LTL-621 datasheet

Origin	Primary human lung cancer	Histopathology	Squamous cell carcinoma
Year of establishment	2006	Doubling time	10 days (sub-renal)
Local invasion	Yes	Metastasis	No

Drug sensitivity Not determined

The LTL-621 was developed from a patient's primary lung cancer (Squamous cell carcinoma. Stage T2N1M0). Histopathologically, it closely resembles the patient's tumor (Figs 1, 2). When grafted under the renal capsules of SCID mice, the LTL-621 shows local invasion into adjacent host kidney parenchyma. No metastasis was observed.



Fig. 1. H&E stained LTL-621 tissue sections.

Showing a poorly differentiated squamous cell carcinoma with focal keratinization and stratification. (x400)

Fig. 2. Patient's cancer tissue before grafting.

Showing a poorly differentiated squamous cell carcinoma. Stratification and keratinization are focally observed.

Genetic and epigenetic characteristics

The LTL-621 tissue line has been characterized using array CGH and Affymetrix chips. Some of the genes with potential therapeutic application are listed below.

Tissue microarrays containing LTL-621 tissue are available for screening potential molecular targets.

Genes	Expression in LTL-621	Current stage in drug development	
ERCC1	+++	Clinical	
RRM1	++++	Clinical	
PTEN	+++	Clinical	
BRCA1	+	Clinical	
EGFR	-	Clinical	
HER (erb-B)	++	Clinical	
KRAS	++	Clinical	
P27	+++	Clinical	
MRP2	/	Clinical	
FasL	-	Clinical	
bTubIII (tubulins)	/	Clinical	
VEGFR-1	/	Clinical	
VEGFR-2	/	Clinical	
VEGFR-3	/	Clinical	
PDGFR	-	Clinical	
CD117 (cKIT)	/	Clinical	
RET	+	Clinical	
CSF-1R	/	Clinical	
CTLA-4	/	Clinical	
CD28	-	Pre-clinical	
TLR9	-	Pre-clinical	
IGF1R	++++	Pre-clinical	
ACVRL1 (ALK1)	++++	Pre-clinical	
FAK	/	Pre-clinical	
Aurora Kinase (AK)	++++	Pre-clinical	
mTOR	/	Pre-clinical	
c-Met	/	Pre-clinical	
Bcl-2	/	Pre-clinical	
COX-2	/	Pre-clinical	
PCK alpha	++	Pre-clinical	

LTL-621	gene	expression	profile
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Applications

1. Pre-clinical evaluation of existing and potential anticancer drugs. Examination of drug efficacy on tumor growth, cell death (apoptosis, necrosis), tissue invasion, and angiogenesis.

2. Discovery of potential therapeutic targets and/or biomarkers for drug sensitivity.

3. Study of mechanisms underlying tumor growth and progression.

References

- 1. Wang et al., Lab Invest (2005) 85, 1392-1404
- 2. Cutz et al, Clin. Cancer Res. 12(13): 4043-4054 (2006).
- 3. Lin et al, Cancer Res. 68 p.4352-4359 (2008)

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