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The Chemopreventive Effect of Tamoxifen Combined with Celecoxib on DMBA chemically-Induced Breast Cancer

Xiaoxu Liu^{a,*}, Huafeng Kang^a, Xijing Wang^a, Zhijun Dai^a, Fengjie Xue^a, Xinghuan Xue^a

^aDepartment of Oncological Surgery, the Second Affiliated Hospital, School of Medicine, Xi'an Jiaotong University, Xi'an 710004, China.

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Abstract

Objective: To investigate the chemopreventive effect of tamoxifen combined with a COX-2 selective inhibitor, celecoxib, on breast cancer in rats chemically induced by 7,12-dimethylben (a)anthracene (DMBA). **Methods:** DMBA was irrigated into the stomachs of SD female rats to build breast cancer model. A total of 120 rats were divided into four groups: control group, tamoxifen group, celecoxib group and combined group. The incidence rate, latent period, number and volume of breast cancer were detected and analyzed. **Results:** The tumor incidence rate of tamoxifen group (48.15%, 13/27) and celecoxib group (50.00%, 14/28) were lower than that of control group (85.71%, 24/28), but higher than that of combined group (21.43%, 6/28). The tumor's latent period of tamoxifen group (97.54±1.85 d) and celecoxib group (96.79±2.89 d) were longer than that of control group (89.50±5.99 d), but shorter than that of combined group (103.67±3.39 d). The average tumor number of tamoxifen group (1.77±0.73) and celecoxib group (1.71±0.61) were less than that of control group (3.50±1.62), but more than that of combined group (1.17±0.42). The average tumor volume of tamoxifen group (1.78±0.71 cm³) and celecoxib group (2.05±1.04 cm³) were smaller than that of control group (6.42±3.96 cm³), but bigger than that of combined group (0.71±0.96 cm³) ($P < 0.05$ respectively). **Conclusion:** Celecoxib and tamoxifen are effective drugs in preventing the occurrence of rat breast cancer chemically induced by DMBA. Furthermore, combination of them has better chemopreventive effect.

Keywords: breast neoplasm; chemoprevention; tamoxifen; cyclooxygenase-2

INTRODUCTION

Breast cancer is one of the most common malignant tumors of women. Generally accepted, treatment of precancerosis is the most convenient and effective method. Chemoprevention is to interrupt or reverse the processes of canceration so as to prevent carcinogenesis and reverse precancerosis^[1]. This study investigated the chemopreventive effect of COX-2 selective inhibitor^[2], celecoxib, combined with tamoxifen on breast cancers chemically induced by DMBA in rats, and underlying mechanisms.

MATERIALS AND METHODS

Animal modeling

Female SD rats uncopulated were provided by animal centre, medical college, Xi'an Jiaotong uni-

versity (Animals' Certificate Number: No 08-005 of Shanxi medical animal test centre), age 45±5 days, weighting 110±10 g. 200 mg/kg 7,12-dimethylben (a)anthracene (DMBA) was irrigated into the stomachs of rats to build breast cancer models.

Animal groups

120 rats were randomly divided into 4 groups, control group (normal diet) was considered as negative control, tamoxifen group (4 mg/kg tamoxifen was put in drinking water), celecoxib group, 1000 mg/kg celecoxib disowed in oleum maydis in forage) and combined group (4 mg/kg tamoxifen in drinking water, 1000 mg/kg celecoxib was put in forage). The breasts of rats were examined twice a week, when palpable breast neoplasm appeared; the number of breast neoplasm and its changes in size were recorded.

*Corresponding author.

E-mail address: xiaoxuliu0304@sina.com.

Specimen detection

After 120 days, the experiment was stopped. Vaginal smear examination was performed to confirm that the rats were in the dioestrus period, and rats were anesthetized by intraperitoneal injection of 5% urethane. Then, every mammary gland of the rats with surrounding skin and hypodermia were excized, the mammary glands were cut half open to observe the shape and count the number of tumors. The size of the tumors was measured with 1mm precision sliding caliper. The tumor incidence rate of each group was calculated. The volume of tumors was calculated according to the equation as follows: $\text{length} \times \text{weight} \times \text{height} \times \pi/6$ ^[3]. If one rat had many tumors, the volume of tumors of this rat was the summation of all tumors.

Histopathology observation

The specimens were fixed in 10% neutral formalin, embedded in paraffin and stained with hematoxylin-eosin for histological examination. The diagnosis of rat breast cancer was performed according to the diagnostic code of experimental rat breast cancer^[4].

Statistical Analysis

t test and χ^2 test was performed by SPSS10.0 for windows. $P < 0.05$ was considered significant.

RESULTS

Each group had 30 rats, in which the death before the end of experiment wasn't included. At last, 28 cases were collected from control group, compared with 27, 28, 28 cases from tamoxifen group, celecoxib group and combined group respectively.

Tumor incidence rate

The tumor incidence rate of each group respectively was: 85.71% (24/28) in control group, 48.15% (13/27) in tamoxifen group, 50.00% (14/28) in celecoxib group, 21.43% (6/28) in combined group. Statistical analysis showed that the tumor incidence rates of tamoxifen group, celecoxib group and combined group were lower than that of control group ($\chi^2=8.811$, $P=0.003$; $\chi^2=8.187$, $P=0.004$; $\chi^2=23.262$, $P=0.000$ respectively). The tumor incidence rates of tamoxifen group and celecoxib group were obviously higher than that of combined group ($\chi^2=4.340$, $P=0.037$; $\chi^2=4.978$, $P=0.026$ respectively). The difference of the tumor incidence rate of tamoxifen group and celecoxib group didn't have statistical significance ($\chi^2=0.019$, $P=0.891$).

Tumor latency period

The tumor latency period of each group respectively was: 89.50 \pm 5.99 days in control group, 97.54 \pm 1.85 days in tamoxifen group, 96.79 \pm 2.89 days in celecoxib group, and 103.67 \pm 3.39 days in combined group. Statistical analysis showed that the tumor latency periods of tamoxifen group, celecoxib group and combined group were longer than that of control group ($t=4.689$, $P=0.000$; $t=4.253$, $P=0.000$; $t=5.526$, $P=0.000$ respectively). The tumor latency periods of tamoxifen group and celecoxib group were shorter than that of combined group ($t=5.157$, $P=0.000$; $t=4.648$, $P=0.000$ respectively). The difference of tumor latency period of tamoxifen and celecoxib group hadn't statistical significance ($t=0.799$, $P=0.432$).

Average tumor number

The average tumor number of each group respectively was: 3.50 \pm 1.62 (1~7) pieces in control group, 1.77 \pm 0.73 (1~3) pieces in tamoxifen group, 1.71 \pm 0.61 (1~2) pieces in celecoxib group, and 1.17 \pm 0.42 (1~2) pieces in combined group. Statistical analysis showed that the average tumor number of tamoxifen group, celecoxib group and combined group were less than that of control group ($t=3.651$, $P=0.001$; $t=3.956$, $P=0.000$; $t=3.468$, $P=0.002$ respectively). The average tumor number of tamoxifen group and celecoxib group were more than combined group ($t=2.307$, $P=0.035$; $t=2.346$, $P=0.034$ respectively). The difference of the average tumor number of tamoxifen group and celecoxib group showed no statistical significance ($t=0.213$, $P=0.833$).

Average tumor volume

The average tumor volume of each group respectively was: 6.42 \pm 3.96 cm³ in control group, 1.78 \pm 0.71 cm³ in tamoxifen group, 2.05 \pm 1.04 cm³ in celecoxib group, 0.71 \pm 0.96 cm³ in combined group. Statistical analysis showed that the average tumor volume of tamoxifen group, celecoxib group and combined group were smaller than that of control group ($t=4.162$, $P=0.000$; $t=4.028$, $P=0.000$; $t=3.459$, $P=0.002$ respectively). The average tumor volume of tamoxifen group and celecoxib group were bigger than that of combined group ($t=2.428$, $P=0.043$; $t=2.772$, $P=0.019$ respectively). The difference of the average volume of tamoxifen group and celecoxib group had no statistical significance ($t=0.780$, $P=0.442$).

Histopathology observation

The tissues of control group presented with Infiltrating ductal carcinoma, showing cancer nest, obvious nuclear atypia and nuclear division. There was

few gland-like structures and stroma(**Fig 1**). Medullary carcinoma was composed of cancer cells and had ductless glands. The specimens without tumorigenesis showed different degrees of lobuli mammae hyperplasia and glandular epithelium atypical hyperplasia. The light degree of hyperplasia showed intralobulus and interlobulus fibrous tissues expanded or increased, gland alveolus increased, but acinous cells were still in monolayer. The atypical hyperplasia showed acinous cells arranged in disorder and

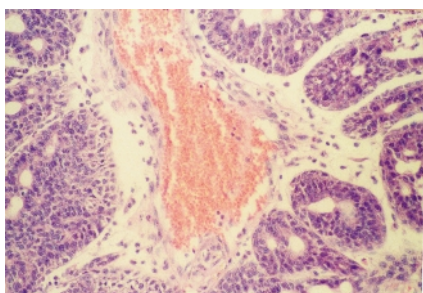


Fig 1 Infiltrating ductal cancer in control group (HE, ×200)

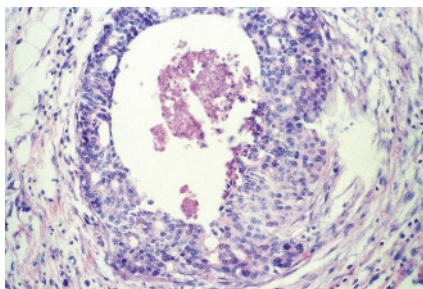


Fig 3 Infiltrating ductal cancer in chemopreventive group (HE, ×200)

multilayer, increased karyoplasmic ratio and changed nuclear atypia(**Fig 2**).

In experimental Groups, the Infiltrating ductal carcinoma had more gland-like structures and stroma, in which the cells were dispersed; there was few nuclear atypia and nuclear division(**Fig 3**). The specimens without canceration showed no or light degree of glandular epithelium hyperplasia, increased intralobulus and interlobulus fibrous tissues, also revealed less gland alveolus and only duct (**Fig 4**).

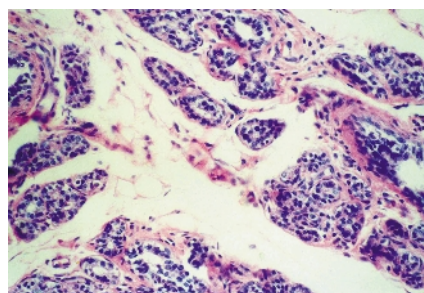


Fig 2 Atypical hyperplasia in control group (HE, ×200)

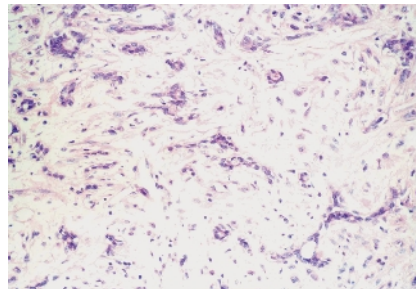


Fig 4 Hyperplasia in chemopreventive group (HE, ×200)

DISCUSSION

Cancer chemoprevention is to interrupt or reverse the processes of canceration by chemical. Combined chemoprevention use of two or more chemoprophylactic drugs with different antineoplastic mechanisms, to increase the curative effects and reduce adverse reaction. This will be the best selected scheme of chemopreventing tumorigenesis^[5]. COX-2 expresses in various tumor cells and tissues, for example, colorectal, lung and breast cancer^[6], meanwhile, it concerns with tumorigenesis and tumor development. Its mechanisms include external biological metabolism, neovascularity, apoptosis, immune function and tumor invasion^[7,8]. Celecoxib combined with tamoxifen may increase the therapeutic efficacy of breast precancerosis and become an effective scheme of preventing breast cancer occurrence.

In this study, the time for DMBA to induce the earliest palpable breast cancer was 82 days. The tumor incidence rate was 85.71%, a little lower than that report abroad^[4].

The phenomenon that tamoxifen can reduce the occurrence of breast cancer of rats coincides with the rule that tamoxifen prevents human breast atypical hyperplasia from developing breast cancer^[5]. The major mechanism of tamoxifen prophylaxising breast cancer is estrogenic antagonism, simultaneously including inhibiting cancer cell secreting VEGF^[9], decreasing oncogene expression, inducing tumor cell apoptosis through various channels^[10].

This study found that celecoxib could inhibit rat carcinogenesis and cancer development. Meanwhile. It might be useful in preventing breast cancer in the high risk. Other scholars had similar views. Nakatsug

et al^[3] reported that 400ppm nimesulide could decrease the tumor incidence rate, the volume and the multisitus rate. Abou Issa et al^[11] observed the preventive effect of celecoxib on rat breast cancer induced by DMBA among different dosage groups and found that low dose celecoxib can prevent breast cancer. Moreover, it was in a dose-dependent manner. Histopathology showed that the degree of rat breast atypical hyperplasia and duct epithelial hyperplasia in celecoxib group were obviously relieved, and the breasts of others which didn't cancerate were similar to normal breast gland. This phenomenon and COX-2 expression in precancerosis indicated that COX-2 overexpression was closely correlated with tumorigenesis. Liu et al^[12] also introduced COX-2 overexpression stimulating tumor occurrence and growth, and antisense COX-2 significantly slowed tumor growth and improved efficacy of chemotherapeutic drugs^[13]. The major mechanism of COX-2 stimulating tumorigenesis is its product, PGE₂, that makes tumor cell proliferation, induces VEGF upregulation, inhibits tumor cell apoptosis and the immune function^[14], Tari AM et al^[15] reported that COX-2 used PGE₂ to stimulate the activities of protein kinases A and C to induce selectively tamoxifen resistance in ER alpha-positive breast cancer cells, but COX-2 selective inhibitor, celecoxib, can inhibit tumorigenesis and tumor development through this way. And, celecoxib had been reported independent of COX-2 with mechanisms^[16].

The chemoprevention of breast cancer is one of the research hot spots. Celecoxib and tamoxifen both have good preventive effects on rat breast cancer induced by DMBA. These results demonstrated that the combined group had obviously lower tumor incidence rate, longer latency period, fewer number and smaller volume, besides, and tamoxifen combined with celecoxib could significantly reduce rat breast cancer occurrence and development induced by DMBA all the better. This research indicated that tamoxifen combined with celecoxib had better preventive effect on rat breast cancer.

References

- [1] Sporn MB. Hobson's choice and the need for combinations of new agents for the prevention and treatment of breast cancer. *J Natl Cancer Inst* 2002;94:242-3.
- [2] Masferrer JL, Leahy KM, Koki AT, Zweifel BS, Settle SL, Woerner BM, Edwards DA, Flickinger AG, Moore RJ, Seibert K. Antiangiogenic and antitumor activities of cyclooxygenase-2 inhibitors. *Cancer Res* 2000;60:1306-11.
- [3] Nakatsugi S, Ohta T, Kawamori T, Mutoh M, Tanigawa T, Watanabe K, Sugie S, Sugimura T, Wakabayashi K. Chemoprevention by nimesulide, a selective cyclooxygenase-2 inhibitor, of 2-amino-1-methyl-6-phenylimidazo [4,5-b]pyridine (PhIP)- induced mammary gland carcinogenesis in rats. *Jpn J Cancer Res* 2000;91:886-92.
- [4] Russo J, Russo IH. Atlas and histologic classification of tumors of the rat mammary gland. *J Mammary Gland Biol Neoplasia* 2000;5:187-200.
- [5] Christensen GL, Jepsen JS, Fog CK, Christensen IJ, Lykkesfeldt AE. Sequential versus combined treatment of human breast cancer cells with antiestrogens and the vitamin D analogue EB1089 and evaluation of predictive markers for vitamin D treatment. *Breast Cancer Res Treat* 2004;85:53-63.
- [6] Chang SH, Liu CH, Conway R, Han DK, Nithipatikom K, Trifan OC, Lane TF, Hla T. Role of prostaglandin E2-dependent angiogenic switch in cyclooxygenase 2-induced breast cancer progression. *Proc Natl Acad Sci USA* 2004;101:591-6.
- [7] Basu GD, Pathangey LB, Tindler TL, Lagioia M, Gendler SJ, Mukherjee P. Cyclooxygenase-2 inhibitor induces apoptosis in breast cancer cells in an in vivo model of spontaneous metastatic breast cancer. *Mol Cancer Res* 2004;2:632-2.
- [8] Wu T, Leng J, Han C, Demetris AJ. The cyclooxygenase-2 inhibitor celecoxib blocks phosphorylation of Akt and induces apoptosis in human cholangiocarcinoma cells. *Mol Cancer Ther* 2004;3:299-7.
- [9] Garvin S, Dabrosin C. Tamoxifen inhibits secretion of vascular endothelial growth factor in breast cancer in vivo. *Cancer Res* 2003;63:8742-48.
- [10] Salami S, Karami-Tehrani F. Biochemical studies of apoptosis induced by tamoxifen in estrogen receptor positive and negative breast cancer cell lines. *Clin Biochem* 2003;36:247-3.
- [11] Abou-Issa HM, Alshafie GA, Seibert K, Koki AT, Masferrer JL, Harris RE. Dose-response effects of the COX-2 inhibitor, celecoxib, on the chemoprevention of mammary carcinogenesis. *Anticancer Res* 2001;21:3425-32.
- [12] Liu CH, Chang SH, Narko K, Trifan OC, Wu MT, Smith E, Haudenschild C, Lane TF, Hla T. overexpression of cyclooxygenase-2 is sufficient to induce tumorigenesis in transgenic mice. *J Biol Chem* 2001;276:18563-9.
- [13] Dandekar DS, Lokeshwar BL. Inhibition of cyclooxygenase (COX)-2 expression by Tet-inducible COX-2 antisense cDNA in hormone-refractory prostate cancer significantly slows tumor growth and improves efficacy of chemotherapeutic drugs. *Clin Cancer Res* 2004;10:8037-47.
- [14] Pockaj BA, Basu GD, Pathangey LB, Gray RJ, Hernandez JL, Gendler SJ, Mukherjee P. Reduced T-cell and dendritic cell function is related to cyclooxygenase-2 overexpression and prostaglandin E2 secretion in patients with breast cancer. *Ann Surg Oncol* 2004;11:328-39.
- [15] Tari AM, Simeone AM, Li YJ, Gutierrez-Puente Y, Lai S, Symmans WF. Cyclooxygenase-2 protein reduces tamoxifen and N-(4-hydroxyphenyl)retinamide inhibitory effects in breast cancer cells. *Lab Invest* 2005;85:1357-67.
- [16] Lou J, Fatima N, Xiao Z, Stauffer S, Smythers G, Greenwald P, Ali IU. Proteomic profiling identifies cyclooxygenase-2-independent global proteomic changes by celecoxib in colorectal cancer cells. *Cancer Epidemiol Biomarkers Prev* 2006;15:1598-1606.