

are frequently seen in patients with *RUNX1* mutations,<sup>40</sup> may result at least partly in the *BMI1* overexpression. Furthermore, many gene mutations have been identified in MDS patients, including PRC2 complex proteins, and some of them showed positive associations with *RUNX1* mutations.<sup>41</sup> Our next investigation is to clarify the effects of both expression levels and mutations of PRC2 proteins in patients with *RUNX1* mutations. There is a possibility that these gene expression patterns and mutations may act to elevate the *BMI1* expression level.

*BMI1* is well-known to be essential for self-renewal of hematopoietic stem cells,<sup>42-44</sup> in part via repression of genes involved in senescence,<sup>45</sup> and self-renewal of hematopoietic stem cells is enhanced by *BMI1* expression in both mouse and human.<sup>35,46</sup> Our results showed that overexpression of *BMI1* itself in human CD34<sup>+</sup> cells or a mouse BMT model does not appear to have MDS-genic potential, as reported previously.<sup>35,46</sup> When the CD34<sup>+</sup> cells were double-transduced simultaneously with D171N and *BMI1*, the cells could proliferate with differentiation and dysplasia. Co-transduction of D171N and *BMI1* into BM cells resulted in faster induction of MDS/AML in BMT mice. It is suggested that *BMI1* overexpression may act as one of the partner abnormalities collaborating with master gene mutations for MDS-genesis. *BMI1* affects *INK4A/ARF* expression, which has been sufficiently elucidated, involved in the leukemic phenotype. A previous report that showed that *BMI1* collaborates with BCR-ABL in leukemic transformation also supports this idea.<sup>47</sup> We confirmed that significant enrichments of *BMI1* were detected on *Ink4a/Arf* promoter regions in both *BMI1*-transduced cells and *BMI1/D171N*-transduced cells, suggesting that *BMI1* overexpression may help cells transform, at least in part, due to suppressing the expression of the *Ink4a/Arf* tumor suppressor gene. Although a physical association *in vivo* between *BMI1* and D171N, as well as wild type *RUNX1*,<sup>48</sup> was observed, it is known that D171N mutant has lost the DNA binding ability.<sup>12</sup> Therefore, the mechanism by which *BMI1* co-expression with D171N mutant induces proliferative effects seems to be independent of the direct physical association between *RUNX1* and *BMI1*. Additionally, both *BMI1*-knockdown human CD34<sup>+</sup> cells and *Bmi1*-deficient mouse cells showed elevated levels of reactive oxygen species accumulation,<sup>49,50</sup> resulting in impairment of long-term expansion and apoptosis. It may be the reason why D171N-transduced human CD34<sup>+</sup> cells that showed reduced *BMI1* expression could not proliferate. It may also explain the phenomenon in 32Dcl3 cells, in which *BMI1* transduction seemed to rescue D171N-transduced cells from apoptosis. However, the CD34<sup>+</sup> cells transduced with D171N/*BMI1* did not develop MDS/AML in NOG mice, suggesting that other factors such as *EVI1* overexpression observed in

a mouse BMT model may be still required for the development of MDS/AML in NOG mice.

Germline mutations of *RUNX1* have been shown to occur in FPD/AML.<sup>1,2</sup> FPD/AML is regarded as familial MDS,<sup>3</sup> and the molecular mechanisms by which *RUNX1* mutations promote the development of hematopoietic malignancies seem to be identical in both MDS and FPD/AML patients. Because decades-long asymptomatic latency period do occur in patients with FPD/AML, it appears that *RUNX1*-mutated stem cells cannot promote the development of MDS without other cooperative factors. It is suspected that additional gene abnormalities occur later on in the *RUNX1*-mutated cells for the development of MDS. Therefore, we performed stepwise transduction of the D171N mutant followed by *BMI1* into CD34<sup>+</sup> cells, which could reproduce continuous slow proliferation of a low percentage of blastoid cells, reflecting the hematological features in higher-risk MDS patients. This result indicates that genetic alterations, such as *EVI1* or *BMI1* overexpression which add proliferative advantage to cells, may occur as "second hits" after the master genetic alteration (i.e. *RUNX1* mutation) that has MDS-genic potential.

In the present study, we revealed the functional significance of the *RUNX1* D171N mutant in the pathogenesis of MDS using human CD34<sup>+</sup> cells. Thus, amino acid replacement type mutations in the RHD, which comprise half of the *RUNX1* mutations detected in patients, are suspected to have MDS-genic potential, however, the cells with this type of mutation lack proliferation ability. This may explain bone marrow failure status, one of the phenotypes of MDS. When the mutated cells gain partner gene abnormality, i.e. *EVI1* or *BMI1* overexpression, they can acquire proliferation ability through alteration of the collaborating gene which may explain the various clinical features of patients with *RUNX1* mutations. On the other hand, the other half of the *RUNX1* mutants may have different biochemical functions that remain unclear, in particular, mutants that lack the C-terminal functional domain but have an intact RHD may have other effects.<sup>4,22</sup> Our future investigations include the elucidation and clarification of the molecular mechanisms by which each type of *RUNX1* mutant promotes the development of MDS.

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### **Authorship Contributions**

Y.H. designed the research, performed experiments and wrote the manuscript; D.I. and Y.D. performed experiments and prepared the manuscript; J.I., N.D., H.Matsui, T.Y., H.Matsushita and G.S. collected the data; K.A., A.I. and T.K. supervised the project and discussed the results; and H.H. conceived and designed the research, collected and interpreted the data, and revised the manuscript.

### **Disclosure of Conflicts of Interest**

The authors declare that no conflict of interest exists.

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Table 1. Characteristics of AML mice caused by expression of D171N and BMI1

	pMYs.IG/pMYs.IN (n=3)	D171N/ pMYs.IN (n=5)	D171N/BMI1 (n=10)
WBC (/μL)	18,550 ± 1,786	129,100 ± 68,089	70,838 ± 16,353
Hb (g/dL)	14.8 ± 0.4	7.3 ± 2.5	7.7 ± 2.3
Plt (x10 <sup>3</sup> /μL)	291 ± 67	246 ± 80	134 ± 75
MCV (fL)	46.7 ± 0.6	53.6 ± 3.9	51.9 ± 9.3
BM count (x10 <sup>7</sup> cells)	2.70 ± 0.78	7.05 ± 1.67	4.83 ± 1.14
Myeloblasts in BM (%)	1.8 ± 1.0	34.5 ± 16.0	59.6 ± 8.2
Liver weight (mg)	1,668 ± 129	2,008 ± 482	2,015 ± 527
Spleen weight (mg)	98 ± 12	605 ± 242	531 ± 185

Averages and standard deviations are shown. BM cells were isolated from both tibias and femurs.

WBC indicates white blood cell; Hb, hemoglobin; Plt, platelets; and MCV, mean corpuscular volume.

## Figure Legends

**Figure 1. *EV11* overexpression collaborates with *RUNX1* mutations in human MDS.** (A) *EV11* expression levels by quantitative reverse transcription-polymerase chain reaction (qRT-PCR) in CD34<sup>+</sup> cells of clinical samples. Relative *EV11* expression was calculated as the ratio of *EV11* to *GAPDH* expression. RNA from normal bone marrow (BM) CD34<sup>+</sup> cells served as a control, and the RNA level was defined as one. Data are expressed as mean  $\pm$  SD. L-MDS, lower-risk MDS; H-MDS, higher-risk MDS; WT, wild-type; MT, mutation. (B) White blood cell (WBC) count and clinical course of a patient with high *EV11* expression. A 78-year-old male showed pancytopenia and blast cells in peripheral blood. Bone marrow examination showed hypocellular marrow with multilineage dysplasia and 16.5% of blast cells. Cytogenetic analysis showed 45,XY,add(3)(q?13.2),-7. He was diagnosed with RAEB-2 and received chemotherapy. However, his condition progressed to bone marrow failure after chemotherapy and repeated severe infection. Blast population continued to increase gradually. Eight months after diagnosis, his WBC count started to increase, and he died with uncontrollable blast expansion 11.5 months after diagnosis.

**Figure 2. Overexpression of D171N promotes inhibition of differentiation and increase in self-renewal capacity.** (A) Pictogram of pMXs.IG retroviral constructs of FLAG-tagged *RUNX1* wild-type (WT) and D171N mutant (D171N). The difference in cDNA sequence of the mutant from the WT is indicated by an arrow head. LTR, long terminal repeat. (B) Human CD34<sup>+</sup> cord blood cells were transduced with the indicated vector. A typical flow cytometry profile of cells retrovirally transduced with pMXs.IG, WT or D171N shows the transduction efficiency. The GFP-positive cells shown within the gate were collected. (C) Anti-FLAG immunoblotting of sorted GFP-positive cells confirmed the expression of FLAG-tagged *RUNX1* proteins. Anti- $\beta$ -actin antibody was used as control. (D-H) Ten thousand cells were plated in methylcellulose culture dishes. BFU-E, burst forming unit erythroid; CFU-GM, colony forming unit-granulocyte, macrophage; GEMM, colony forming unit-granulocyte, erythroid, macrophage, megalocyte. Data are expressed as mean  $\pm$  SD of 6 independent experiments and compared with control (pMXs.IG). \* $P < 0.05$ , \*\* $P < 0.01$ . (D) Colony numbers were counted after 14 days. (E) Photomicrographs (x40) of representative colonies found in the plates with an IX71 microscope and a DP12 camera (Olympus). (F) The cell number per colony was calculated by total GPA<sup>+</sup> cells / total BFU-E colonies and total CD13<sup>+</sup> cells / total CFU-GM colonies. (G) GFP<sup>+</sup> cells were analyzed by flow cytometry for the indicated surface markers. (H) Colony number and cell proliferation fold in CFC

replating assay. (I) LTC-IC assay in bulk was carried out in duplicate, and average number of LTC-IC per 10,000 original input cells and SD of 4 independent experiments are indicated.  $**P < 0.01$ .

**Figure 3. D171N-transduced cells lack long-term proliferation ability.** Human CD34<sup>+</sup> cord blood cells were transduced with the indicated vectors and cultured in complete cytokine medium (without IL-3 and IL-6). To examine proliferation ability of each transduced cell type, the cells were sorted for GFP expression and cultured in complete cytokine medium. Four independent experiments were performed, and the error bars represent the SD. (A) Proliferation curve of GFP-positive RUNX1-transduced or control (empty vector-transduced) cells, non-sorted. (B) Growth patterns of the GFP-sorted transduced cells displayed as proliferation fold originating from one just after sorting. (C) Representative quantitative cell cycle analysis allowed the discrimination of cell subsets that were undergoing G0/G1 (a), S (b) or G2 + M (c) phases of the cell cycle, or apoptosis (d). (D) Percentage of CD34<sup>+</sup> cells was determined by flow cytometry. (E) Representative CD34/CD38 expression pattern in long-term culture. (F) Images of Wright-Giemsa stained cytopins on days 3 and 35 obtained with a BX51 microscope and a DP12 camera (Olympus); original magnification, x1000. (G) Morphological abnormalities observed in Wright-Giemsa stained cytopins of the D171N cells on day 35 in culture, myeloid, erythroid, and megakaryocytic cells with dysplasia are indicated by blue, pink, and green arrows, respectively, as captured with a BX51 microscope and a DP12 camera (Olympus); original magnification, x1000.

**Figure 4. BMI1 expression pattern in human CD34<sup>+</sup> cells and enforced BMI1 expression in human CD34<sup>+</sup> cells.** (A) BMI1 expression levels in CD34<sup>+</sup> cells of clinical samples. Relative BMI1 expression was measured by triplicated qRT-PCR and calculated as the ratio of BMI1 to GAPDH expression. Data are also expressed as mean  $\pm$  SD of each patient group.  $**P < 0.01$ . (B) BMI1 expression in transduced CD34<sup>+</sup> cells was confirmed by qRT-PCR. CD34<sup>+</sup> cells were re-purified from GFP-positive sorted cells after 5 and 40 days of culture in complete cytokine medium. Bar chart represents the mean  $\pm$  SD of 3 independent experiments. RNA from pMXs.IG-transduced cells on day 5 served as a control, and the RNA level was defined as one.  $*P < 0.05$ ,  $**P < 0.01$ . (C) pMXs.IRES-DsRed-Express (pMXs.IR) retroviral construct for the expression of BMI1. (D) Representative flow cytometry profile of cells retrovirally transduced with pMXs.IR or BMI1 shows the transduction efficiency. The DsRed<sup>+</sup> cells shown within the gate were collected. (E) Expression of BMI1 was confirmed by Western blotting using anti-Bmi1 antibody. Anti- $\beta$ -actin antibody was used as control. (F) Human CD34<sup>+</sup> cells transduced with the indicated vector and sorted for DsRed expression were analyzed by CFC replating assay. Ten

thousand cells were plated in methylcellulose culture dishes. Data are expressed as mean  $\pm$  SD of 3 independent experiments. (G) Growth pattern of the transduced cells cultured in complete cytokine medium displayed as proliferation fold originating from  $10^0$  just after sorting. The error bars represent the SD from 4 independent experiments. (H) The expression pattern of surface markers as shown by a typical flow cytometry profile, and Wright-Giemsa stained cytopins of the DsRed<sup>+</sup> cells on day 42 culture in complete cytokine medium as captured with a BX51 microscope and a DP12 camera (Olympus); original magnification, x1000.

**Figure 5. The effect of double expression of D171N and BMI1.** (A-C) IL-3-dependent 32Dcl3 cells were stably transduced with pMYs.IP/IB, pMYs.IP/BMI1, D171N/pMYs.IB or D171N/BMI1. Before the assay for proliferation and apoptosis, the transduced 32Dcl3 cells were subjected to drug selection with 1  $\mu$ g/mL puromycin and 10  $\mu$ g/mL blasticidin. (A) G-CSF–induced differentiation assay in indicated 32Dcl3 transfectants. Surface expression of CD11b after incubation for 6 days in the presence of 1 ng/mL IL-3 (red histograms) or 50 ng/mL G-CSF (blue histograms) was analyzed by flow cytometry. The result of control staining is shown as a filled histogram. Data are representative of two independent experiments. The cells cultured with G-CSF for 6 days were assessed by Giemsa staining. Images were obtained with a BX51 microscope and a DP12 camera (Olympus); objective lens, UplanFI (Olympus); original magnification x1000. (B) Growth curve of the transduced 32Dcl3 cells cultured in the presence of 1 ng/mL of IL-3. Data are expressed as mean  $\pm$  SD of 3 independent experiments. (C) Annexin V positivity in the transduced 32Dcl3 cells cultured without IL-3. Data are expressed as mean  $\pm$  SD of 3 independent experiments. (D-G) Human CD34<sup>+</sup> cells were precultured for 3-4 days in expansion medium and transduced with both GFP-tagged D171N and DsRed-tagged BMI1. After 3-4 days, GFP<sup>+</sup>/DsRed<sup>+</sup> cells were purified by sorting. The cells were cultured in methylcellulose or long-term culture medium. (D) Expression of BMI1 and RUNX1-D171N were confirmed by Western blotting using anti-Bmi1 and anti-FLAG M2 antibodies, respectively. Anti- $\beta$ -actin antibody was used as control. (E) Double-transduced cells were analyzed by CFC replating assay. Data are expressed as mean  $\pm$  SD from 4 independent experiments. (F) LTC-IC assay in bulk and limiting dilution was carried out. (G) Growth patterns of the transduced cells cultured in long-term culture medium displayed as proliferation fold. The error bars represent the SD from 4 independent experiments. The growth profiles of all cells with double transduction of GFP (empty or D171N) and DsRed (empty or BMI1) vectors are shown. (H) Cell cycle analysis and the expression pattern of surface markers as shown by a typical flow cytometry profile, and

Wright-Giemsa stained cytopsin of D171N- and D171N/BMI1-transduced cells on day 42 as captured with a BX51 microscope and a DP12 camera (Olympus); original magnification, x1000. (I) *INK4A/ARF* (*p16/p14*) expression levels in D171N- and D171N/BMI1-transduced cells on day 42. Relative gene expression was measured by qRT-PCR performed in triplicate and calculated as the ratio of *INK4A/ARF* to *GAPDH* expression.

**Figure 6. The effect of double expression of D171N and BMI1 in a mouse BMT model.** (A) Kaplan-Meier analysis of the survival of mice that received transplants of BM cells transduced with pMYs.IG/BMI1 (n=12, green line), D171N/pMYs.IN (n=11, red line) or D171N/BMI1 (n=12, blue line). *P* values were calculated using log-rank test. (B) Expression of RUNX1-D171N and BMI1 in BM cells derived from the BMT mice transduced with pMYs.IG/IN (lane 1), D171N/pMYs.IN (lanes 2, 3) or D171N/BMI1 (lanes 4-8). Cell lysates were immunoblotted with anti-Bmi-1, anti-FLAG M2 or anti-tubulin antibody as control. Data are representative of 3 independent experiments. (C) Macroscopic findings of sacrificed mice transplanted with BM cells transduced with the indicated construct. A representative photograph is shown. Mice with D171N/pMYs.IN or D171N/BMI1 died of MDS/AML with marked splenomegaly (right two panels), although mice with pMYs.IG/IN or pMYs.IG/BMI1 remained healthy without any organomegaly 8 months after BMT (left two panels). (D) Cytospin preparations of BM and spleen cells derived from indicated mice were stained with Giemsa. A representative photograph is shown. Images were obtained with a BX51 microscope and a DP12 camera (Olympus); objective lens, UplanFI (Olympus); original magnification x1000. (E) Flow cytometric analysis of BM cells derived from each transduced mouse. In pMYs.IG/IN and pMYs.IG/BMI1, apparently healthy mice were sacrificed for analysis of BM cells 8 months after BMT. The dot plots show staining for NGFR, Gr-1, CD11b, B220 or c-kit as detected with phycoerythrin versus GFP. (F) Histopathologic findings of spleen and liver from mice that died of MDS/AML in the indicated BMT model, as shown by hematoxylin and eosin staining. Images were obtained with a BX51 microscope and a DP12 camera (Olympus) with an UplanFL objective lens (Olympus), and are shown at an original magnification x400. (G) *Ink4a/Arf* (*p16/p19*) expression levels in BM cells of mice. Relative *p16/p19* expression was measured by qRT-PCR performed in triplicate and calculated as the ratio of *p16/p19* to *Gapdh* expression. (H) *Evi1* expression levels in BM cells of mice. Relative *Evi1* expression was measured by qRT-PCR performed in triplicate and calculated as the ratio of *Evi1* to *Gapdh* expression. RNA from pMYs.IG/pMYs.IN mice served as a control, and the RNA level was defined as one.

**Figure 7. Stepwise transduction of the D171N mutant followed by BMI1 in human CD34<sup>+</sup> cells.** (A) Human CD34<sup>+</sup> cells were precultured for 3 to 4 days in expansion medium and transduced with GFP-tagged D171N-mutant. After 3 or 4 days, GFP<sup>+</sup> cells were sorted and cultured in long-term culture medium for 28 days. Then, CD34<sup>+</sup> cells were re-selected by the CD34 MicroBead Kit again, and transduced with DsRed-tagged BMI1. We also transduced the DsRed vector as a control. Finally, 35 days after the D171N transduction, GFP<sup>+</sup>/DsRed<sup>+</sup> cells were sorted and cultured in methylcellulose or long-term culture medium. (B) CFC replating assay in 3 independent experiments. (C) Representative flow cytometry analyses of the first colonies. (D) Proliferation fold in 3 independent experiments. Day 0 was the day of the second (DsRed vectors) transduction. (E) Flow cytometric analysis for CD34 expression, and Wright-Giemsa stained cytopins on day 39 as captured with a BX51 microscope and a DP12 camera (Olympus) at x400 and x1000 original magnifications.

Figure 1

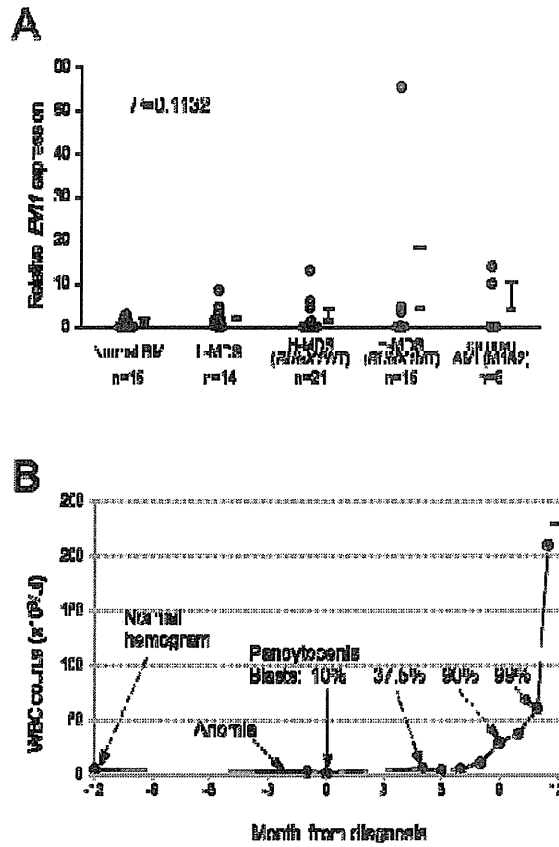


Figure 2

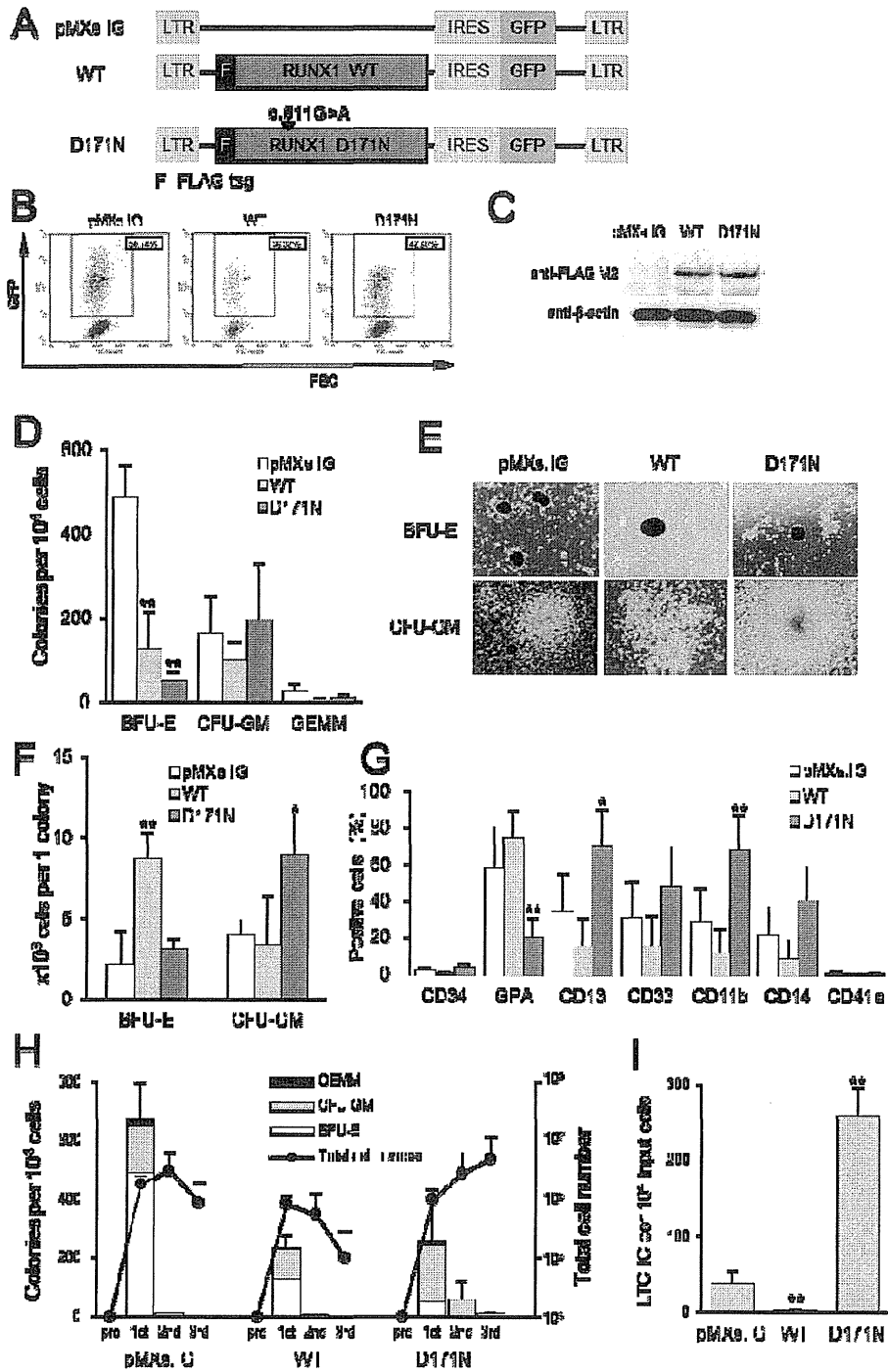




Figure 3

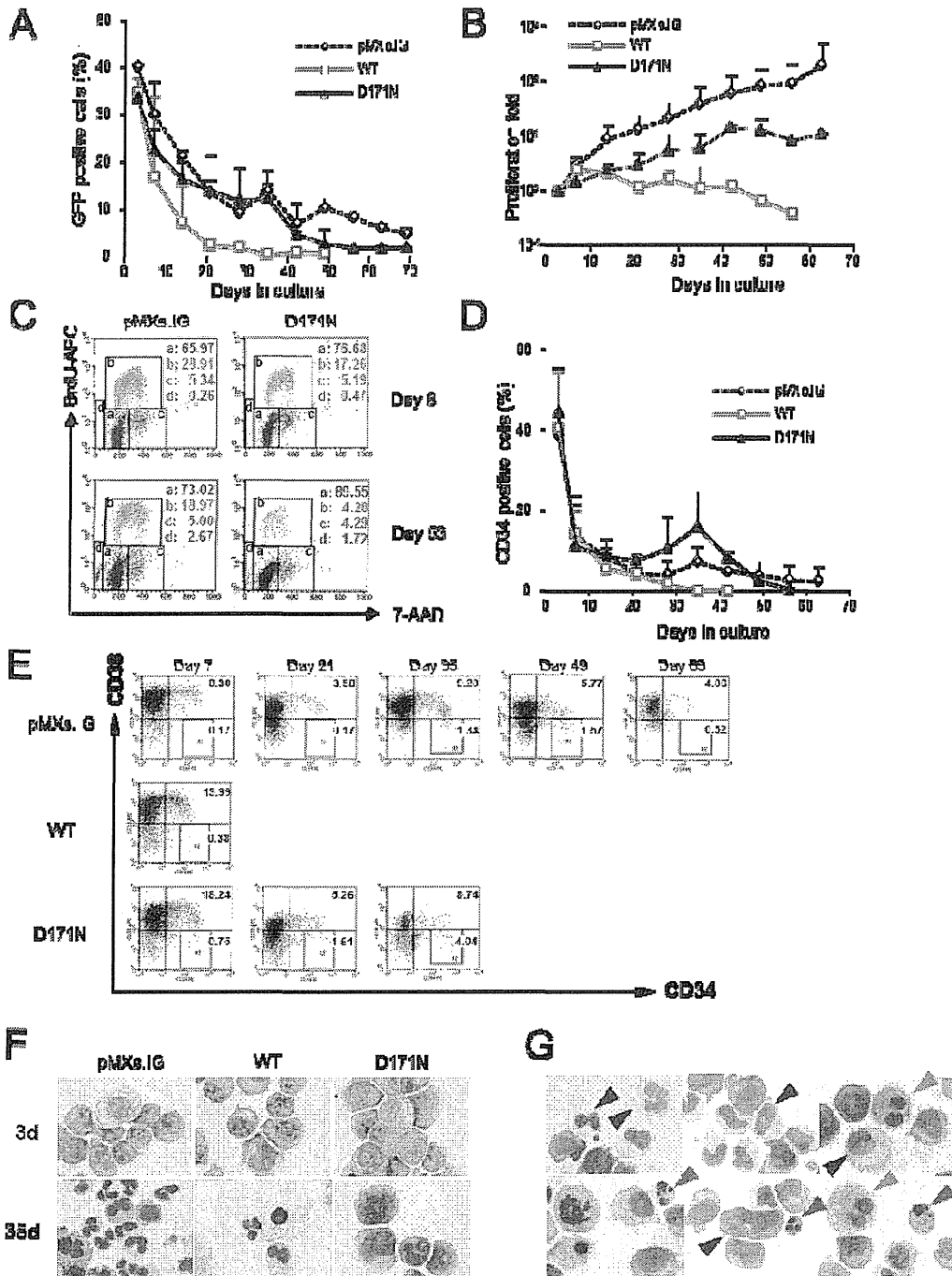
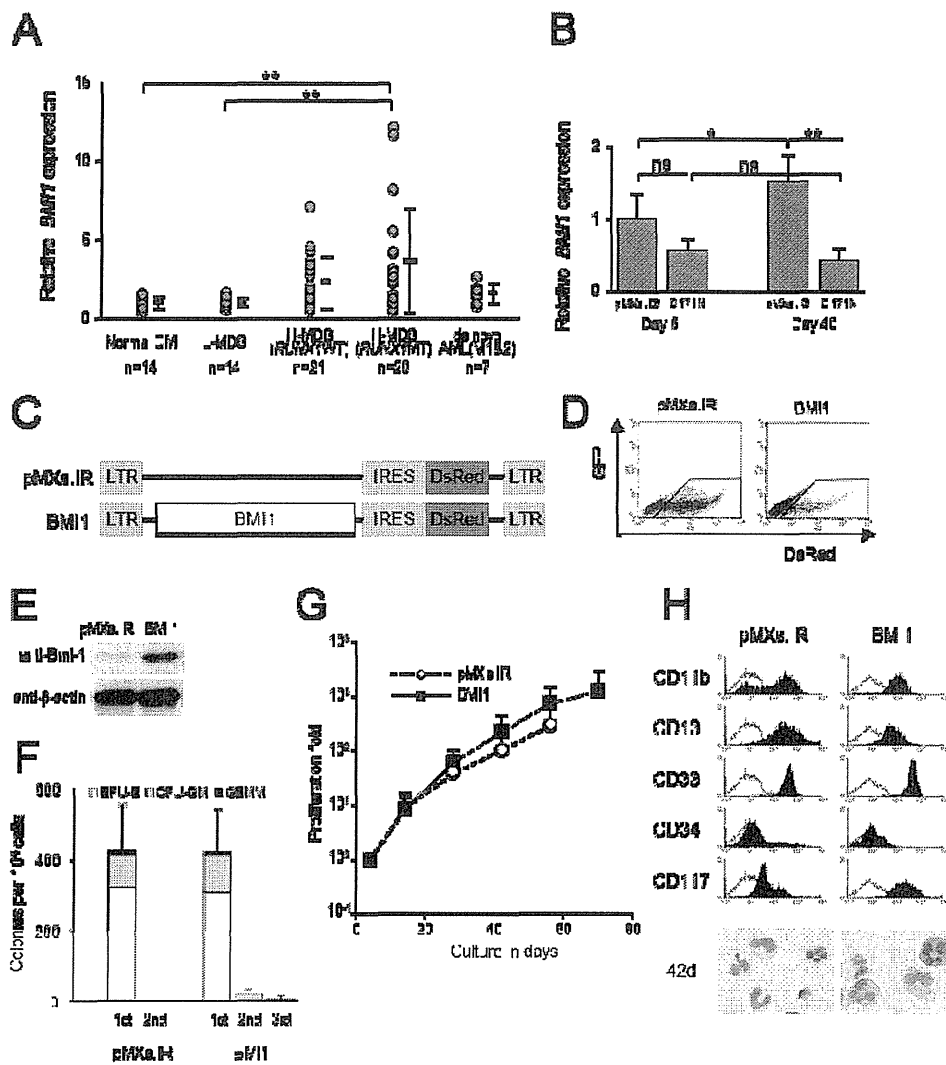


Figure 4



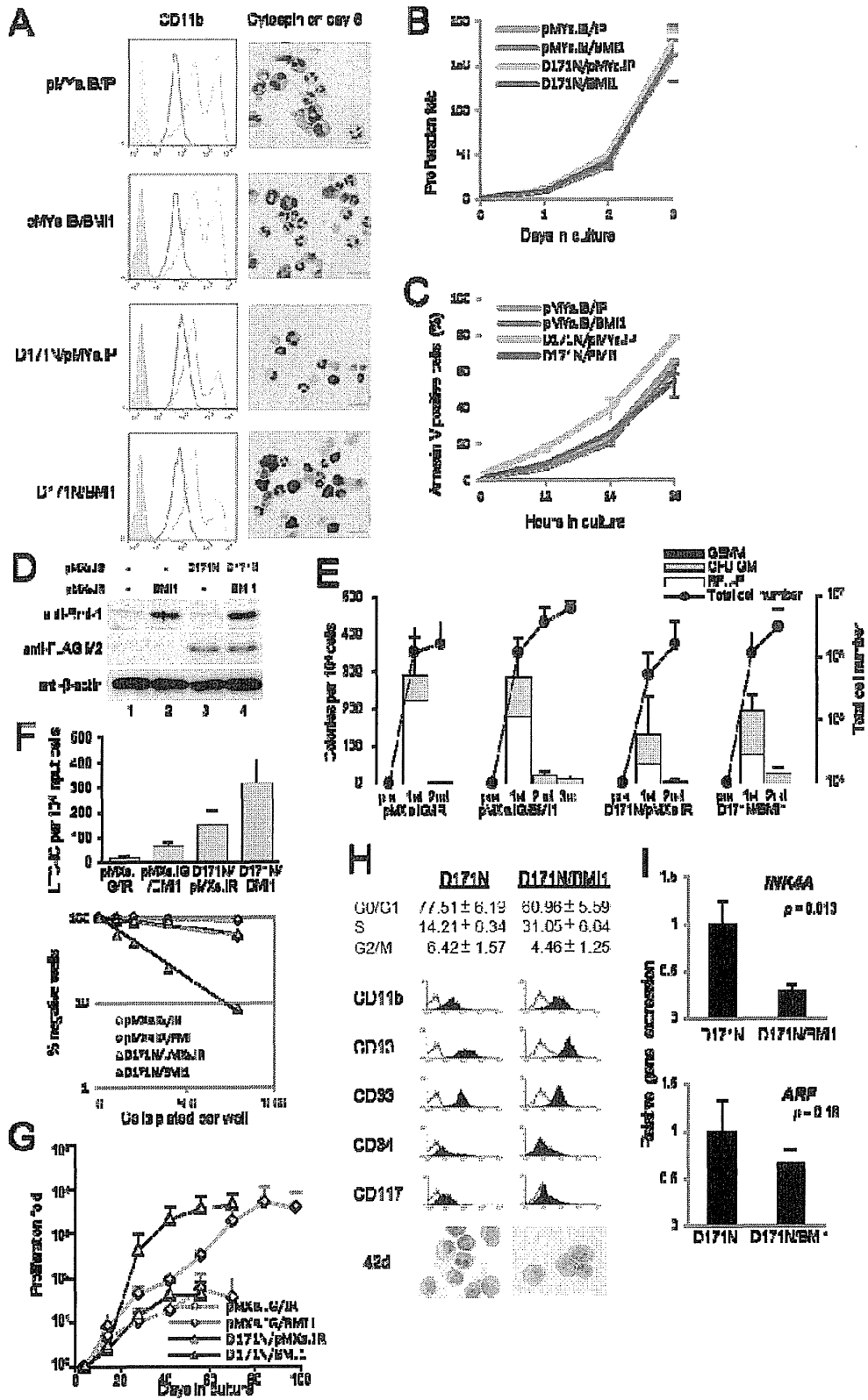


Figure 6

