

# 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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2 **selection between differentiation and stemness of**  
3 **melanoma stem cells**

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24

25 **Abstract**

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

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

34 cells in vitro. By establishment of an animal model of transplanted human melanoma in nude  
35 mice, we demonstrated that monensin suppressed the growth of xenografts in vivo. At the same  
36 time, we found that melanogenesis increased and the ability of sphere and cloning forming of  
37 melanoma decreased under the treatment of monensin. Further detection about differentiation  
38 and pluripotent regulations were executed. Our results suggest that monensin is a potent  
39 inhibitor of melanoma, and its anti-tumor mechanism may be through promoting the final  
40 differentiation of melanoma stem cells and inhibiting their stemness maintenance.

## 41 Introduction

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

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

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

67

## 68 Materials & Methods

**69 Cell culture and drug**

70 Human melanoma cells A375, Mel-624, Mel-888, Human embryonic kidney cells HEK-293 and  
71 Human bladder epithelium immortalized cells SV-HUC-1 were all purchased from the American  
72 Type Culture Collection (ATCC, Manassas, VA, USA). The cells were cultured in complete  
73 DMEM containing 10% fetal bovine serum (FBS, Invitrogen, Carlsbad, CA, USA), 100 units of  
74 penicillin and 100 µg of streptomycin, at 37°C in 5% CO<sub>2</sub>. Drug monensin sodium salt was  
75 purchased from Solarbio (Beijing, China) and dissolved in ethanol. All the procedures were in  
76 strict accordance with the Institutional Review Board of The Third Military Medical University.

77

**78 Crystal violet cell viability assay**

79 A375, Mel-624 and Mel-888 cells were treated with varied concentrations of monensin or  
80 ethanol control, respectively. At 24 h, 48 h and 72 h after treatment, cells were washed with PBS  
81 and fixed with 0.4% paraformaldehyde at room temperature for 20 min. Then cells stained with  
82 0.5% crystal violet (Beyotime, Shanghai, China) at room temperature for 20 min. The cells were  
83 washed with tape water and air dried before imaging. For quantification, the cells were incubated  
84 with 100% acetic acid at room temperature for 20 min with shaking. The absorbance was set at  
85 570 nm.

86

**87 Viable cell counting assay**

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

92

**93 Cell cycle analysis**

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

100

**101 CCK-8 cytotoxicity assay**

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

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

107

### 108 **Hoechst 33258 staining**

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

114

### 115 **Annexin V-FITC flow cytometry assay**

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

124

### 125 **Xenograft of human melanoma cells**

126 The use and care of animals were approved by the Laboratory Animal Welfare and Ethics  
127 Committee Of the Third Military Medical University (Approval Number SYXK (Chongqing)  
128 20170002). A375 stably labeled with firefly luciferase (A375-FLuc) was constructed with  
129 piggyBac system(Chen et al. 2015; Wang et al. 2014; Wen et al. 2014). A375-Luc cells were  
130 collected and resuspended at  $10^7$  cells/ml. 100ul cells were subcutaneously injected into the  
131 dorsal back skin of athymic nude mice (4-week-old, male,  $10^6$  cells per injection, and 2 sites per  
132 mouse). The mice were divided into two groups (n = 5 per group). At three days post injection,  
133 the animals were treated with various doses of monensin (25 mg/kg or 50 mg/kg body weight) or  
134 vehicle control (ethanol) by oral administration once a day. Tumor growth was monitored by  
135 whole body bioluminescence imaging using Xenogen IVIS 200 Imaging System at days 4, 7 and  
136 10 after injection. The mice were sacrificed at 10 days and subcutaneous tumor masses were  
137 harvested for examination.

138

### 139 **Sphere formation assay**

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

144

#### 145 **Colony formation assay**

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

154

#### 155 **RNA extraction and real time PCR**

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

165

#### 166 **Statistical analysis**

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

172

## 173 **Results**

### 174 **Monensin is obviously toxic to human melanoma cells**

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

190

### 191 **Monensin is non-cytotoxic to normal control human cells at the same dose**

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

206

### 207 **Monensin induces apoptosis of human melanoma cells**

208 Apoptosis may be closely related to the cytotoxic effect of monensin, therefore, we examined  
209 cell apoptosis after A375, Mel-624 and Mel-888 cells were treated with 0.4  $\mu\text{M}$  monensin.

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

220

### 221 **Monensin effectively inhibits tumor growth in a xenograft model of human melanoma** 222 **cells**

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

235

### 236 **Monensin can induce terminal differentiation and inhibit pluripotency of melanoma stem** 237 **cells**

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

246 the sphere formation ability of A375, Mel-624 and Mel-888 cells was significantly decreased in  
247 monensin-treated group, compared to the control groups (P value of A375 = 0.0146, P value of  
248 Mel-624 = 0.0004, P value of Mel-888 = 0.0178) (Figs. 5C and 5D). Then, we also tested the  
249 pluripotency of the three melanoma cell lines by colony formation assay. The results revealed  
250 that monensin can significantly inhibit the proliferation of melanoma, and this effect was shown  
251 at a low concentration of just 0.025  $\mu$ M (Figs. 5E and 5F). Sphere formation assays and colony  
252 formation assays both suggest that monensin can inhibit the pluripotency of melanoma.  
253 Furthermore, markers of terminal differentiation and pluripotency maintenance were detected by  
254 real time PCR. The results showed TRP2 (Tyrosinase-related protein 2) and Sox10 (SRY-box 10  
255 protein) were decrease, while TRP1(Tyrosinase-related protein 1) was up-regulated (Figs. 5G-5I).  
256 Taken together, these results strongly suggested that monensin may accelerate terminal  
257 differentiation of melanoma stem cells and inhibit their pluripotency.  
258

## 259 Discussion

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

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

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

281 micromolar concentrations. Moreover, the in vitro dose used in this study was also much less  
282 than other tumor cells. The IC<sub>50</sub> of monensin to melanoma cells A375, Mel-624 and Mel-888  
283 was 0.16  $\mu$ M, 0.70  $\mu$ M and 0.12  $\mu$ M, respectively. This is a lower dose needed to achieve its  
284 anticancer activity in other tumors (IC<sub>50</sub> is 2.5  $\mu$ M in colon cancer cells and 1  $\mu$ M in myeloma  
285 cells) (Park et al. 2003a; Park et al. 2003b). This finding suggests that melanoma has a higher  
286 sensitivity to monensin.

287

### 288 **Monensin may exert its anticancer activity by inducing terminal differentiation and** 289 **inhibiting pluripotency of melanoma stem cells.**

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

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

310

### 311 **Conclusions**

312 In this study, we investigated the potential of repurposing monensin as an anti-cancer agent for  
313 human melanoma. We found that monensin can significantly inhibit human melanoma, and the  
314 mechanism may be related to the tendency of melanoma stem cells to terminal differentiation

315 rather than stemness maintenance. Our study provides a novel choice to the treatment of  
316 melanoma and a new clue to the molecular mechanism of tumor suppression.

317

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321 assay.

322

## 323 **References**

324

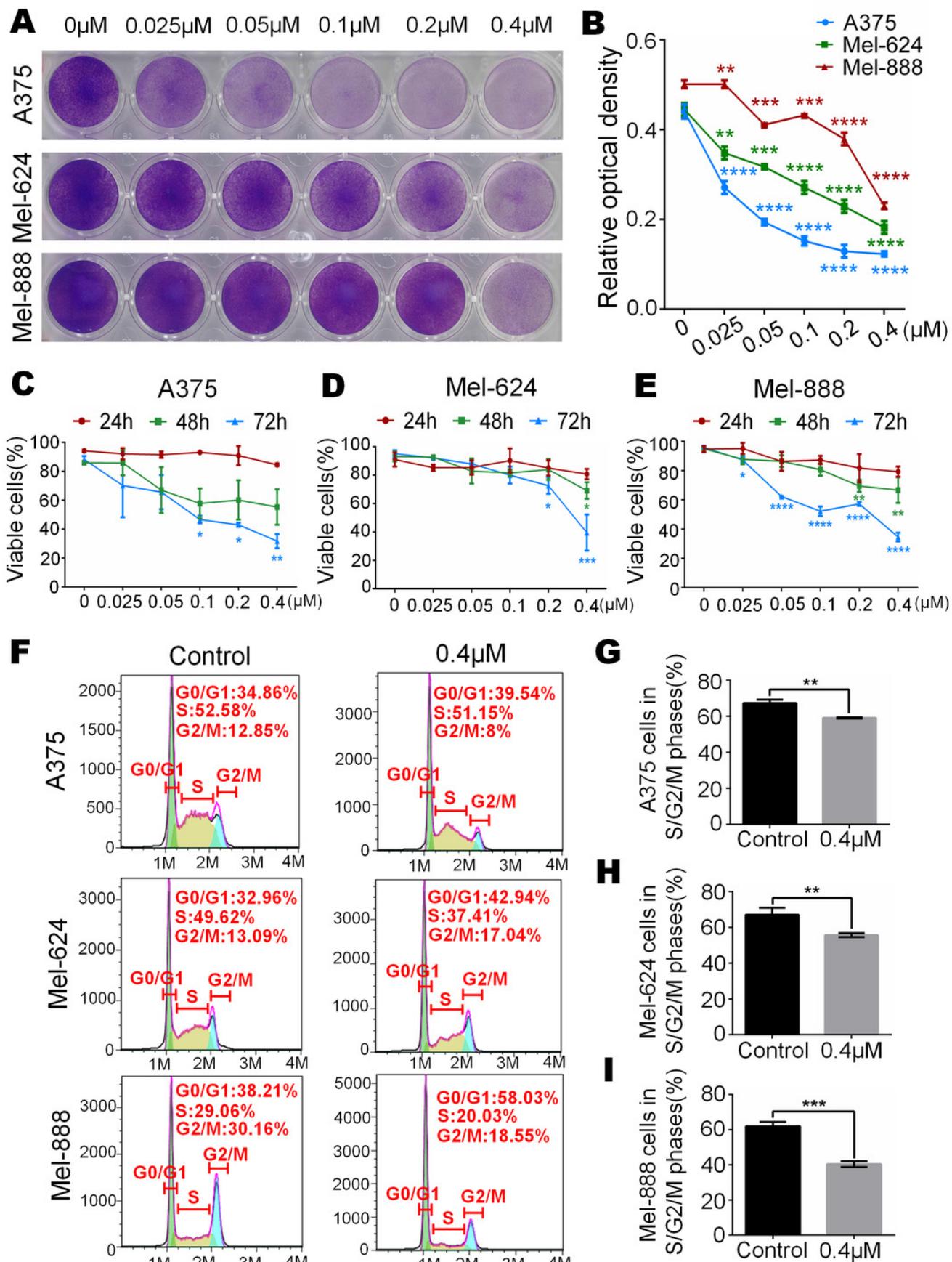
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# Figure 1

Monensin is obviously toxic to human melanoma cells

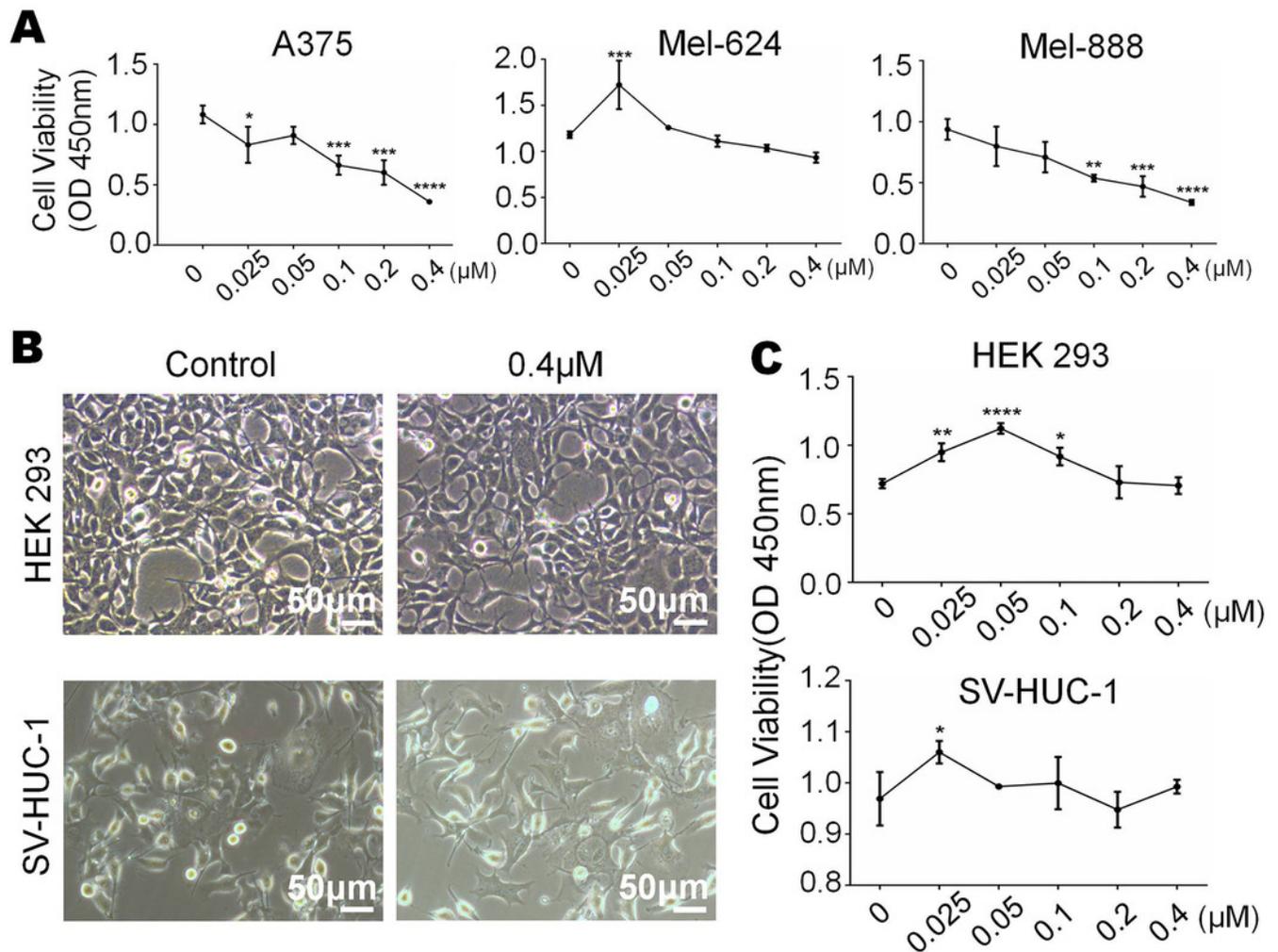
(A) Crystal violet staining revealed that there were fewer live cells in melanoma cells A375, Mel-624 and Mel-888 treated with monensin at the indicated concentrations for 72 h, compared to the control groups. (B) Quantitative analysis of the Crystal violet-stained cells revealed that there were significantly 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

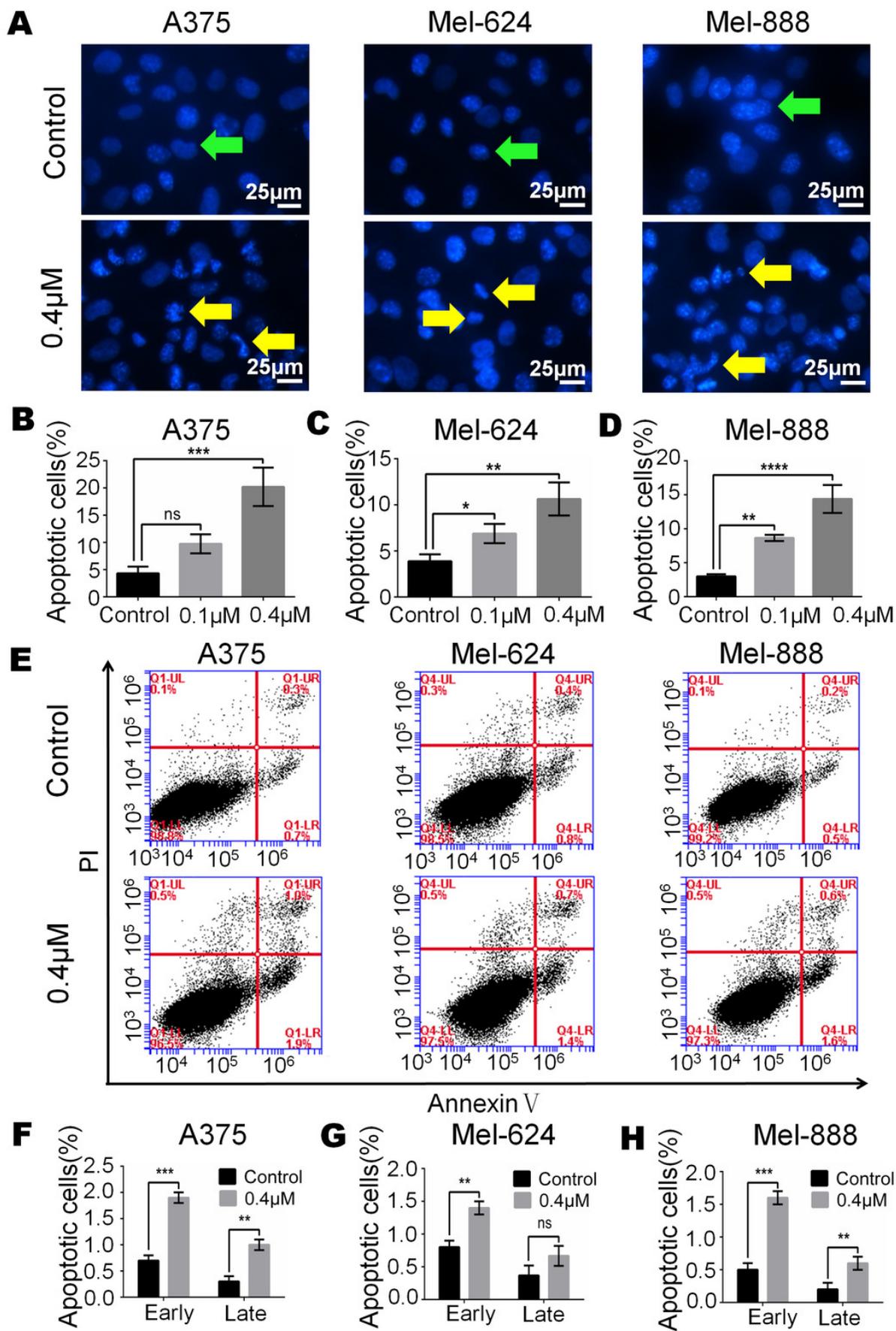
(A) CCK-8 cytotoxicity assay revealed fewer live cells in melanoma cells A375, Mel-624 and Mel-888 treated with monensin at the indicated concentrations for 72h, compared to the control groups. Absorbance, 450 nm. Each assay was done in triplicate. (B) Microscopy images revealed no decrease of HEK-293 and SV-HUC-1 treated with 0.4 $\mu$ M 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

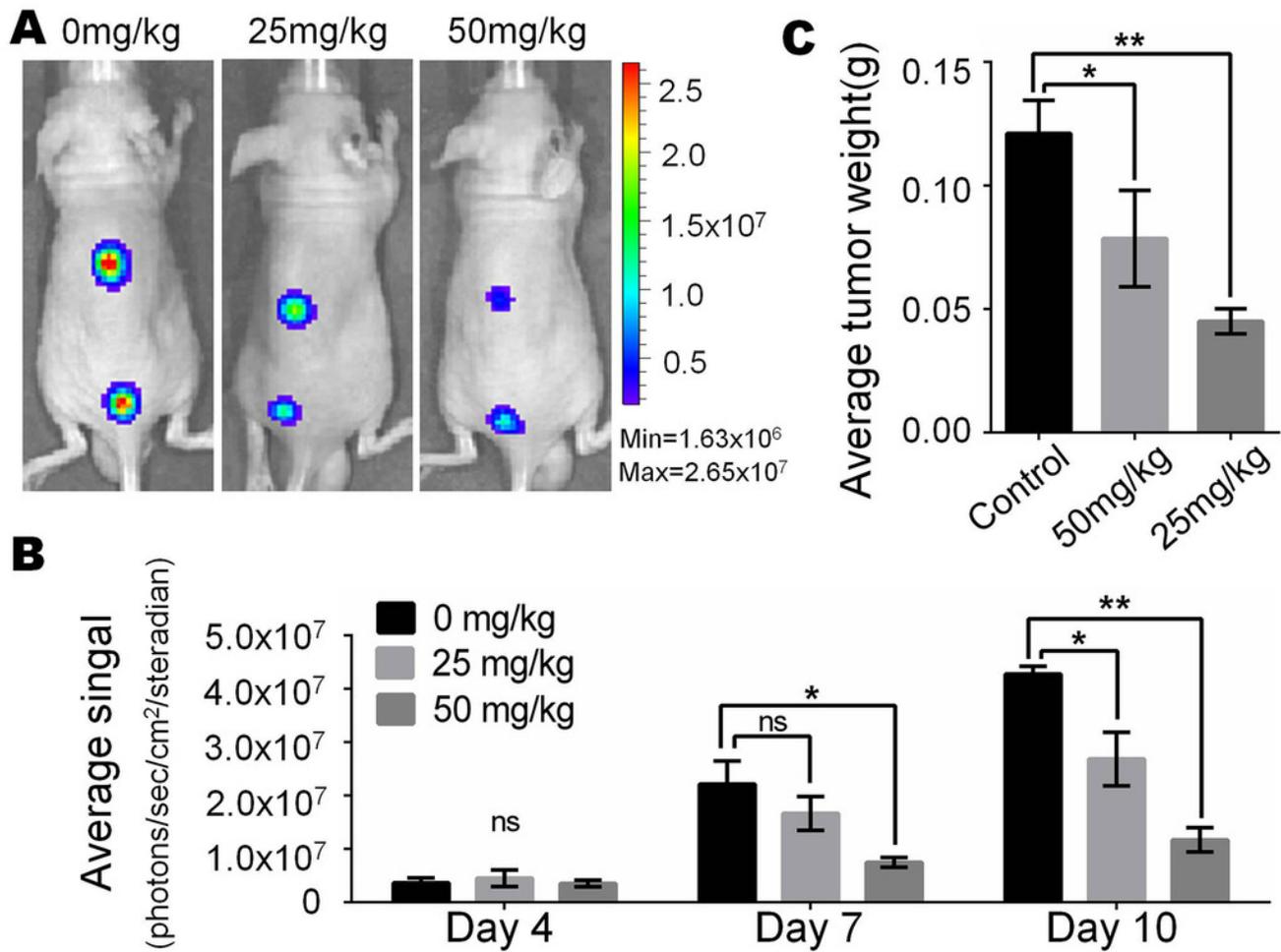
(A) Hoechst 33258 staining revealed that there were significant more apoptotic cells in monensin-treated groups with 0.4  $\mu$ M at 16 h post treatment, compared to the control groups. Green arrows, live cells; Yellow arrows, apoptotic cells. (B) Statistical analysis of A375 cells revealed that there 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  $\mu$ 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.

