

Monensin may inhibit melanoma by regulating the selection between differentiation and stemness of melanoma stem cells

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Melanoma is the most lethal cutaneous malignancy that threatens human lives. Poor sensitivity to chemotherapy drugs and the high rate of resistance are the bottlenecks of melanoma treatment. Thus, new chemotherapy drugs are needed. Drug repurposing is a safe, economical and timesaving way to explore new chemotherapy for diseases. Here, we investigated the possibility of repurposing the antibiotic monensin as an anti-melanoma agent. Using three human melanoma cells and two normal human cell lines as cell models, we found that monensin is obviously toxic to human melanoma cells while safe to normal human cells. It effectively inhibited cell proliferation and viability, while promoted apoptosis and differentiation of human melanoma cells in vitro. By establishment of an animal model of transplanted human melanoma in nude mice, we demonstrated that monensin suppressed the growth of xenografts in vivo. At the same time, we found that melanogenesis increased and the ability of sphere and cloning forming of melanoma decreased under the treatment of monensin. Further detection about differentiation and pluripotent regulations were executed. Our results suggest that monensin is a potent inhibitor of melanoma, and its anti-tumor mechanism may be through promoting the final differentiation of melanoma stem cells and inhibiting their stemness maintenance.

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22

23 **Abstract**

24 Melanoma is the most lethal cutaneous malignancy that threatens human lives. Poor sensitivity to
25 chemotherapy drugs and the high rate of resistance are the bottlenecks of melanoma treatment.

26 Thus, new chemotherapy drugs are needed. Drug repurposing is a safe, economical and
27 timesaving way to explore new chemotherapy for diseases. Here, we investigated the possibility
28 of repurposing the antibiotic monensin as an anti-melanoma agent. Using three human melanoma
29 cells and two normal human cell lines as cell models, we found that monensin is obviously toxic
30 to human melanoma cells while safe to normal human cells. It effectively inhibited cell

31 proliferation and viability, while promoted apoptosis and differentiation of human melanoma
32 cells in vitro. By establishment of an animal model of transplanted human melanoma in nude

33 mice, we demonstrated that monensin suppressed the growth of xenografts in vivo. At the same

34 time, we found that melanogenesis increased and the ability of sphere and cloning forming of
35 melanoma decreased under the treatment of monensin. Further detection about differentiation
36 and pluripotent regulations were executed . Our results suggest that monensin is a potent
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38 differentiation of melanoma stem cells and inhibiting their stemness maintenance.

39 Introduction

40 Melanoma is a highly malignant tumor, with mortality as high as 80%(Cummins et al. 2006). As
41 the early symptoms of melanoma are not obvious, most patients have been diagnosed in the
42 middle and late stages. Melanoma is not sensitive to radiotherapy, and the treatment is mainly
43 dependent on chemotherapy. However, poor sensitivity to chemotherapy drugs and easy
44 resistance are the bottleneck of melanoma treatment. The front-line clinical anticancer agents
45 used for melanoma are mainly in five categories, including alkylating agents, anti-CTLA4
46 monoclonal antibodies, BRAFV600E inhibitors, C-KIT inhibitors and PD-1 inhibitors.
47 Representative drugs include Dacarbazine, Ipilimumab, Vemurafenib, Imatinib and Nivolumab.
48 The natural resistance rate of melanoma in order is 87.5%, 88%, 70% (white) ~85% (yellow),
49 98.8% (white) ~89.2% (yellow), and 74%(Guo et al. 2012; Wu et al. 2014). Therefore, there is
50 an urgent need to develop effective new drugs. However, An invention of a new drug usually
51 faces a long research period, large risk of fail and biosafety problems.

52 In recent years, drug reposition has attracted increasing attention. For their short development
53 period, high biosafety, low cost and known side effects. Drug reposition has become a new hot
54 spot in the field of cancer treatment. Monensin is secreted by the bacteria *Streptomyces*
55 *cinnamomensis*(Pressman 1968), and it is used to kill coccidia parasites and improve the feed
56 conversion rate of ruminant animals. It has been reported that monensin shows a good
57 therapeutic effect in a variety of tumors, including ovarian cancer, colon cancer, myeloma and
58 lymphoma(Deng et al. 2015; Park et al. 2003a; Park et al. 2003b; Park et al. 2002). However, it
59 remains unclear whether monensin has anticancer effects on human melanoma cells.

60 To explore the possibility of anti-melanoma effect of monensin , in vitro, we examined
61 the effects of monensin on proliferation, and apoptosis of several human melanoma cell lines.
62 In vivo, the effects of monensin on tumor growth was investigated by xenograft animal model.
63 We found that monensin efficiently suppressed human melanoma at a biosafe dose, and then we
64 discussed the foundation mechenisms of the effect.

65

66 Materials & Methods

67 Cell culture and drug

68 Human melanoma cells A375, Mel-624, Mel-888, Human embryonic kidney cells HEK-293 and
69 Human bladder epithelium immortalized cells SV-HUC-1 were all purchased from the American
70 Type Culture Collection (ATCC, Manassas, VA, USA). The cells were cultured in complete
71 DMEM containing 10% fetal bovine serum (FBS, Invitrogen, Carlsbad, CA, USA), 100 units of
72 penicillin and 100 µg of streptomycin, at 37°C in 5% CO₂. Drug monensin sodium salt was
73 purchased from Solarbio (Beijing, China) and dissolved in ethanol. All the procedures were in
74 strict accordance with the Institutional Review Board of The Third Military Medical University.

75

76 **Crystal violet cell viability assay**

77 A375, Mel-624 and Mel-888 cells were treated with varied concentrations of monensin or
78 ethanol control, respectively. At 24 h, 48 h and 72 h after treatment, cells were washed with PBS
79 and fixed with 0.4% paraformaldehyde at room temperature for 20 min. Then cells stained with
80 0.5% crystal violet (Beyotime, Shanghai, China) at room temperature for 20 min. The cells were
81 washed with tap water and air dried before imaging. For quantification, the cells were incubated
82 with 100% acetic acid at room temperature for 20 min with shaking. The absorbance was set at
83 570 nm.

84

85 **Viable cell counting assay**

86 A375, Mel-624 and Mel-888 cells were treated with monensin at the varied concentrations or
87 ethanol control. At 24 h, 48 h and 72 h, cells were collected by trypsin dissociation, and stained
88 with Trypan blue (Beyotime, Shanghai, China). Unstained viable cells and total cells were
89 counted under a bright field microscope (Nikon, Tokyo, Japan).

90

91 **Cell cycle analysis**

92 A375, Mel-624 and Mel-888 cells were seeded in 6-well plates and treated with varied
93 concentrations of monensin or ethanol control. At 4 h, 8 h, 12 h after treatment, cells were
94 collected, fixed and stained with the propidium iodide (Beyotime, Shanghai, China) for 5 min.
95 Then the cells were subjected to flow cytometry analysis using the Flow Cytometer (BD
96 Biosciences, San Jose, CA, USA). The flow cytometry data were analyzed with the FlowJo
97 v10.0 software.

98

99 **CCK-8 cytotoxicity assay**

100 Cytotoxicity was assessed by using cell counting kit-8 (CCK-8; Dojindo, Tokyo, Japan). A375,
101 Mel-624, Mel-888, HEK-293 and SV-HUC-1 cells seeded in 96-well plates were treated with
102 varied concentrations of monensin or ethanol control for 24 h, 48 h and 72 h. 10 µL CCK-8

103 reagent was added to each well, followed by an incubation at 37°C for 60 min and reading at 450
104 nm using the microplate reader (Bio-RAD, California, USA).

105

106 **Hoechst 33258 staining**

107 A375, Mel-624 and Mel-888 cells were seed in a 6-well plate with cover glasses respectively and
108 treated with varied concentrations of monensin or ethanol control. At 8 h, 12 h and 16 h after
109 treatment, cells were fixed and stained with Hoechst Staining Kit (Beyotime, Shanghai, China).
110 Apoptotic cells were examined under a fluorescence microscope. The average number of
111 apoptotic cells was calculated in at least ten random fields at 200x magnification for each assay.

112

113 **Annexin V-FITC flow cytometry assay**

114 A375 , Mel-624 and Mel-888 cells were seeded in 6-well plates respectively and treated with
115 varied concentrations of monensin or ethanol control. At 4 h, 8 h and 12 h after treatment, cells
116 were dissociated with trypsinization, washed with PBS, and resuspended in Annexin V Binding
117 Buffer at a density of 10^6 cells/ml. Then the cells were stained with Annexin V-FITC (BD
118 Pharmingen, San Jose, CA) for half an hour, followed by counterstaining with propidium iodide
119 for 15 min at room temperature. After wash, the cells were subjected to flow cytometry analysis
120 using the BD FACSCalibur-HTS. Data were analyzed by using the FlowJo v10.0 software. Each
121 assay was done in triplicate.

122

123 **Xenograft of human melanoma cells**

124 The use and care of animals were approved by the Laboratory Animal Welfare and Ethics
125 Committee Of the Third Military Medical University (Approval Number SYXK (Chongqing)
126 20170002). A375 stably labeled with firefly luciferase (A375-FLuc) was constructed with
127 piggyBac system(Chen et al. 2015; Wang et al. 2014; Wen et al. 2014). A375-Luc cells were
128 collected and resuspended at 10^7 cells/ml. 100ul cells were subcutaneously injected into the
129 dorsal back skin of athymic nude mice (4-week-old, male, 10^6 cells per injection, and 2 sites per
130 mouse). The mice were divided into two groups (n = 5 per group). At three days post injection,
131 the animals were treated with various doses of monensin (25 mg/kg or 50 mg/kg body weight) or
132 vehicle control (ethanol) by oral administration once a day. Tumor growth was monitored by
133 whole body bioluminescence imaging using Xenogen IVIS 200 Imaging System at days 4, 7 and
134 10 after injection. The mice were sacrificed at 10 days and subcutaneous tumor masses were
135 harvested for examination.

136

137 **Sphere formation assay**

138 A375, Mel-624 and Mel-888 cells were seeded in complete medium and placed at 10^7 cells per 6-
139 well Ultra Low Cluster plates (Corning) with varied concentrations of monensin or ethanol
140 control. At 24 h, 48 h and 72 h post treatment, images were recorded at 100x magnification and
141 the maximum diameter of cell mass were measured.

142

143 **Colony formation assay**

144 A375, Mel-624 and Mel-888 cells were diluted in complete medium and seeded at 1000 cells per
145 6-well. Cells were treated with monensin at the varied concentrations and ethanol control for 24
146 h, then replaced the medium and continued to culture for 6 days in DMEM supplemented with
147 10% FBS. After 6 days, the colonies were fixed with 0.4% paraformaldehyde for 20 min and
148 stained with 0.5% crystal violet for 15min. The plates were washed and visible colonies were
149 counted and colony forming efficiency (CFE) was calculated. The colonies that were less than 2
150 mm in diameter or faintly stained were excluded. CFE was defined as the number of colonies
151 divided by the number of cells seeded and expressed as percentage.

152

153 **RNA extraction and real time PCR**

154 RNA extraction and reverse transcription were performed as previously described. Briefly, A375
155 cells were seeded in 6-well Ultra Low Cluster plates (Corning) with 0.4 μ M monensin or ethanol
156 control for 48h. Total RNA was isolated using TRIzol reagents (Invitrogen). cDNA templates
157 were generated by reverse transcription reactions with hexamer and M-MuLV reverse
158 transcriptase (New England Biolabs, Ipswich, MA). PCR primers were designed using the
159 Primer3 program. SYBR Green-based Real-time PCR analysis was carried out using the
160 thermocycler Opticon II DNA Engine (Bio-Rad, CA). Relative mRNA expression was
161 determined by normalization to the expression of a housekeeping gene, GAPDH. The Real-time
162 PCR reactions were done in triplicate.

163

164 **Statistical analysis**

165 Data were expressed as mean \pm SD. Statistical significance of experimental results was
166 determined by Student's T-test to compare the differences among two groups. For multiple group
167 comparison, one-way ANOVA analysis of variance was performed followed by multiple
168 comparison tests. The statistical analysis was performed using GraphPad Prism 6 (GraphPad
169 Software, La Jolla, USA). P value less than 0.05 was considered as a significant difference.

170

171 **Results**

172 Monensin is obviously toxic to human melanoma cells

173 To test whether monensin can decrease the livability of human melanomasubconfluent A375,
174 Mel-624 and Mel-888 cells were grown in increasing concentrations of monensin. Crystal violet
175 staining results showed that cell proliferation of A375, Mel-624 and Mel-888 cells was
176 significantly inhibited in the monensin-treated groups compared to the control group (ethanol
177 control group), especially in A375 cells (Figs. 1A and 1B). We also conducted Trypan blue-
178 stained after exponentially growing A375, Mel-624 and Mel-888 cells were treated with varying
179 concentrations of monensin (0 μ M to 0.4 μ M). The number of viable cells decreased
180 significantly when the concentration of monensin was increased in the three cell lines at all
181 examined time points, especially at 72 h (Figs. 1C-1E). We also performed cell cycle analysis by
182 using flow cytometry of monensin-treated A375, Mel-624 and Mel-888 cells. The number of
183 cells arrested in G1 phase was significantly increased in monensin-treated cells, whereas the
184 number of cells in S/G2/M phase was significantly decreased in monensin-treated melanoma
185 cells, compared to the controls (P value of A375 = 0.002, P value of Mel-624 = 0.008, P value of
186 Mel-888 = 0.0002) (Figs. 1F-1I). These results suggest that monensin inhibits melanoma cell
187 proliferation, and the inhibition effect was dose-dependent.

188

189 Monensin is non-cytotoxic to normal control human cells at the same dose

190 We have already know that 0 μ M to 0.4 μ M monensin was cytotoxic to melanoma cells, if we
191 want to use this dose to treat melanoma, side effect should be concerned. So we tested whether
192 monensin is cytotoxic to normal control human cells at the same doses. Subconfluent human
193 embryonic kidney cells HEK-293 and human bladder epithelium immortalized cells SV-HUC-1
194 were grown in increasing concentrations of monensin (0 μ M to 0.4 μ M). Microscopy images of
195 HEK-293 cells and SV-HUC-1 cells showed no significant cell number decrease or morphology
196 changes in the monensin-treated group compared to the control groups (Fig. 2B). CCK-8
197 cytotoxicity assay also showed that monensin was non-cytotoxic to HEK-293 cells and SV-
198 HUC-1 cells at the indicated concentrations (IC50 cannot be obtained, Fig. 2C). However,
199 statistical analysis of CCK-8 cytotoxicity assay of three melanoma cells showed that monensin
200 inhibited cell activity and was significantly cytotoxic to A375 (IC50 = 0.16 μ M), Mel-624 (IC50
201 = 0.71 μ M) and Mel-888 (IC50 = 0.12 μ M) (Fig. 2A). Taken together, our results demonstrate
202 that monensin is significantly cytotoxic to melanoma cells but non-cytotoxic to normal control
203 human cells at the same dose.

204

205 Monensin induces apoptosis of human melanoma cells

206 Apoptosis may be closely related to the cytotoxic effect of monensin, therefore, we examined
207 cell apoptosis after A375, Mel-624 and Mel-888 cells were treated with 0.4 μ M monensin.

208 Hoechst 33258 staining results revealed that the percentage of apoptotic cells was significantly
209 increased in monensin-treated A375, Mel-624 and Mel-888 cells (Figs. 3A-3D) at 24 h after drug
210 treatment, compared to the control groups (green arrows, live cells; yellow arrows, apoptotic
211 cells). We also checked cell apoptosis by flow cytometry (Fig. 3E). Statistical analysis revealed
212 the proportion of Annexin V+/PI- early apoptotic cells and Annexin V+/PI+ late apoptotic cells
213 were both increased in the monensin-treated A375 (early 1.9%, late 1%), Mel-624 (early 1.4%,
214 late 0.6%) and Mel-888 (early 1.6%, late 0.6%) cells compared to the control group A375 (early
215 0.7%, late 0.3%), Mel-624 (early 0.7%, late 0.4%) and Mel-888 (early 0.5%, late 0.2%) cells
216 (Figs. 3F-3H). Together, these results suggest that monensin can induce apoptosis in the human
217 melanoma cell lines A375, Mel-624 and Mel-888.

218

219 **Monensin effectively inhibits tumor growth in a xenograft model of human melanoma** 220 **cells**

221 In view of the obvious inhibitory effect of monensin on melanoma observed at the cell culture
222 level, we are full of expectations about whether it can inhibit the growth of melanoma in vivo.
223 Firefly luciferase-tagged A375 cells were subcutaneously injected into the dorsal back skin of
224 athymic nude mice. At three days post-injection, the animals were treated with various doses of
225 monensin (25 mg/kg or 50 mg/kg body weight) or vehicle control (ethanol) by oral
226 administration once a day. Ten days after injection, the xenografts were collected. Tumor growth
227 was examined using xenogen bioluminescence imaging 4, 7 and 10 days after cell injection (Fig.
228 4A). Quantitative analysis of the xenogen imaging data revealed that the xenografts that were
229 treated with monensin showed significantly lower luciferase activity compared to that of the
230 control groups (Fig. 4B). The xenografts that were treated with monensin formed significantly
231 smaller tumors in weight compared to the control groups (Fig. 4C). These studies confirmed that
232 monensin can effectively suppress melanoma growth.

233

234 **Monensin can induce terminal differentiation and inhibit pluripotency of melanoma stem** 235 **cells**

236 In our study, we observed that melanin granules increased in monensin-treated groups under a
237 phase-contrast microscope (Fig. 5A). Further, we tested the expression of tyrosinase, and the
238 results revealed that the tyrosinase expression of A375, Mel-624 and Mel-888 cells was
239 significantly increased in monensin-treated groups compared to the control groups (Fig. 5B). The
240 increase in melanin granules is a manifestation of terminal differentiation in melanoma. These
241 results inspired us the anticancer ability may be correlated with the cell fate choice between
242 differentiation and pluripotency. So we tested cell pluripotency maintenance after monensin
243 treatment. The microscope images and statistical analysis of sphere formation assay revealed that

244 the sphere formation ability of A375, Mel-624 and Mel-888 cells was significantly decreased in
245 monensin-treated group, compared to the control groups (P value of A375 = 0.0146, P value of
246 Mel-624 = 0.0004, P value of Mel-888 = 0.0178) (Figs. 5C and 5D). Then, we also tested the
247 pluripotency of the three melanoma cell lines by colony formation assay. The results revealed
248 that monensin can significantly inhibit the proliferation of melanoma, and this effect was shown
249 at a low concentration of just 0.025 μ M (Figs. 5E and 5F). Sphere formation assays and colony
250 formation assays both suggest that monensin can inhibit the pluripotency of melanoma.
251 Furthermore, markers of terminal differentiation and pluripotency maintenance were detected by
252 real time PCR. The results showed TRP2 (Tyrosinase-related protein 2) and Sox10 (SRY-box 10
253 protein) were decrease, while TRP1(Tyrosinase-related protein 1) was up-regulated (Figs. 5G-5I).
254 Taken together, these results strongly suggested that monensin may accelerate terminal
255 differentiation of melanoma stem cells and inhibit their pluripotency.

256

257 Discussion

258 Monensin may be repurposed as an effective anticancer agent for human melanoma.

259 At an early stage, melanoma can be cured by surgery. The treatment of late-stage melanoma is
260 dependent on chemotherapy, however, the effect of chemotherapy is not satisfied. The
261 chemotherapy of melanoma depends on four genetic types: including mutant BRAF, mutant
262 RAS (N/H/K), mutant NF1, and Triple wild-type(Amann et al. 2017). Although BRAFV600E
263 inhibitor was the most widely used drugs for melanoma treatment, easy resistance still limits the
264 its clinical effect seriously. The most common cause of drug resistance is MAPK/ERK pathway
265 reactivation(Griffin et al. 2017). But the therapeutic effect of MEK inhibitor which can inhibit
266 MAPK/ERK pathway is not as effective as expected(Gupta et al. 2014). And the targeted drugs
267 for the other three genetic types are still in research stage. Thus, there is a critical need to develop
268 more effective and novel therapies to treat melanoma. Our results have demonstrated that
269 monensin has efficient antitumor activity and effectively inhibits cell proliferation, cell viability
270 and pluripotency, and it promotes apoptosis and differentiation of human melanoma cells.

271 Monensin is FDA-approved for veterinary use (beef cattle, dairy cattle, and chickens), and it
272 is used to kill coccidia parasites and improves the feed conversion rate of ruminant animals. The
273 in vivo dose of monensin we used in this study for its anticancer activity was much less than the
274 maximum dose (200 mg/herd/day) for the prevention and control of coccidiosis(Deng et al.
275 2015). Our results have demonstrated that monensin is non-cytotoxic to normal control human
276 cells HEK-293 and SV-HUC-1 at the same dose we used to treat melanoma cells (0 μ M to 0.4
277 μ M). These results reveal that monensin has a favorable safety profile and acts effectively at low
278 micromolar concentrations. Moreover, the in vitro dose used in this study was also much less

279 than other tumor cells. The IC50 of monensin to melanoma cells A375, Mel-624 and Mel-888
280 was 0.16 μ M, 0.70 μ M and 0.12 μ M, respectively. This is a lower dose needed to achieve its
281 anticancer activity in other tumors (IC50 is 2.5 μ M in colon cancer cells and 1 μ M in myeloma
282 cells) (Park et al. 2003a; Park et al. 2003b). This finding suggests that melanoma has a higher
283 sensitivity to monensin.

284

285 **Monensin may exert its anticancer activity by** inducing terminal differentiation and inhibiting
286 pluripotency of melanoma stem cells.

287 We demonstrated that monensin has an anticancer effect on human melanoma, and further
288 investigation of the detailed mechanism is needed. In earlier studies, monensin induced
289 apoptosis-associated changes in Bax, caspase-3, and caspase-8(Park et al. 2002), elevated
290 intracellular oxidative stress(Ketola et al. 2010) in several human cancer cells, or exerted effects
291 on the intracellular trafficking and processing of endocytosis(Nishimura et al. 2015). In our
292 experiments, we observed that monensin promoted the apoptosis of melanoma. We know that
293 apoptosis often occurs after cell terminal differentiation. However, few reports suggest that
294 monensin may target cancer cells through differentiation regulation.

295 Interestingly, we found that the expression of melanin granules and tyrosinase activity, two
296 indications of terminal differentiation in melanoma stem cells, were both significantly increased.
297 The clone and sphere formation abilities, two phenotypes of stemness maintenance of melanoma
298 stem cells, were both significantly decreased. These results suggested the anticancer activity of
299 monensin may be related to the shift between terminal differentiation and pluripotency of
300 melanoma stem cells. Experiments on transcriptional and post-transcriptional levels further
301 demonstrated our hypothesis. The down-regulation of TRP2 and Sox10, with the up-regulation
302 of TRP1, suggested the differentiation was accelerated and the pluripotency was weakened.
303 From the above, our study showed monensin may exert its anticancer activity by inducing
304 terminal differentiation and inhibiting pluripotency of melanoma stem cells. These results
305 provide a new idea that we can induce differentiation of melanoma cells to treat human
306 melanoma, similar to what we did in acute promyelocytic leukemia(Wang & Chen 2008).

307

308 **Conclusions**

309 In this study, we investigated the potential of repurposing monensin as an anti-cancer agent for
310 human melanoma. We found that monensin can significantly inhibit human melanoma at a
311 biologically safe dose, and the mechanism may be related to the tendency of melanoma stem
312 cells to terminal differentiation rather than stemness maintenance. Our study provides a novel

313 choice to the treatment of melanoma and a new clue to the molecular mechanism of tumor
314 suppression.

315

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320

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Figure 1

Monensin is obviously toxic to human melanoma cells

(A) Crystal violet staining revealed that there were fewer live cells in melanoma cells A375, Mel-624 and Mel-888 treated with monensin at the indicated concentrations for 72 h, compared to the control groups. (B) Quantitative analysis of the Crystal violet-stained cells revealed that there were significantly fewer live cells in melanoma cells treated with monensin at the indicated concentrations for 72 h, compared to the control groups. (C) Quantitative analysis of Trypan blue-stained cells showed that there were fewer viable cells in melanoma cells A375 treated with monensin at the indicated concentrations for 24 h, 48 h and 72 h, compared to the control groups. (D) Quantitative analysis of Trypan blue-stained cells showed that there were fewer viable cells in melanoma cells Mel-624 treated with monensin at the indicated concentrations for 24 h, 48 h and 72 h, compared to the control groups. (E) Quantitative analysis of Trypan blue-stained cells showed that there were fewer viable cells in melanoma cells Mel-888 treated with monensin at the indicated concentrations for 24 h, 48 h and 72 h, compared to the control groups. (F) Cell cycle analysis showed that there were fewer cells in S/G2/M phase in monensin-treated groups, compared to the control groups. (G) Statistical analysis of cell cycle study showed that there were significantly fewer cells in S/G2/M phase in monensin-treated A375 cells at 12 h after treatment, compared to the control groups. (H) Statistical analysis of cell cycle study showed that there were significantly fewer cells in S/G2/M phase in monensin-treated Mel-624 cells at 12 h after treatment, compared to the control groups. (I) Statistical analysis of cell cycle study showed that there were significantly fewer cells in S/G2/M phase in monensin-treated Mel-888 cells at 12 h after treatment, compared to the control groups. * $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$; **** $p < 0.0001$.

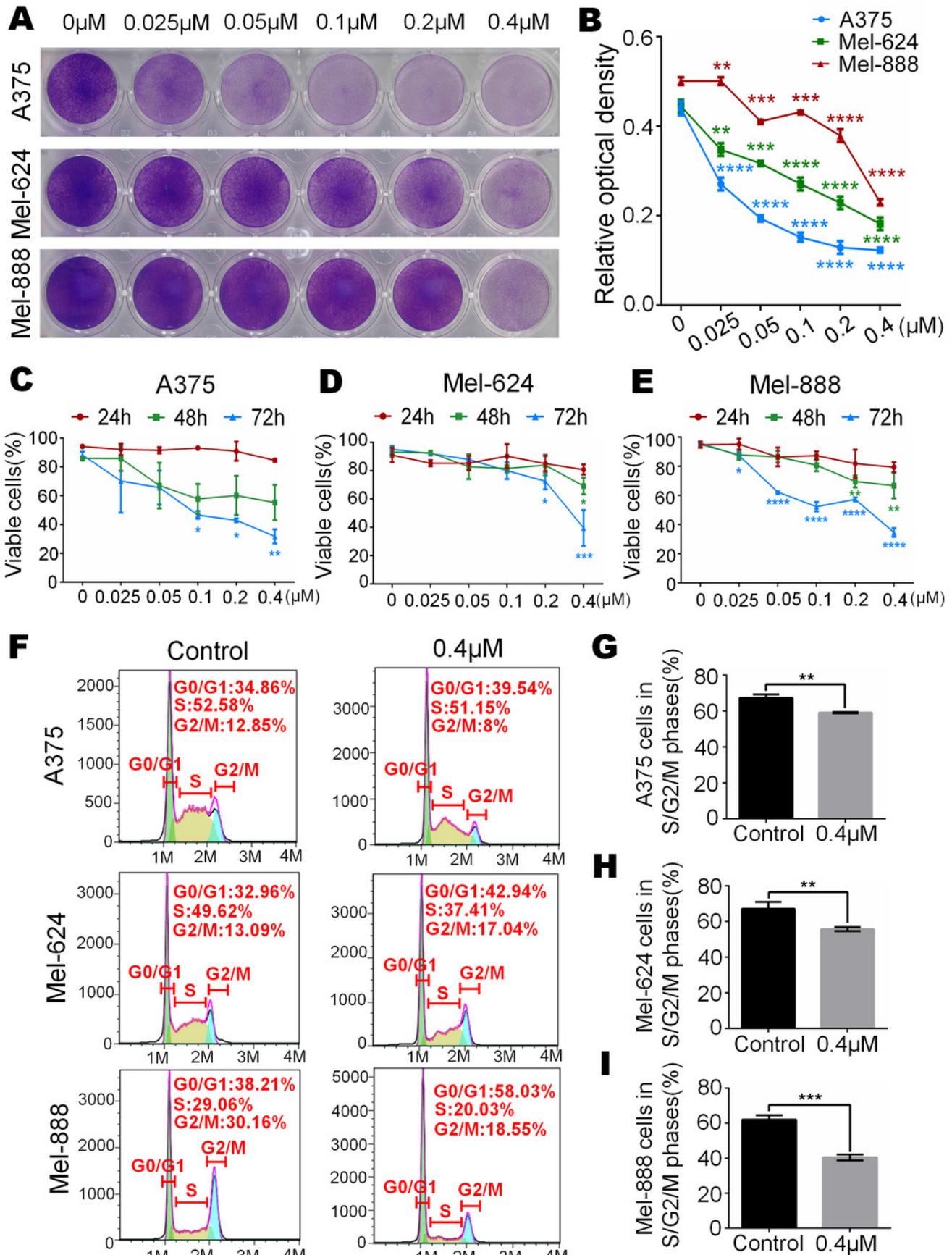


Figure 2

Monensin is non-cytotoxic to normal control human cells at the same dose <!--

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(A) CCK-8 cytotoxicity assay revealed fewer live cells in melanoma cells A375, Mel-624 and Mel-888 treated with monensin at the indicated concentrations for 72h, compared to the control groups. Absorbance, 450 nm. Each assay was done in triplicate. (B) Microscopy images revealed no decrease of HEK-293 and SV-HUC-1 treated with 0.4μM monensin for 72h, compared to the control groups. (C) CCK-8 cytotoxicity assay revealed no significant decrease of HEK-293 and SV-HUC-1 treated with monensin at the indicated concentrations for 72h, compared to the control groups. Absorbance, 450 nm. *p < 0.05; **p < 0.01; ***p < 0.001; ****p < 0.0001.

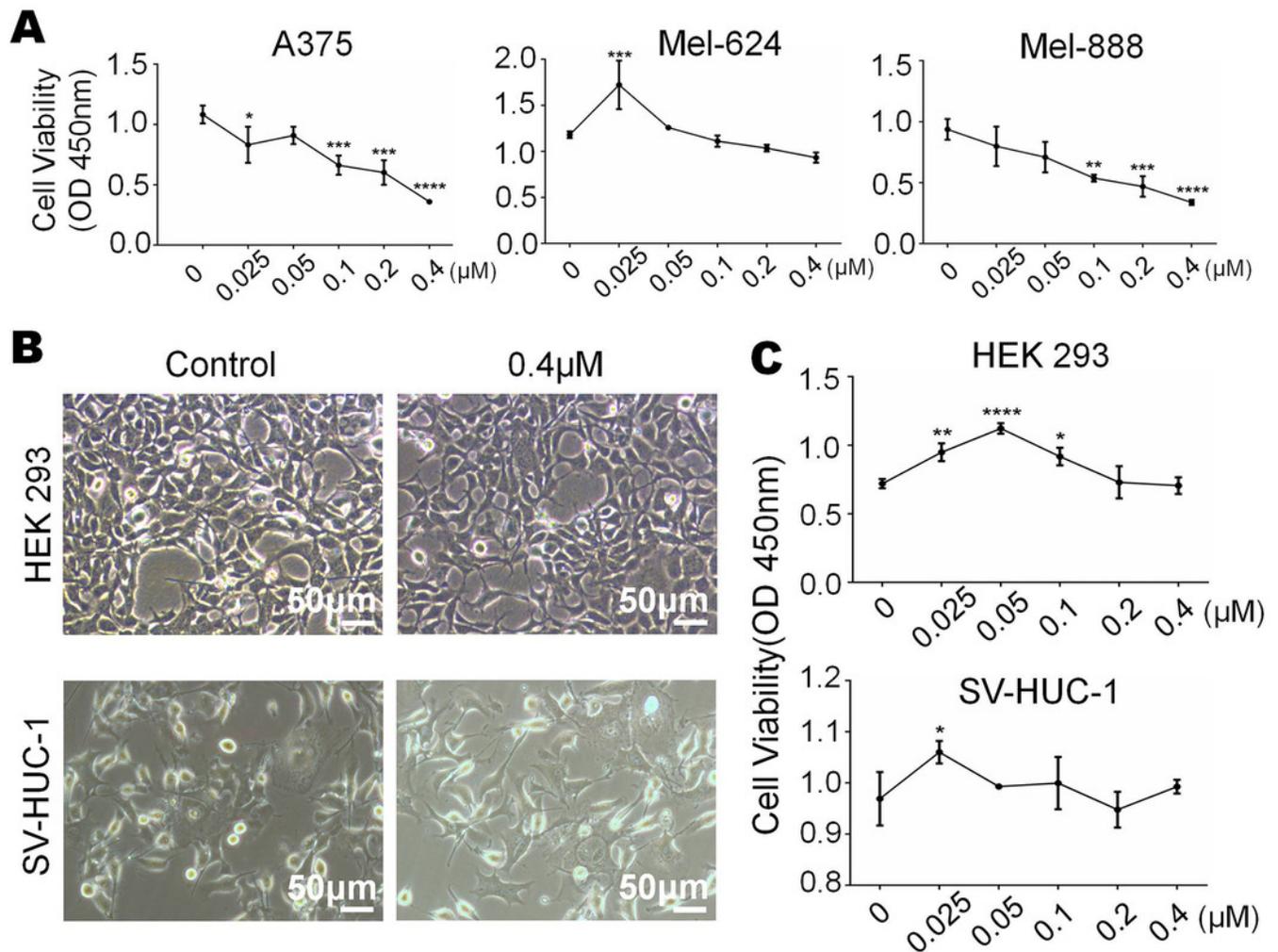


Figure 3

Monensin induces apoptosis of human melanoma cells

(A) Hoechst 33258 staining revealed that there were significant more apoptotic cells in monensin-treated groups with 0.4 μ M at 16 h post treatment, compared to the control groups. Green arrows, live cells; Yellow arrows, apoptotic cells. (B) Statistical analysis of A375 cells revealed that there were significant more late apoptotic cells in monensin-treated group at 16h, compared to the control groups. (C) Statistical analysis of Mel-624 cells revealed that there were significant more late apoptotic cells in monensin-treated group at 16h, compared to the control groups. (D) Statistical analysis of Mel-888 cells revealed that there were significant more late apoptotic cells in monensin-treated group at 16h, compared to the control groups. (E) Annexin-V apoptosis assay. A375, Mel-624 and Mel-888 cells were treated with 0.4 μ M monensin, respectively. At 12 h post treatment, cells were collected and stained with Annexin V-FITC and propidium iodide, and were subjected to flow cytometry. Average percentages of apoptotic cells were calculated. (F) Statistical analysis revealed that there were more early and late apoptotic cells in monensin-treated A375 cells, compared to the control groups. (G) Statistical analysis revealed that there were more early and late apoptotic cells in monensin-treated Mel-624 cells, compared to the control groups. (H) Statistical analysis revealed that there were more early and late apoptotic cells in monensin-treated Mel-888 cells, compared to the control groups. Each assay was done in triplicate. * $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$; **** $p < 0.0001$; ns = no significant difference.

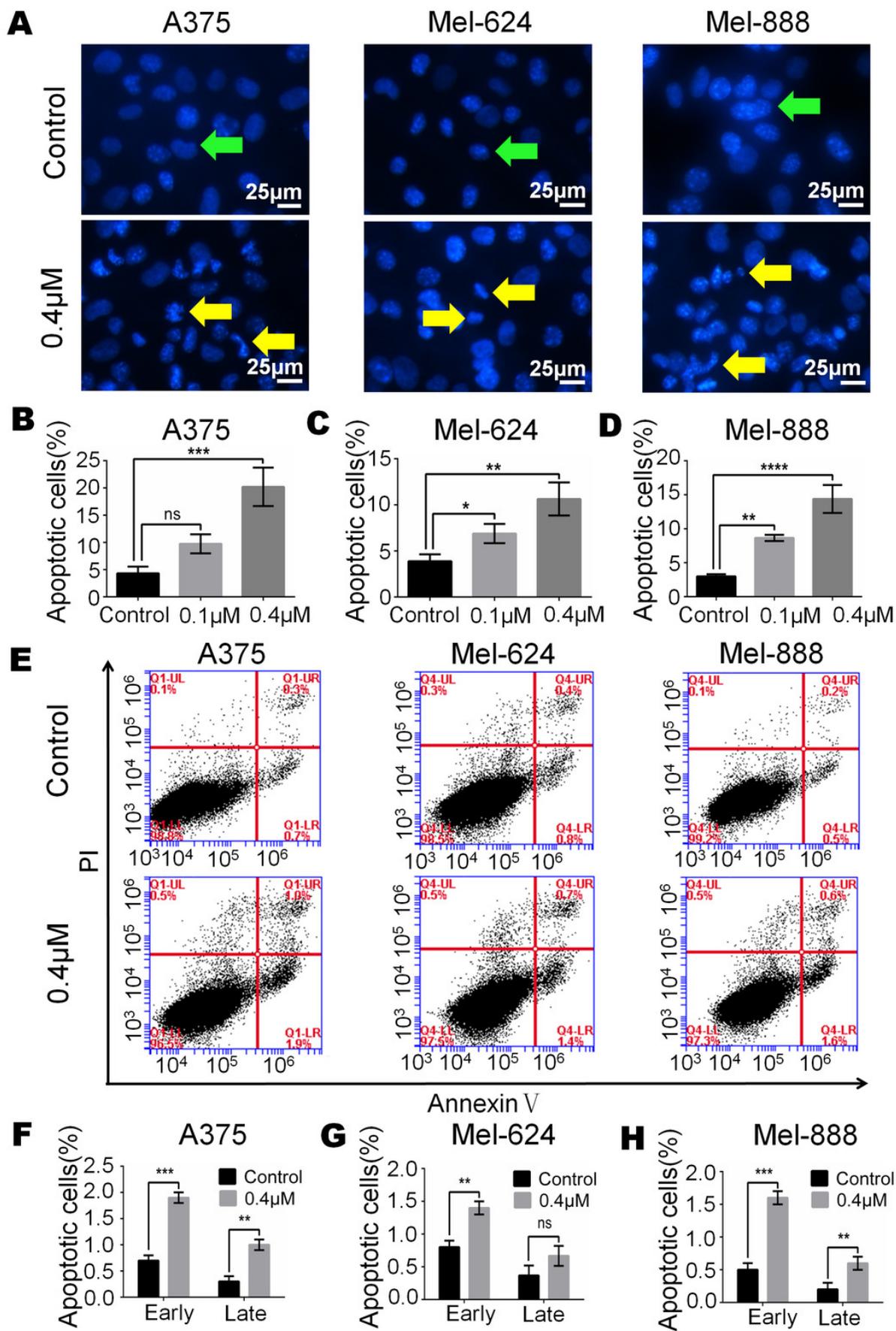


Figure 4

Monsensin effectively inhibits tumor growth in a xenograft model of human melanoma cells

(A) Xenogen bioluminescence imaging of xenograft tumor growth. Firefly luciferase-labeled A375 cells were injected into athymic nude mice subcutaneously. The animals were treated with 0mg/kg, 25mg/kg and 50mg/kg monensin by oral administration once a day. The mice were imaged at 4, 7 and 10 days after cell injection. Representative images at day 7 are shown. (B) The average signal for each group at different time points were calculated using the Xenogen Living Image analysis software. (C) The average tumor weight for each group. * $p < 0.05$; ** $p < 0.01$; ns = no significant difference.

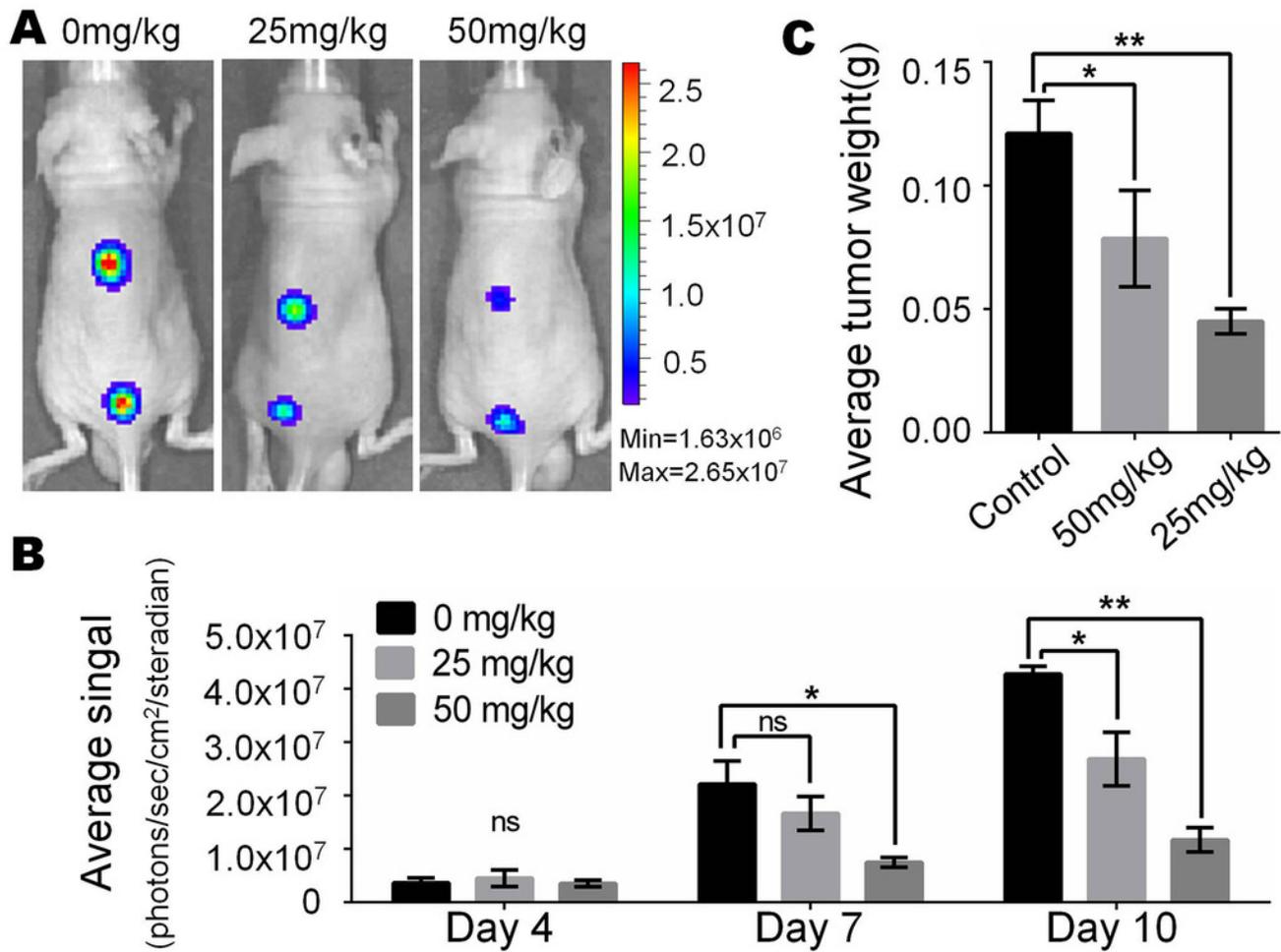


Figure 5

Monensin can induce terminal differentiation and inhibit pluripotency of melanoma stem cells

(A) Phase-contrast microscopy images of melanoma cells A375, Mel-624 and Mel-888 revealed melanin granules were increased in monensin-treated groups, compared to the control groups. Yellow arrows, melanin granules. (B) Quantitative analysis of GLuc reporters of tyrosinase showed tyrosinase expression of A375, Mel-624 and Mel-888 cells was increased with the increasing concentrations of monensin after treatment for 72 h. Absorbance, 490 nm. (C) Sphere formation assay revealed sphere formation ability of A375, Mel-624 and Mel-888 cells was decreased in monensin-treated groups, compared to the control groups. Representative images at 48 h are shown. (D) Statistical analysis of sphere formation assay at 48 h showed that the sphere diameters are significantly decreased in monensin-treated groups, compared to the control groups. (E) Colony formation assay revealed the total number of colonies was fewer with the increasing concentrations of monensin after treatment for 6 days. Representative images are shown. (F) Quantitative analysis of colony formation assay showed colony forming efficiency was significantly decreased in monensin-treated groups, compared to the control groups. (G) Real time PCR analysis for TRP2. The mRNA of TRP2 was significantly decreased in monensin-treated groups, compared to the control groups. (H) Real time PCR analysis for TRP1. The mRNA of TRP1 was significantly increased in monensin-treated groups, compared to the control groups. (I) Real time PCR analysis for SOX10. The mRNA of SOX10 was significantly decreased in monensin-treated groups, compared to the control groups. * $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$; **** $p < 0.0001$; ns = no significant difference.

