/gigascience/giy083 (2018).

592 50 Korsunsky, I. *et al.* Fast, sensitive and accurate integration of single-cell data with
593 Harmony. *Nat Methods* **16**, 1289-1296, doi:10.1038/s41592-019-0619-0 (2019).

594 51 Franzen, O., Gan, L. M. & Björkegren, J. L. M. PanglaoDB: a web server for exploration
595 of mouse and human single-cell RNA sequencing data. *Database (Oxford)* **2019**,
596 doi:10.1093/database/baz046 (2019).

597 52 Buttner, M., Ostner, J., Müller, C. L., Theis, F. J. & Schubert, B. scCODA is a Bayesian
598 model for compositional single-cell data analysis. *Nat Commun* **12**, 6876,
599 doi:10.1038/s41467-021-27150-6 (2021).

- 53 Elyada, E. *et al.* Cross-Species Single-Cell Analysis of Pancreatic Ductal Adenocarcinoma Reveals Antigen-Presenting Cancer-Associated Fibroblasts. *Cancer Discov* **9**, 1102-1123, doi:10.1158/2159-8290.CD-19-0094 (2019).
- 54 Trapnell, C. *et al.* The dynamics and regulators of cell fate decisions are revealed by pseudotemporal ordering of single cells. *Nat Biotechnol* **32**, 381-386, doi:10.1038/nbt.2859 (2014).
- 55 Saelens, W., Cannoodt, R., Todorov, H. & Saeys, Y. A comparison of single-cell trajectory inference methods. *Nat Biotechnol* **37**, 547-554, doi:10.1038/s41587-019-0071-9 (2019).
- 56 Subramanian, A. *et al.* Gene set enrichment analysis: a knowledge-based approach for interpreting genome-wide expression profiles. *Proc Natl Acad Sci U S A* **102**, 15545-15550, doi:10.1073/pnas.0506580102 (2005).

METHODS

Compliance with ethical regulations.

Mouse colonies were maintained in a certified animal facility in accordance with the European guidelines. All the experiments were approved by the corresponding ethical committee (Commission d'Etique et du Bien-Être Animal CEBEA, Faculty of Medicine, Université Libre de Bruxelles). CEBEA follows the European Convention for the Protection of Vertebrate Animals used for Experimental and other Scientific Purposes (2010/63/UE). The mice were checked every day and were euthanized when the tumour reaches the end-point size (2cm³) or if the tumour was ulcerated (independently of the size) or if the mouse lost > 20% of its initial weight or showed any other sign of distress (based on general health status and spontaneous activity). None of the experiments performed in this study surpassed the size limit of the tumours. All the experiments complied strictly with the protocols approved by ethical committee. The housing conditions of all animals were strictly following the ethical regulations. The room temperature ranged from 20 and 24°C. The relative ambient humidity at the level of mouse cages was 55 per cent +/-10. Each cage was provided with food, water and two types of

nesting material. Semi-natural light cycle of 12:12 was used. All the experiments complied strictly with the protocols approved by ethical committee.

For subcutaneous grafting using Ishikawa cells, Female Swiss nude mice, 6-weeks old, were purchased from Janvier laboratories (France) and maintained in specific pathogen-free conditions (P-PAC, Lyon, France) and stored in sterilized filter-topped cages. Their care and housing were in accordance with institutional European guidelines as put forth by the CECCAP local Ethical Committee.

Mouse strains.

Rosa26-YFP mice⁴², Lgr5CreER mice⁴³, KRasLSL-G12D mice⁴⁴ and p53fl/fl mice⁴⁵ were imported from the NCI mouse repository and Jackson Laboratories. NOD/SCID/Il2R γ null mice were purchased from Charles River. All mice used in this study were composed of males and females with mixed genetic background. No randomization and no blinding were performed in this study. tgNTN1 (for hNTN1 gain of function) mice was imported from Mehlen Laboratory – Apoptosis, cancer and development, Centre de Recherche en Cancérologie, Lyon, France⁴⁶.

Lgr5CreER/ Kras^{LSL-G12D}/p53^{fl/fl}/Rosa26-YFP^{+/+} (LKPR) and Lgr5CreER/ Kras^{LSL-G12D}/p53^{fl/fl}/Rosa26LSL-YFP^{+/+}/Rosa26LSL-hNTN1 (LKPRhNTN1) induced skin Squamous Cell Carcinoma (SCC).

The model Lgr5CreER/ KrasLSL-G12D/p53fl/fl/Rosa26-YFP^{+/+} (LKPR) is a combination of a crossing of genetically modified mice: Rosa26-YFP mice⁴², the Lgr5CreER mice⁴³, KrasLSL_G12D mice⁴⁴ and p53fl/fl4 mice⁴⁵ and has been developed in our laboratory¹³. Technically, intraperitoneal administration of Tamoxifen (estrogen analog) (Sigma,

Cat#T5648-1G) activates cre recombinase which is merged to oestrogen ERT2 specifically in hair follicle stem cells expressing Lgr5. Irreversible Cre/Lox recombination bring expression of Kras oncogene, loss of p53 suppressor gene, expression of the YFP reporter gene as tool for lineage tracing of tumour cells. Tamoxifen was diluted at 25 mg/ml in sunflower seed oil, 10% EtOH (Sigma). Four daily intraperitoneal (IP) injections of 2.5 mg tamoxifen were administered at P28 as previously described¹³ to LKPR mice. After 7-9 week after Tamoxifen injection tumour appearance and size were detected by daily observation and palpation. Mice were euthanized when tumour size was reached or when mice presented signs of distress (see Compliance with ethical regulations). Skin tumours were measured using a precision calliper. Tumour volumes were measured on the first day of appearance of the tumour and then every week until the death of the animal or every 2 days during chemotherapy assay in combination with Anti-Netrin-1 antibody. To generate the Lgr5CreER/ Kras^{LSL-G12D}/p53^{fl/fl}/Rosa26LSL-YFP^{+/+}/Rosa26LSL-hNTN1 (LKPRhNTN1) model which is the LKPR model with overexpression of Netrin-1 in tumour cells, we crossed the Rosa26-Lox-Stop-Lox(LSL)-Netrin-1 transgenic mice. These mice conditionally overexpress flag-tagged Netrin-1 under the control of a Rosa26 promoter⁴⁶.

Cell culture

FACS isolated EPCAM⁺ and EPCAM⁻ cells were cultured in Modified eagle medium (MEM) (Capricorn scientific, Cat#SP-2002-500ml) supplemented with 10% Foetal bovine serum (FBS) (Serana, Cat#S-FBS-SA-015), 4µg/ml hydrocortisone (Sigma, Cat#H0888) 1% penicillin/streptomycin (100X) (Capricorn scientific, Cat#PS-B), 2mM L-glutamine, 2ml amphotericin B (100X) (Capricorn scientific, Cat#AMP-B) and 500µl T3 (Sigma, Cat#T6397). Cells were washed with Dulbecco's phosphate buffered saline (PBS 1X) detached from the cell culture plate with trypsin (Capricorn scientific, Cat#TRY-2B10).

The A549, a human non small cell lung cancer cell line, has been donated by Pr Derynck (University of California San Francisco) and has been used *in vitro* as model in which EMT is plastic and can be induced by TGF- β 1¹⁰. Cells were cultured in DMEM (Gibco, Cat#11965092) with 10% FBS and 1% penicillin/streptavidin. For in EMT induction, cells have been plated, deprived in FBS the day after for 24h, then treated with recombinant TGF- β 1 (Peprotech, Cat#100-21) at 5ug/ml *in vitro* for 3 days or 6 days (treatment every 2 days) in DMEM 1.5% FBS.

The Ishikawa cell line, a well-differentiated endometrial adenocarcinoma cell line with Netrin-1 and UNC5B expression, was purchased from the American Type Culture Collection (ATCC). They were grown in Minimum Essential Medium (Ozyme Cat#COR10-009-CV), supplemented with 1% of penicillin/streptomycin and 5% FBS at 37°C with saturating humidity and 5% CO₂.

In vitro invasion assays

Regarding invasion assays on Ishikawa cell line, experiments were carried out using the xCELLigence RTCA DP instrument (Agilent, Cat#56665817001) which was placed in a humidified incubator at 37°C and 5% CO₂. Invasion experiments were performed using 16-well integrated Boyden chamber RTCA CIM plates (ref 5665817001 Agilent). Wells were prepped by depositing 190 μ l of cell free culture medium (5% FBS) in lower chambers and 20 μ l of cell free serum free culture medium complemented with 2,5% of Matrigel (Corning) on the porous membranes. CIM plates were placed in the humidified incubator (37°C, 5% CO₂) for 1 hour to let the Matrigel polymerize. Ishikawa cells that had been treated with NP137 or its isotypic control NP001 at 20ng/ml for 72h were harvested, suspended in serum free medium, counted, and 150 000 Ishikawa cells were seeded 170 μ l serum free medium complemented

with NP137 or its isotypic control NP001 at 20ng/ml in the CIM plates upper chambers. CIM plates were then placed in the xCELLigence RTCA DP instrument and cell invasion was monitored by detection of cells passing through the porous membrane and attaching to the impedance microelectrode in the lower chamber.

In vitro migration assays

Regarding migration assays with Epcam- cells (Primary LKPR mouse skin SCC cell lines), experiments were carried out using transwell migration plates (6.5 mm Transwell with 8.0 µm, Corning, Cat#3422). Cells had been deprived in FBS (0,5%) for 12h before to be plated in migration plate. Wells were prepped by depositing 150µl of cell culture medium (10% FBS) in lower chambers (control or supplemented with NP137 at 20ug/ml) and 50µl serum free culture medium containing 5 000 cells. Plates were placed in the humidified incubator (37°C, 5% CO₂) for 18 hours for migration progression. To detect that had passed through the porous membrane, lower side of transwell has been fixed using fresh PFA 4%, transwells have been washed in PBS and bottom side of transwells had been cleaned. Lower side of membrane have been then stained with 0.2% crystal violet (in 20% methanol) for 20 min. After several washes, passed cells have been counted using reversed microscope.

Lentiviral transfection/transduction using ShRNA.

HEK 293T (Human embryonic kidney 293T) (ATCC) were used as packaging cells. Transfer plasmid pLKO.1-puro, carrying our gene of interest *Unc5b* or *Ntn1* (Sigma), TRC1 as empty vector, PPAX and PMDG packaging plasmids were transfected into the cells with lipofectamine 2000 (Thermo Fisher Scientific) using Opti-medium (Capricorn scientific). Cell line of interest (EPCAM+ Primary mouse skin SCC cell lines derived from LKPR) was plated and transduced

with the lentiviral ShRNA with additional polybrene (Sigma, Cat#T2-1003G). Puromycin resistance test has been realized after transduction.

Anti-Netrin-1 treatment in vivo on primary LKPR mice

For *in vivo* experiments, to determine the effect of anti-Netrin-1 molecule on primary tumour progression and metastasis, LKPR mice were treated intraperitoneally with anti-Netrin-1 monoclonal antibody at 10 mg/kg every two days from 4 weeks after Tamoxifen injection and until the death of animal (see compliance with ethical regulation part). In combination with chemotherapeutics drugs, the 5-Fluoracil (5-FU) has been used at 10mg/kg and Cisplatin at 4,4mg/kg once a week for 2 weeks and mice were treated with anti-Netrin-1 antibody every two days.

FACS isolation of tumour cells.

Skin tumours from *Lgr5CreER/Kras^{LSL-G12D}/p53^{fl/fl}/Rosa26-YFP^{+/+}* mice were dissected, rinsed and digested in collagenase type I (Sigma) at 3,5mg/ml in HBSS (Gibco) for 1h at 37°C on a rocking plate protected from the light. Collagenase was blocked by the addition of EDTA (5mM) and then the cells were rinsed 1 time in PBS supplemented with 10% FBS and the cell suspension were filtered through a 70-µm cell trainer (BD Bioscience). For the wash next and antibody incubation, cells were resuspended in PBS supplemented with 2% FBS (facs buffer). For cell sorting, cells were also filtered through a 40-µm cell trainer (BD Bioscience). Cells were incubated with BV711- conjugated anti-EPCAM (rat, clone G8.8, BD Bioscience Cat#563134, dilution 1:100), PE-conjugated anti-CD45 (rat, clone 30-F11, BD, Cat#553081, dilution 1:100) and PE-conjugated anti-CD31 (rat, clone MEC 13.3, BD, Cat#553373, dilution 1:100) antibodies for 30 min at 4 °C protected from light. Living single tumour cells were selected by forward and side scatter, doublet discrimination and Hoestch exclusion. Tumour

cells were selected by YFP expression and the exclusion of CD45 and CD31 (Lin⁻). Different tumour cell subpopulations were defined in EPCAM⁺ and EPCAM⁻ tumour cells. FACS and analysis were performed using FACS Aria and LSRFortessa, using FACSDiva software (v.9.1, BD Bioscience). Sorted cells were collected in culture medium complemented with 50% FBS for *in vivo* vein tail injection experiments and generation of culture cell lines or lysis buffer for RNA extraction from RNeasy micro kit (Qiagen).

To analyze EPCAM profile on FACS on EPCAM⁺ LKPR cell line, cells were washed in PBS and detached from the cell culture plate with trypsin. Cells were resuspended and washed with PBS supplemented with 2% FBS (Facs buffer) and incubated with BV711- conjugated anti-EPCAM (rat, clone G8.8, BD Bioscience Cat#563134, dilution 1:200) 30min at room temperature and protected from the light. For cell sorting, cells were washed 2 times in Facs buffer and filtered through a 40-µm cell trainer. Living single YFP⁺/ EPCAM⁺ tumour cells were selected by forward and side scatter, doublet discrimination and Hoechst exclusion.

Metastasis assay.

Primary tumours from mice were generated as described above and collected. FACS-isolated tumour EPCAM⁻ cells subpopulation was resuspended in 50 µl PBS and injected into the tail vein of NOD/SCID/IL2Rγ-null mice (1000 cells per injection). Mice were treated with NP137 every 2 days (10 mg/kg) for 1 month. Mice were killed after the last treatment and lungs were analysed. The number of metastases was quantified on 10 cryosections per lung (separated by 100 µm) based on YFP⁺ (skin SCCs tumours) expression and presented as number (#) of metastases per lung.

Tumour transplantation assays.

Female Swiss nude mice, 6-weeks old, were purchased from Janvier laboratories (France) and maintained in specific pathogen-free conditions (P-PAC, Lyon, France) and stored in sterilized filter-topped cages. Their care and housing were in accordance with institutional European guidelines as put forth by the CECCAP local Ethical Committee as previously described (C2EA-15, CLB_2014_001; CLB_2014_012; CECCAPP_CLB_2016_017). Animals were subcutaneously injected with Ishikawa cells (5×10^6) suspended in 100 μ L of PBS in the flank. Tumors were allowed to grow for 15 days. Once tumors reached a volume of 100 mm³, mice were stratified into treatment groups with 1 tumor per mouse based on their tumor volume at the start of the experiment, such that the starting tumor volume in each group were uniform. Mice were treated via intravenous injection of 100 μ L of NP137 or its isotypic control NP001 diluted in PBS at 20 mg/kg for 3 days, then 10 mg/kg every 2 days thereafter for 1 month. Tumors were measured every 2 days with calipers. Tumor size was calculated using the formula: tumor volume (mm³) = $(D \times d^2) / 2$ (mm³).

A549 tumour cells have been pre-treated *in vitro* with TGF- β 1 for 6 days (see cell culture section) then collected in Matrigel 50% + PBS 50% to be subcutaneously grafted into NOD/SCID mice (1×10^6 cells for each grafting point). Secondary tumours were detected by palpation every week and their size were monitored until tumour reach 1 cm or when mice presented signs of distress. The mice were killed at the same time and tumours have been collected for histology analyses.

Immunofluorescence stainings.

All stainings were performed on frozen sections. Tumour tissues and lungs were pre-fixed in 4% PFA for 2 h at room temperature, rinsed in PBS, incubated overnight in 30% sucrose at 4

°C and embedded in OCT (Tissue Tek) for cryopreservation. Tissues were cut into 6-µm sections using a CM3050S cryostat (Leica Microsystems GmbH) and rinsed with PBS three times (5 min). Non-specific antibody binding was blocked with 5% horse serum, 1% BSA and 0.2% Triton X-100 for 1 h at room temperature. Primary antibodies were incubated overnight at 4 °C in blocking buffer. Sections were rinsed in PBS three times (5 min) and incubated with secondary antibodies diluted in blocking buffer at 1:400 for 1 h at room temperature. Nuclei were stained with Hoechst (4 mM) and slides were mounted using SafeMount (Labonord). Image acquisition was performed on a Zeiss Axio Imager.M2 fluorescence microscope with a Zeiss AxioCam MRm camera using Axiovision release 4.8 software. Brightness, contrast and picture size were adjusted using Adobe Photoshop.

Antibodies for immunostaining.

For Immunofluorescence the following primary antibodies were used: anti-GFP (goat polyclonal, Abcam Cat#ab6673, dilution 1:500), anti-KRT14 (chicken, polyclonal, Thermo Fisher Scientific Cat#MA5-11599, dilution 1:1 000), anti-VIM (rabbit, clone ERP3776 Abcam Cat#ab92547, dilution 1:500), Anti-TROMA/KRT8 (rat, clone 1/28/21, DSHB Cat#AB_531828, dilution 1:1 000), Anti-PDGFRα (rat, clone APA5, ebioscience, Cat#13-1401, dilution 1:500), Anti-CDH1 (mouse, clone 67A4, BD Cat#563570, dilution 1:500) and anti-pan-CK antibody (clone CKAE/1AE3, Dako Belgium, 1:150). The following secondary antibodies were used (dilution 1:400): anti-rabbit, anti-rat, anti- goat, anti-chicken conjugated to rhodamine Red-X (Jackson ImmunoResearch), Cy5 (Jackson ImmunoResearch) or Alexa Fluor-A488 (Invitrogen).

825 ***Immunoblot analysis.***

826 Subconfluent cells were washed with cold PBS and lysed in a lysis buffer containing SDS.
827 Lysates were sonicated 5x10min using Bioruptor plus (Diagenode Cat#UCD-300) and cellular
828 debris were pelleted by centrifugation (10,000g 15 minutes at 4°C). Protein quantifications
829 were carried out using the Pierce 660nm Protein assay kit (Thermofisher Cat#22662) with a
830 ionic detergent compatibility reagent (Thermofisher Cat#22663) and measured using Bio-Rad
831 iMark microplate. 30 or 40 µg of protein extracts were loaded onto 4-12% SDS-polyacrylamide
832 gels (Thermo) and blotted onto nitrocellulose sheets. The membranes were then blocked with
833 5% non-fat dried milk + 0,05% BSA for an hour at room temperature and incubated at 4°C
834 overnight with primary antibodies : Anti-NTN1 (rabbit, clone EPR5428, Abcam,
835 Cat#ab126729, dilution 1: 10 000), anti-CDH1 (Mouse, clone 4A2, Cell Signaling Cat#14472,
836 dilution 1:1000), anti-VIM (rabbit, clone ERP3776 Abcam Cat#ab92547, dilution 1:1000) and
837 anti-β-ACTIN (rabbit, Abcam, Cat#ab8227, dilution 1:2000). After three washes with PBS-T,
838 it was followed by incubation 1h incubation with anti-rabbit secondary antibody (anti-Rabbit
839 IgG HRP NA9340V, 1/5 000, Sigma Aldrichfor, cat#Gena9340) at room temperature. After
840 washing in TBS-T, immunoreactive antibody-antigen complexes were visualized with the
841 enhanced chemiluminescence reagents, West Dura or ECL Chemiluminescence System
842 (Pierce). Membranes were imaged using iBright FL1500, Invitrogen.

843

844 ***In situ hybridization/RNA FISH.***

845 All stainings were performed on frozen sections or on cytopsin. Tumour tissues were pre-fixed
846 in 4% paraformaldehyde for 2 h at room temperature, rinsed in PBS, incubated overnight in
847 30% sucrose at 4 °C and embedded in OCT (Tissue Tek) for cryopreservation. Cytopsin cell
848 culture were generated using CellspinI (Tharmac) (20 000 cells for 1 cytopsin). *In situ* protocol

was performed according to the manufacturer instructions (Advanced Cell diagnostics). The following mouse probes were used: Mm-Aqp1 Cat#504741-C2. Mm-Nrp1 Cat#471621, Mm-Aqp5 Cat#430021-C2, Mm-Vim Cat#457961-C2 or Mm-Krt14 Cat#422521-C3. The LSM-780 (Carl Zeiss) confocal system and ZEN2012 software were used to acquire and analyse the ISH images.

Bulk RNA sequencing.

RNA quality was evaluated by Bioanalyzer 2100 (Agilent) prior sequencing. Indexed cDNA libraries were obtained using Ovation Solo RNA-seq Systems (NuGen) according to manufacturer's recommendations. The multiplexed libraries (11 pM/18 pM) were loaded onto flow cells and sequences were produced using a HiSeq PE Cluster Kit v4 and TruSeq SBS Kit v3-HS (250 cycles) on a Novaseq 6000 (Illumina). Approximately 20 million paired-end reads per sample were generated and quality checks were performed with FastQC <https://www.bioinformatics.babraham.ac.uk/projects/fastqc/>. The adaptor sequences and low-quality regions were trimmed by Trimmomatic. Trimmed reads were mapped against the mouse reference genome (Grcm38/mm10) using STAR software to generate read alignments. Duplicated reads are removed by picard MarkDuplicates. Annotations for Grcm38.87 were obtained from <ftp://ftp.ensembl.org/>. After transcript assembly, gene level counts were obtained using HTseq and normalized to 20 million of aligned reads. Average expression for each gene in the different sample was computed using two biological replicates and fold changes were calculated between control sample (Empty vector) and sample of interest (*Ntn1* KD or *Unc5b* KD). Genes for which all the mean expressions across the sample were lower than 100 read per million mapped reads were considered not expressed and removed from further analysis. Genes having a fold change of expression greater than or equal to 2 were considered up-regulated and those having a fold change of expression lower than or equal to 0.5 were considered down-

874 regulated.

875 ***RNA extraction and real-time PCR.***

876 RNA was extracted from FACS-isolated cells or culture cell lines using RNeasy micro kit
877 (QIAGEN) according to the manufacturer's recommendations. For real-time PCR, after mRNA
878 quantification using Nanodrop1000, the first-strand cDNA was synthesized using Superscript
879 II (Invitrogen) and random hexamers (Roche) in 50 µl final volume. Control of genomic
880 contamination was measured for each sample by performing the same procedure with or
881 without reverse transcriptase. Quantitative PCR assays were performed using 1 ng cDNA as
882 template, SYBRGreen mix (Applied Bioscience) on a Light Cycler 96 (Roche) real-time PCR
883 system. *mTbp* or *hHpvt* housekeeping genes were used for normalization. The following probes
884 were used : *mNtn1* Fw – gcaagctgaagatgaacatga, *mNtn1* Rv – cttgtcggccttcaggat, *mUnc5b* Fw
885 – ttccagctgcacacaacg, *mUnc5b* Rv – gcagagcagagagcatcca, *mTbp* Fw
886 tgtaccgcagcttcaaaatattgtat– , *mTbp* Rv – aaatcaacgcagttgtccgtg, *hNTN1* Fw -
887 aaaagtactgcaagaaggactatgc , *hNTN1* Rv – ccctgcttatacacggagatg, *hCDHI* Fw –
888 cccgggacaacgtttatt, *hCDHI*– Rv gctggctcaagtcaaagtcc, *hHOOK1* Fw –
889 tgctgctgagattatgccagtga, *hHOOK1* Rv - tcagcctctgctcagttccagtz, *hMUC1* Fw -
890 gccaggatctgtggtgtggtaca at, *hMUC1* Rv – tgtctccaggctcgtggacattgat, *hHPRT* Fw –
891 tgaccttgattattttgcatacc, *hHPRT* Rv - cgagcaagacgttcagtcct

892

893

894 ***Single-cell transcriptomic data analysis.***

895 ***Single cell RNA library preparation and gene expression analysis.***

896 After FACS isolation, living cells from fresh LKPR control and anti-Netrin-1 treated skin SCC
897 tumours were sorted and loaded onto each channel of the Chromium Single Cell 3' microfluidic
898 chips (V2-chemistry, 10X Genomics) and individually barcoded with a 10X Chromium

controller according to the manufacturer's recommendations (10X Genomics). RNA from the barcoded cells was reverse transcribed, followed by amplification. The libraries were prepared using the Chromium Single Cell 3' Library Kit (V2-chemistry, 10X Genomics), quantified using a low coverage Illumina NextSeq 550 run and sequenced on an Illumina NovaSeq. Cell Ranger (v3.0.2) was used with the default parameters to demultiplex, align, and annotate the obtained sequencing reads with the 10x Genomics mm10-3.0.0 reference dataset extended with the *Yfp* transgene. The Seurat R package was used to perform further downstream analysis of the gene expression matrices for the treated and control samples separately⁴⁷ (v3.1.5). Only cells passing the following criteria were considered for further analysis: between 600 and 8000 uniquely expressed genes and less than 25% of the UMI counts mapping to mitochondrial sequences. For the treated samples (NP137 1 and NP137 2), respectively, 16.926 of the 19.288 cells and 14.104 of 17.620 passed quality control. While for the control samples (Control 1 and Control 2), respectively, 10986 of the 12.180 cells and 5248 of the 8327 cells were considered for downstream analysis.

scRNA-seq clustering leading to cell types.

Default parameters of Seurat were used, unless mentioned otherwise. Before determining the cell-cycle state, the read counts were log-normalized and scaled. The scaled expression data for the 2000 most highly variable genes (HVG) (identified using Seurat's FindVariableGenes function) served as input for principal component analysis (PCA). Following that, the JackStraw methodology implemented in Seurat was used to determine the number of significant principal components (PCs) for Leiden clustering⁴⁸ and UMAP dimensionality reduction (maximum of 30 PCs). Clustering resolutions ranging from 0.1-1.0 with steps of 0.1, were assessed for stability with the clustree⁴⁹ R package (v0.4.2). The lowest stable resolution was

chosen for a general overview of the cell types present in both conditions (control: 0.1 & treated: 0.2). Following that, the Wilcoxon rank-sum was used to identify marker genes for each subcluster, only reporting genes that were expressed in at least 25% of the cells in the cluster and had an average log-fold change of at least 0.25. Batch integration was performed per condition using Harmony⁵⁰ (v1.0) with standard parameters. Cell type clusters were subsequently annotated using Seurat's module scoring function and cell type specific marker genes obtained from the PanglaoDB⁵¹ database (version of 27/03/2020). Our annotations were further confirmed by plotting the expression of canonical cell markers as *Ptprc* for immune cells, *Pecam* for endothelial cells, *Cd3d* for T cells and *Col6a3* for CAFs. The clusters containing the tumour cells were characterised by expression of the *Yfp* transgene. Afterwards the two datasets, except for the tumor cells, were integrated using Harmony with 30 PCs and standard parameters/ Leiden clustering was subsequently performed in steps of 0.1 for resolutions ranging from 0.1 to 1.0. The clustree R package was then used to determine the lowest stable resolution (0.2). Cell type clusters were then annotated in the same way as previously described. To compare the abundance of the identified cell types between the control and treated conditions, we used the scCODA algorithm⁵² implemented in the peritpy v4.0 Python package using the pericytes as the reference cell type and a false discovery rate (FDR) threshold of 0.2.

scRNA-seq clustering leading to cell subtypes for CAFs.

After being rescaled, the combined CAFS cluster across the conditions was further subclustered by using the top 2000 HVG as input for PCA analysis. The number of significant PCs for clustering and UMAP calculation, which ranged from 1 to 30, was determined using the JackStraw methodology. Seurat's AddModuleScore was then used to identify clusters with a high enrichment of PanglaoDB-derived marker genes for other cell types using a resolution

of 0.4 for the Leiden clustering. Following the removal of these clusters, the previous analysis steps were repeated, and stable clustering resolutions for the treated condition were determined using clustree. A resolution of 0.3 was used for the identification of the final CAF subclusters. Harmony was used with standard parameters to perform batch integration. The mouse MSigDB hallmark gene sets and the AUCell R package (v1.8.0). were used to calculate pathway activities. Clusters were assigned the apCAF, iCAF or myCAF label using Seurat's AddModuleScore function and the signatures obtained from Elyada et al.⁵³ Compositional analysis between the control and treated condition was performed with the scCODA algorithm, implemented in the perpy v4.0 Python package using the “glycolytic CAFS” as the reference and a FDR threshold of 0.2.

scRNA-seq clustering leading to EMT states for *Yfp* positive cells and pseudotime analysis.

For both conditions, all *Yfp* positive cells (defined as at least having two transcripts assigned to the *Yfp* transgene) were subclustered. The top 2000 variable genes were used as input for PCA analysis after the counts were rescaled. The JackStraw methodology was then used to calculate the number of significant PCs in a range of 1 to 30. The lowest stable clustering resolution per condition was determined using clustree (control: 0.1, treated: 0.3). Based on PanglaoDB-derived marker genes, the AddModuleScore was used to score clusters that showed an enrichment of expression signatures related to other cell types. Following the removal of these clusters, the preceding steps were repeated, with clustering resolutions of 0.7 and 0.6 used for the control and treated conditions, respectively. Subsequently the obtained clusters were scored as epithelial (*Epcam*⁺, *Krt14*⁺, *Vim*⁻), early hybrid (*Epcam*⁻, *Krt14*⁺, *Vim*⁺), late hybrid (*Epcam*⁻, *Krt14*⁻, *Krt8*⁺, *Vim*⁺, *Pdgfra*⁻) or full EMT (*Epcam*⁻, *Krt14*⁻, *Krt8*⁻, *Vim*⁺, *Pdgfra*⁺)

based on the expression of *Epcam*, *Krt14*, *Krt8*, *Vim*, *Pdgfra*. The mouse MSigDB hallmark gene sets and the AUCell R package³⁹ (v1.8.0). were used to analyse pathway activities. Before performing the Wilcoxon rank-sum test with Bonferroni correction for multiple testing between conditions, the area under the curve (AUC) distributions were normalised per sample using linear regression. To compare the abundance of the identified cell subtypes and cell cycle distribution per EMT state between the control and treated conditions, the scCODA algorithm of the perpty v4.0 Python package was used with the early hybrid EMT state as reference a FDR threshold of 0.2. Harmony with standard parameters was used for batch integration per condition. Pseudotime ordering of YFP positive cells in the G1 cell-phase was calculated using monocle⁵⁴ (v2.14.0) with the DDRtree (v0.1.5) method for dimensionality reduction on the top 2000 HVGs for each condition, controlling for sample effects. The dynplot⁵⁵ R-package (v1.0.2) was used to create the trajectory plots.

Visium spatial transcriptomic analysis.

To analyze the spatial distribution and localization of different EMT tumors states previously described by scRNA-seq in Control and anti-Netrin-1 treated skin SCC tumors, we used 10x VISIUM technology for spatial transcriptomic analysis (10X Genomics). FFPE tissue section were placed on Visium slides and prepared according to 10x Genomics protocols. After H&E staining, imaging and decrosslinking steps, tissue sections were incubated with human specific probes targeting 10,551 genes (10x genomics, Visium Mouse Transcriptome probe Set v1.0). Probes hybridized on mRNA were captured onto Visium slides and gene Expression library were prepared following the provided protocols and sequenced on an illumina Novaseq 6000 with 50,000 reads per spot targeted sequencing depth. For each FFPE section, FASTQ files and histology images were processed using 10X Space Ranger v2.0 to obtain matrix associated to

each spots. SCutility method was used to perform the analysis. Briefly, filtered matrix were loaded, merged per sample and spot with less than 1000 detected genes were removed.

EMT score

Three signatures were used to assess the EMT level. The “Hallmark” signature was computed using ssGSEA⁵⁶ on the genes from the “HALLMARK_EPITHELIAL_MESENCHYMAL_TRANSITION” signature, as obtained from MSigDB³⁹ while the “Thiery” signature was computed similarly using the genes from¹². The “Mak” signature was calculated from the gene sets in PMID: 26420858, as the difference of two signatures: a mesenchymal signature defined as the mean of the mesenchymal genes expressions and an epithelial signature defined as the mean of the epithelial genes expressions.

Statistical analysis.

All statistical analyses are based on biological replicates (n indicated in the text, figures or figure legends). Multiple unpaired t-test were performed using graphPad Prism version 9.00 for Mac software. Bar graphs and dot plots were generating with mean +s.e.m by graphPad Prism. Wilcoxon rank-sum test and Fisher test with Bonferroni correction have been used for multiple analyses in single cell RNA sequencing.

Extended data Figure Legends

Extended data 1. Strategy to study the impact of Netrin-1 on EMT in mouse skin SCCs.

a, Mouse model of skin SCC allowing the expression of *Kras*^{G12D}, *YFP*, *p53* deletion and overexpression of human NETRIN-1 in hair follicle stem cells and their progeny using *Lgr5CreER*. **b**, Relative mRNA expression of *Ntn1* in EPCAM- control (n= 5) and NETRIN-1 gain of function (n= 8) skin SCC defined by qRT-PCR (data are normalized to *Tbp* gene, mean \pm s.e.m., two tailed Mann-Whitney U test). **c**, Western blot analysis of Netrin-1 expression in EPCAM- control and NETRIN-1 gain of function skin SCC TCs. **d**, FACS plots showing the gating strategy used to FACS-isolate or to analyse the proportion of YFP⁺/EPCAM⁺ and EPCAM⁻ tumour cells. **e**, Drawing showing the experimental strategy of NP137 administration after Tamoxifen induction in *Lgr5CreER/Kras*^{LSL-G12D}/*p53*^{fl/fl}/*Rosa26-YFP*^{+/+} mice. IP, intraperitoneal.

Extended data 2. Single cell analysis of the cellular composition of control and NP137-

treated skin SCCs. a, b Uniform Manifold Approximation and Projection (UMAP) plot for control (**a**) and NP137 -treated skin SCC (**b**) coloured by the identified cell types. **c, d**, UMAP plot for control (c) and NP137-treated skin SCC (d) coloured by the sample of origin for each cell. CAFs, cancer-associated fibroblasts.

Extended data 3. Annotation of the cell types found by single cell RNA-seq in control and

NP137-treated skin SCCs. a, UMAP plots coloured by normalized *Yfp* and *Epcam* expression in the control tumours. Gene expression values are visualized as colour gradient with grey indicating no expression and red indicating the maximum expression. **b**, UMAP plots coloured by normalized *Yfp* and *Epcam* in NP137- treated samples. **c**, UMAP plots coloured by the

activity of modules containing the mouse-specific marker genes of the different cell types including CAFs, Macrophages, Neutrophils, Endothelial cells and T cells obtained from the PanglaoDB database in control samples (left) and anti-Netrin-1 treated samples (right). Module activity visualized as a colour gradient with blue indicating no expression and yellow indicating maximum activity. **d**, UMAP plots coloured by normalized *Pdgfra*, *Acta2*, *Pecam1*, *Cd3d*, *Ptprc*, *Itgam*, *Cd86* and *Cxcr2* expression in the control samples (left) and NP137- treated samples (right). CAFs, cancer-associated fibroblasts. **e**, UMAP plot coloured by normalized *Ntn1* expression in control condition.

Extended data 4. Impact of anti-Netrin antibody administration on the cellular composition of skin SCCs. **a, b**, Uniform Manifold Approximation and Projection (UMAP) plots coloured by the cell type labels obtained from the analysis of the microenvironment for the integration of all the samples in total and split per sample, respectively. **c**, Boxplot depicting the proportions of the different cell types for the 4 samples, split by their condition. The boxplots are coloured by their condition, and the individual measurements are visualized as red dots. The centre line, top and bottom of the boxplots represent respectively the median, 25th and 75th percentile and whiskers are $1.5 \times \text{IQR}$. Significant proportion changes are indicated by $\text{FDR} < 0.2$. **d**, barplot depicting the relative log fold change of the relative abundance of the different cell types after NP137-treated samples compared to the pericytes. Bars are coloured according to their cell type. **e, f**, UMAP plot of the CAFS subclustering, coloured by the identified seven subclusters and the sample the cell originated from, respectively. **g**, Boxplot depicting the proportions of the different CAF subclusters for the 4 samples, split by their condition. The boxplots are coloured by their condition, and the individual measurements are visualized as red dots. The centre line, top and bottom of the boxplots represent respectively the median, 25th and 75th percentile and whiskers are $1.5 \times \text{IQR}$. **h**, barplot depicting the

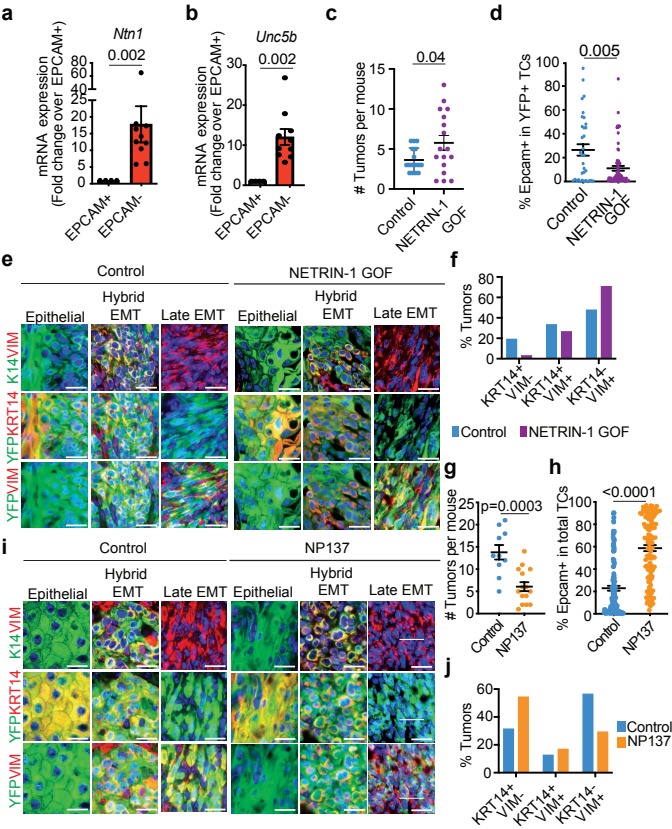
relative log fold change of the relative abundance of the different CAF subclusters after NP137-treatment compared to the glycolysis CAFs subcluster. **i**, Co-immunostaining of YFP and Vimentin in control (top) (n= 5 tumours) and NP137- treated skin SCC (bottom) (n= 5 tumours) that defines YFP-/VIM+ CAFs as cells (Scale bars, 20 μ m).

Extended data 5. Expression of markers of the different EMT states in control and NP137-treated skin SCCs. a, b, UMAP plots coloured by normalized gene expression values for the indicated genes in the control (**a**) and treated samples (**b**). Gene expression values are visualized as colour gradient with grey indicating no expression and red indicating the maximum expression. Circles represent TCs groups with a different degree of EMT based on the expression of *Epcam*, *Krt14*, *Krt8*, *Vim*, *Pdgfra* (green: *Epcam*+/*Krt14*+/*Vim*- as epithelial state; orange: *Epcam*-/*Krt14*+/*Vim*+ as early hybrid EMT state; red: *Epcam*-/*Krt14*-/*Krt8*+/*Vim*+ as late hybrid EMT state; dark red: *Epcam*-/*Krt14*-/*Krt8*-/*Vim*+ as late full EMT state expressing *Pdgfra* and *Aqp1*). **c**, Barplot depicting the relative log fold change of the relative abundance of the different EMT states after NP137-treatment compared to the early hybrid state. Significant proportion changes are indicated by FDR < 0.2.

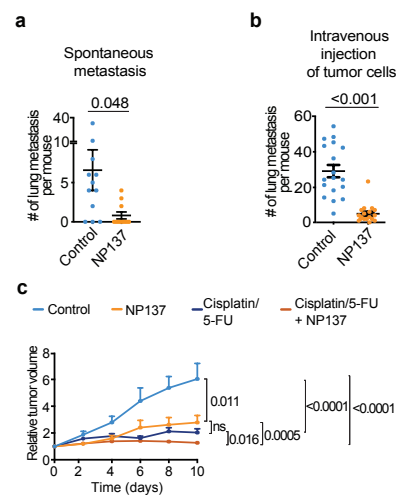
Extended data 6. Histological analysis of the control and NP137-treated tumors. a-d, . Haematoxylin and Eosin staining showing the control (n=1) (**a**, **b**) or NP137-treated (n=1) (**c**, **d**) tumour skin SCC analysed in Visium spatial transcriptomic method. The annotated areas represent the EMT states previously defined by the expression of *Epcam*, *Krt14*, *Krt8* and *Vim* (1: epithelial, 2: early hybrid, 3, late hybrid, 4: full late EMT) (scale bars in a, c, 500 μ m, scale bars in b, 20 μ m).

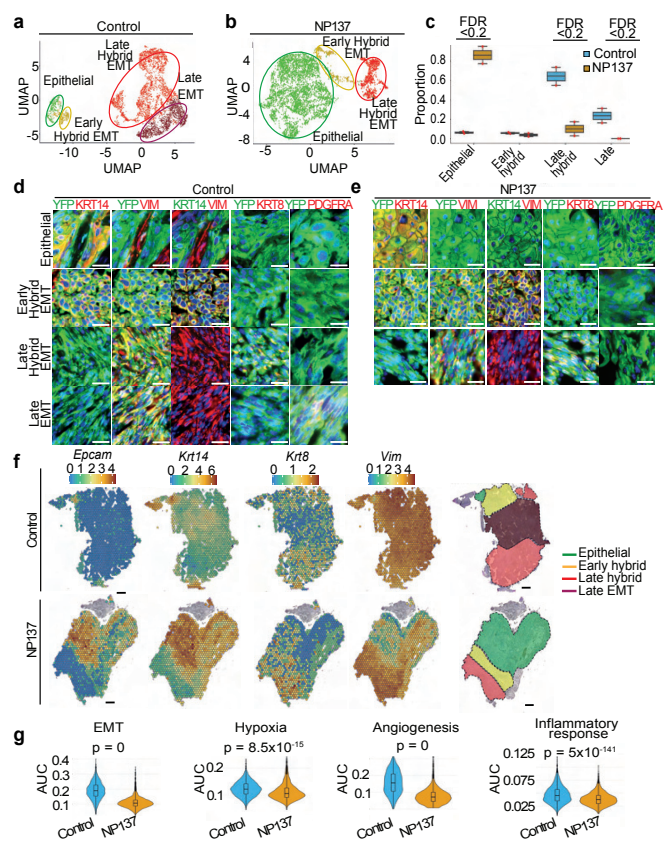
Extended data 7. Analysis of NP137 treatment on tumour growth, EMT and migration in endometrial human cancer cell line. a, Tumor growth quantification of human Ishikawa

endometrial carcinoma cells grafted in nude mice treated with either control (n=9) or NP137 (n=9) (mean \pm s.e.m., 2-way ANOVA). **b**, Relative mRNA expression of epithelial markers *CDH1*, *MUC1* and *HOOK1* by qRT-PCR in Ishikawa human cells grafted in nude mice treated with control (n=7) or NP137 (n=8) (data are normalized to *HPRT* gene, mean \pm s.e.m., two tailed Mann-Whitney U test). **c**, Percentage of migrated Ishikawa cells treated with NP137 relative to the migration of control condition through serum deprived culture medium complemented with 2.5% Matrigel between 5 and 24 hours of invasion. (n=3) (mean \pm s.e.m, two tailed t test).

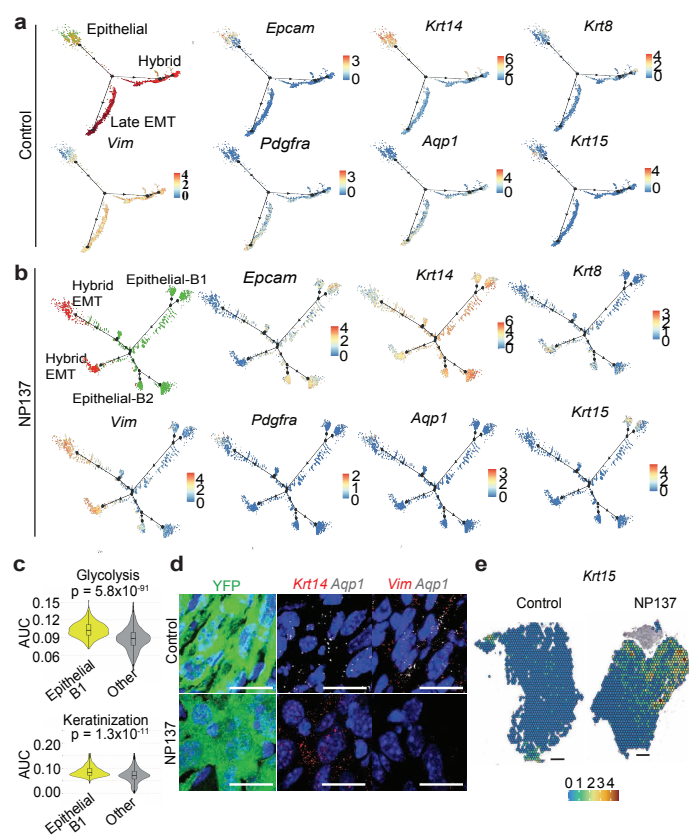


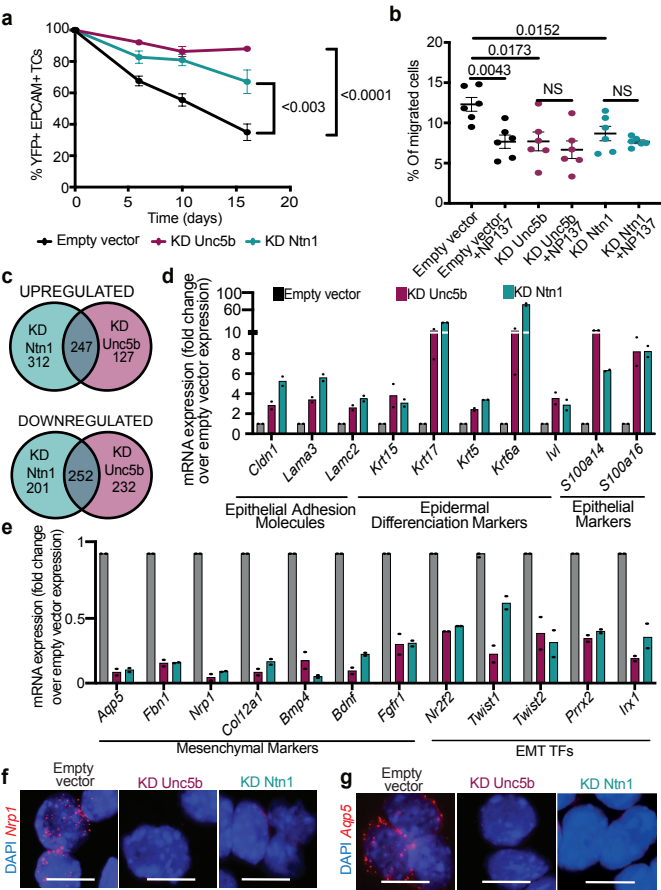
Lengrand et al Fig. 1



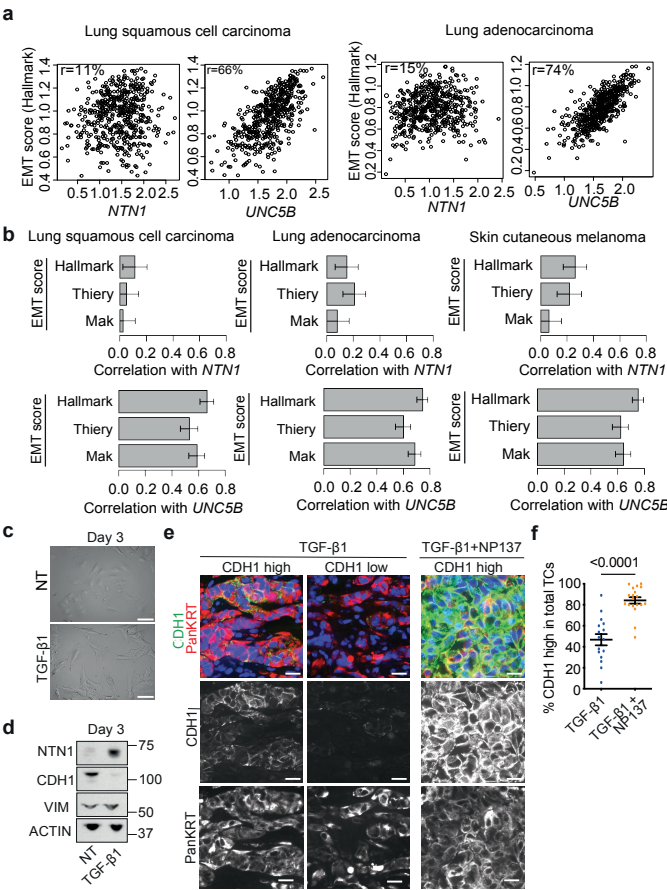


Lengrand et al Fig. 3





Lengrand et al Fig. 5



Lengrand et al Fig. 6