# Multifunctional Proteins in Tumorigenesis: Aminoacyl-tRNA Synthetases and Translational Components

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Abstract: Since translation is a central process in all living organisms, the components of translational machinery containing aminoacyltRNA synthetases, initiation, elongation, and releasing factors and ribosomal proteins have been considered as housekeepers of the cells. While these components are necessary for translational control, many of them have been found also to be involved in the control of cell fate through the diverse functions that are seemingly unrelated to protein synthesis. Also, there are several lines of evidence, suggesting the association of eukaryotic translational components with cancer development although the exact underlying mechanisms still await further investigation. Here we address the involvement of the translational components in the cell transformation and malignant phenotypes and the relationship of the deregulation of translational control of a wide range of cancers to provide systematic view on the association of translational components with cancers.

**Key Words:** Aminoacyl-tRNA synthetase, ribosomal protein, translation initiation factor, translation elongation factor, translation releasing factor, translation, cell transformation, malignant phenotype, multi-functionality.

# INTRODUCTION

Translation is one of the most complex biological processes, involving diverse protein factors and enzymes as well as three major species of RNA. In eukaryotic systems, this process consists of initiation, elongation and termination steps, and these steps are controlled by multisubunit protein complexes that are comprised of aminoacyl-tRNA synthetases (ARSs), initiation factors (eIFs), elongation factors (eEFs), releasing factors (eRFs), and ribosomal proteins (RPs) (Table 1). Among these steps, the initiation in mammalian cells is the most complex step involving a set of eIFs and has been considered as the major target site for the control of translation and cell proliferation (Pestova and Hellen, 2001). However, many recent studies suggested that other translational factors such as ARSs, eEFs, eRFs, and RPs also could be important players in the regulation of cell proliferation (Ejiri et al., 2002; Lee et al., 2004; Ruggero and Pandolfi, 2003; Thornton et al., 2003). Translational control is required for the fine-tuning of protein levels during cell proliferation and differentiation, the adaptation to cellular stress, and spatial or temporal regulation of protein expression (Hake and Richter, 1997; Ibba and Soll, 1999).

Although translational components have not been the primary area of interest in the studies of cancer, there are accumulating data implicating the possible association of translational factors with cell proliferation and cancer formation (Caraglia et al., 2000; Clemens and Bommer, 1999; Fingar et al., 2004; Holland, 2004; Meric and Hunt, 2002; Rajasekhar and Holland, 2004). In fact, changes in the expression pattern of translational components can lead to several changes in tumour cells such as an increase in the overall rate of protein synthesis and/or overexpression of specific proteins involved in cell growth and proliferation (De Benedetti and Graff, 2004; Meric and Hunt, 2002; Rajasekhar and Holland, 2004; Rhoads, 1999). Three main alterations at the translational level appear to be associated with cancer formation: variations in mRNA sequences affecting translational efficiency, changes in the expression or availability of the translational components, and activation of translation through aberrantly activated signal transduction pathways. The first alteration affects the translation of an individual mRNA that may play a role in carcinogenesis. The second and third alterations can lead to more global changes such as an increase in the overall rate of protein synthesis and translational activation of several mRNA species (Meric and Hunt, 2002). Although many of translational components are closely associated with cancer formation, only a limited number of them have been explored as biomarkers for cancer diagnosis or therapeutic targets for anticancer agents (Wiesenthal *et al.*, 2006). In this review, we collected the translational factors that are thought to be associated with cancer formation, and classified them according to their roles in protein synthesis and related cancers to see their functional and pathological linkages in systematic manner.

## AMINOACYL-tRNA SYNTHETASES

Aminoacyl-tRNA synthetases(ARSs) catalyze the ligation of specific amino acids to their cognate tRNAs during protein synthesis, and their catalytic activities represent essential role in maintenance of cell viability. During their long evolutionary history, some ARSs acquired additional functions including regulation of transcription and translation, RNA splicing and trafficking, rRNA synthesis, apoptosis, angiogenesis, and cytokine activities in inflammation (Lee *et al.*, 2004; Park *et al.*, 2005b). Although the pleiotropic activities of these enzymes may give a benefit to cells, they appear to be also pathologically associated with cancer or other diseases (Ivakhno and Kornelyuk, 2004).

Among 20 different ARSs, tryptophanyl-tRNA synthetase (WRS) possesses 11 putative protein kinase motifs and is known as a phosphoprotein but its molecular mechanisms in cellular signaling pathways remain unresolved. In mammalian cells, WRS is activated for angiostatic signaling by proteolysis or alternative splicing to give two natural variants - mini-WRS and T2-WRS (Otani et al., 2002a). Expression of mini-WRS is strongly induced by antiproliferative cytokine interferon-y along with other angiostatic factors such as IP-10 (interferon inducible protein 10) and MIG (monokine induced by IFN-y) (Fleckner et al., 1995; Salvucci et al., 2004; Turpaev et al., 1996). Mini- and T2-WRS inhibit development of new vessels without affecting pre-established vasculature (Otani et al., 2002a; Wakasugi et al., 2002a). The anti-angiogenic activity of both fragments has been demonstrated in cell-based assays in vitro and in vivo (Otani et al., 2002a; Wakasugi et al., 2002a). These cytokine fragments of WRS inhibit the migration of

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#### Table 1. Functions of Translational Components in Protein Synthesis

		Eukaryotic Factors	Functions	
ARS Complex		20 ARSs AIMP3/p18 AIMP2/p38 AIMP1/p43	Aminoacylation of respective tRNAs ARS complex stability, DNA repair ARS complex stability, lung differentiation Interacting RRS, inflammatory cytokine, wound healing, angiogenesis control Hormonal activity for glucose homeostasis	
Initiation Factors		eIF1 eIF1 eIF2 $\alpha,\beta,\gamma$ eIF2 $A$ eIF2 $B\alpha,\beta,\gamma,\delta,\epsilon$ eIF2 $C$ eIF3 $a,b,c,d,e,f,g,h,i,j,k$ eIF3 $A$ eIF4 $A$ Ded1 eIF4 $B$ eIF4 $E$ eIF4 $F$ eIF4 $F$ eIF4 $G$ eIF4 $F$ eIF5 $a$ eIF5 $B$ eEF1 $A1$ eEF1 $A2$ eEF1 $Pa$	Simulation of Met-tRNAi & mRNA binding to 40 S ribosomes Simulation of Met-tRNAi & mRNA binding to 40 S ribosomes Met-tRNAi binding to 40 S ribosomes AUG-dependent Met-tRNA binding to 40 S ribosomes GDP:GTP exchange on eIF2 Stabilization of ternary complex Ribosome dissociation, Stabilization of ternary complex Stimulation of mRNA binding Ribosome dissociation mRNA binding, RNA helicase mRNA binding, RNA helicase mRNA binding, RNA helicase mRNA binding, Caprecognition mRNA binding, Caprecognition mRNA binding, Anchorprotein mRNA binding Ribosomal subunit joining Ribosomal subunit joining Ribosomal subunit joining Ribosomal subunit joining Ribosomal subunit joining Recruits tRNA to ribosomal A site;GTP hydrolysis Recruits tRNA to ribosomal A site;GTP hydrolysis	
Elongation Factors		eEF1Bα eEF1Bβ eEF1Bγ EF2	GDP:GTP exchange on eEF1A GDP:GTP exchange on eEF1A Links eEF1Bα and eEF1Bβ during GDP:GTP exchange Ribosomal translocation on mRNA;GTP hydrolysis	
Releasing Factors		eRF1 eRF3	Catalyse peptidyl-tRNA hydrolysis eRF-dependent and ribosome-dependent	
Ribosomal Complex	Small subunit	S2,S3,S3a,S4,S5,S6,S7,S8 S9,S11,S12,S13,S15,S16,S17, S19,S20,S23,S24,S25,S26, S27,S28,S30	Link specific amino eside into polyportido absins	
	Large subunit	L3,L4,L5,L6,L7,L8,L9,L10,L11, L12,L13,L13a,L17,L18,L18a,L19, L21,L22,L23,L23a,L24,L26,L27, L27a,L28,L29,L30,L32,L35,L35a, L37,L37a,L38,L39,L41,L44, P0,P1,P2,L3(Mito),L31(Mito)	according to genetic information transported in ribonucleic acid	

ECs (Otani et al., 2002a; Wakasugi et al., 2002a), and activation of extracellular signal-regulated kinase (ERK1/2) and Akt (Tzima et al., 2003) and induce apoptosis of human umbilical vein endothelial cells (Otani et al., 2002b; Wakasugi et al., 2002b). Since antiangiogenic therapy shows great potential to control tumor progression, a new angiogenesis-signaling pathway that is regulated in part by WRS, is of great interest for cancer therapy. Since T2-WRS is the natural fragment of a tRNA synthetase and does not seem to have the anti-angiogenic effect on the normal vasculature, it might be safely used to block neovascularization of tumors (Tzima et al., 2005). In addition, human WRS expression was shown to correlate with growth rates of neuroblastoma and pancreatic cancer cells (Paley et al., 2007). Also, the production of anti-WRS autoantibodies was found in the sera of some donors and cancer patients, indicating a potential relationship to interferon induction (Paley et al., 1995). Furthermore, WRS has been known as a marker protein of monocyte maturation to macrophage and its mRNA expression is significantly upregulated during the maturation of tissue macrophage (Krause et al., 1996). Monocytes not only settle in organs as a physiological process, but also enter tumor tissues, generating a population of macrophages, which are termed as tumor-associated macrophages (TAM). Many tumors show a rich leukocytic infiltration consisting of lymphocytes as well as of TAM (Mantovani et *al.*, 1992). Because macrophages exert a higher degree of tumor cytotoxicity than monocytes (Krause *et al.*, 1996), WRS might have some critical roles in the maturation and function of macrophages in cancer.

KRS is secreted from various cell lines in response to TNF- $\alpha$  (Park *et al.*, 2005c) and stimulates macrophages and peripheral blood mononuclear cells to enhance migration and TNF-a production. Thus, KRS and TNF- $\alpha$  appear to form a positive feedback loop to amplify secretion of both factors. Interestingly, KRS was found to be highly expressed in the tumor regions of the breast cancer patients (Park et al., 2005c; Gene Expression Omnibus database). Although the biological meaning of KRS secretion is not yet understood, it may be linked to the survival or metastasis of cancer cells. In this regard, it is worth noting that the cancer cells can turn TNF- $\alpha$  to a proliferative signal (Young and Wright, 1992) although TNF-α normally suppresses cell proliferation and induces cell death (Baisch, 2002; Ichijo et al., 1997; Liu et al., 2002; Tobiume et al., 2001). Thus, KRS may help the growth of cancer cells directly or indirectly through the induction of TNF- $\alpha$  secretion

Methionyl-tRNA synthetase (MRS) plays a role in the maintenance of translational fidelity (Deniziak and Barciszewski, 2001).

Current Proteomics, 2006, Vol. 3, No. 4 235

Human MRS was shown to be translocated to the nucleoli under proliferative conditions to augment rRNA synthesis although the underlying mechanism is not clearly understood (Ko et al., 2000). It was previously demonstrated that the MRS activity is increased in human colon cancer (Kushner et al., 1976). Interestingly, the MRSencoding gene is overlapped with the CHOP (C/EBP homologous protein) gene in a 56 bp domain corresponding to its 3' end of human chromosome 12q13 (Fig. 1A). It is known that the CHOP expression is associated with several forms of human cancer. Specifically, amplification of this region occurs in several forms of human cancer such as human sarcomas (Forus et al., 1994; Nilbert et al., 1995), malignant fibrous histiocytoma (Palmer et al., 1997), and gliomas and glioblastomas (Reifenberger et al., 1996). A consequence of the overlap between the CHOP and MRS genes causes an amplification of the 12q13 locus in sarcomas (Forus et al., 1994; Nilbert et al., 1995) and other forms of human tumors (Palmer et al., 1997; Reifenberger et al., 1996), probably resulting in overexpression of the MRS and CHOP gene, which may give a growth advantage to some cells that could contribute to tumor progression. In addition, the regulation of MRS expression could be altered in myxoid liposarcoma as a result of the chromosomal translocation and an increased level of MRS could provide liposarcoma cells with a significant growth advantage. Furthermore, amino acid deprivation induces the expression of CHOP (Bruhat et al., 1997; Marten et al., 1994) and regulates the activity of MRS (Lazard et al., 1987). Therefore, there might be an intimate functional interaction between the two genes. Also, the interaction between the overlapping CHOP and MRS mRNAs would have important implications for their regulation in cellular response to environmental stress, and oncogenic transformation in which amplifications or translocations of the CHOP gene occur (Ubeda et al., 1999).

Cysteinyl-tRNA synthetase (CRS) is often detected as a fusion protein with anaplastic lymphoma kinase (ALK) in inflammatory myofibroblastic tumor (IMT) that is a rare childhood neoplasm characterized by a prominent inflammatory infiltrate (Cools et al., 2002: Debelenko et al., 2003). Recently, the recognition of IMT has been considered as a distinctive neoplastic process because of overlapping pathologic and clinical features with reactive (nodular fascitis, scars, or desmoid fibromatosis) and/or sarcomatous processes. A large subgroup of IMTs shows clonal rearrangements involving chromosomal band 2p23, the site of the ALK gene, and molecular analyses have demonstrated the expression of a number of ALK fusion genes (TPM3-ALK, TPM4-ALK, CLTC-ALK, CARS-ALK) (Bridge et al., 2001; Cook et al., 2001; Cools et al., 2002; Duyster et al., 2001; Griffin et al., 1999; Lawrence et al., 2000; Su et al., 1998; Yousem et al., 2001). Anti-ALK immunohistochemical studies showed abnormally upregulated ALK expression in 60% (44 of 73) of cancer cases, suggesting that ALK fusions would play a crucial role in the pathogenesis of these tumors (Cook et al., 2001). The CRS and ALK genes have been mapped to 11p15.5 and 2p23, respectively (Cruzen et al., 1993; Morris et al., 1997). The detection of the CRS-ALK fusion in IMT case is characterized by the presence of t(2;11;2)(p23;p15;q31) and chimeric protein of approximately 130 kDa (Fig. 1B). In this chimeric protein, the 606 Nterminal amino acid peptide of CRS is fused to the 562 amino acids of ALK (Cools et al., 2002; Debelenko et al., 2003). Chromosome 11p15.5 has been identified as an important region of tumorsuppressor gene, showing LOH in Wilm's tumor, rhabdomyosarcoma, lung, ovarian, and breast cancer (Gicquel et al., 1997; Karnik et al., 1998; Kerr et al., 2003; Xu et al., 2001). The CRS gene is located only 700 kb telomeric to Nup98 that is frequently involved in translocations in acute myeloid leukemia (Hu et al., 1997). Thus, the genes on 11p15.5 containing CRS may be involved in the malignancies including this region.

Phenylalanyl-tRNA synthetase (FRS) is the most complex enzyme among ARSs (Mirande, 1991), consisting of heterodimeric enzyme of the  $\alpha_2\beta_2$  type in all species, and it is markedly conserved during evolution from prokaryotes to eukaryotes (Schimmel, 1987). The crystal structure of FRS from Thermus thermophilus consists of 11 structural domains containing three in the  $\alpha$  subunit and eight in the  $\beta$  subunit (Mosyak *et al.*, 1995). The gene encoding the  $\alpha$ subunit of FRS is mapped to chromosome 19 (Sen et al., 1997). Interestingly, abnormalities in this region have been reported in lung solid tumor (Mittelman, 1991). The  $\alpha$  subunit of FRS shows preferential expression in tumorigenic acute-phase chronic myeloid leukemia K562 cells, and the karyotype of the A549 cell line also shows trisomy of chromosome 19 along with other chromosomal translocations (Lieber et al., 1976). This is the first case of tumorselective, cell cycle-dependent and differentiation-dependent expression among ARSs (Sen et al., 1997). While the a-subunit domains of FRS create catalytic module and a coiled-coil domain directly involved in aminoacylation and tRNA-Phe binding, the βsubunit is a collection of structural domains that are likely to perform various functions (Rodova et al., 1999).

The glycyl-tRNA synthetase (GRS)-encoding gene is localized on chromosome 7p15 region (Nichols et al., 1995), and was recently identified as a potent tumor-promoting gene through microarray analysis (Wasenius et al., 2003). This gene is overexpressed > 2 fold in papillary thyroid carcinoma (PTC) (Table 2), which is the most common type of the thyroid cancer and frequently gives rise to cervical lymph node metastasis (Schlumberger, 1998). The research based on comparative genomic hybridization (CGH) suggested that the copy number of this gene changes at 12-48% in PTC (Kjellman et al., 2001). The DNA amplification in PTC has been found in 1q23-ter, 2, 7p, 11p15-ter, 14q, 19q, and X regions (Hemmer et al., 1999; Kjellman et al., 2001). Although GRS was also identified as a novel candidate gene implicated in hypoxia signal transduction pathway in human hepatocellular carcinoma cells (Scandurro et al., 2001), its role at molecular level awaits further investigation.

Instability at microsatellite regions (MSI) is one of the characteristics of tumors from patients having germline mutations of DNA mismatch repair genes. Through mutation analysis of the repeated sequences in the coding and 5' upstream regions of MSI-high colorectal tumors that are from the patients having hereditary nonpolyposis colorectal cancer (HNPCC) and Turcot syndrome, alteration was found at the (A)10(TA)9 in the 5` upstream region of human mitochondrial isoleucyl-tRNA synthetase (IRS) in 59% of tumors, but not in the repeated sequences of cytoplasmic IRS (Miyaki et al., 2001). With these findings, mutation of the 5' uprestream regions seems to be implicated in mitochondrial malfunctions in HNPCC and Turcot syndrome (Miyaki et al., 2001). IRS as well as glutamyl-prolyl bifunctional tRNA synthetase (EPRS) (Menssen and Hermeking, 2002) that makes interaction with IRS (Rho et al., 1996), are the target genes of c-Myc protooncogene (Fig. 3) (Coller et al., 2000).

# AMINOACYL-tRNA SYNTHETASE-INTERACTING MULTI-FUNCTIONAL PROTEINS

Several mammalian ARSs are capable of forming various protein complexes. Among them, a macromolecular complex consisting of nine different ARSs is the most intriguing (Ko *et al.*, 2002; Lee *et al.*, 2004; Park *et al.*, 2005b). This complex also harbors three non-enzymatic factors designated AIMPs (aminoacyl-tRNA synthetase-interacting multi-functional proteins). They are AIMP1, 2 and 3 that were previously named as p43, p38 and p18, respectively. Although they play scaffolding roles in the assembly of the whole complex (Han *et al.*, 2006; Kim *et al.*, 2002), they are also involved in numerous other biological processes. In the multi-ARS complex, AIMP1 associates with arginyl-tRNA synthetase (RRS), facilitating its catalytic activity (Kim *et al.*, 2000). Interestingly, AIMP1 is also secreted from different cells such as prostate cancer (Barnett, 2000) and pituitary adenomas (Bottoni *et al.*, 2005). The impaired secretion of AIMP1 in combination with the sporadic

ARSs	Related Tumor	References
GRS	Hepatocellular carcinoma cells Papillary thyroid carcinoma cells	Scandurro <i>et al.</i> , 2001 Wasenius <i>et al.</i> , 2003
MRS	Human colon cancer Sarcomas Malignant fibrous histiocytomas Malignant gliomas and glioblastomas	Kushner <i>et al.</i> , 1976 Forus <i>et al.</i> , 1994 Nilbert <i>et al.</i> , 1995; Palmer <i>et al.</i> , 1997 Reifenberger <i>et al.</i> , 1996
FRS	A subunit; preferential expression in tumorigenic human Acute-phase chronic myeloid leukemia K562 cells A-subunit mRNA : overexpressed in the same acute-phase chronic myeloid leukemia cells line Undifferentiated promyelocytic leukemia cells Chronic myeloid leukemia cells Lymphoblastic leukemia cells Burkitt's lymphoma Colorectal adenocarcinoma cells Lung carcinoma cells Melanoma cells	Lieber <i>et al.</i> , 1976 Rodova <i>et al.</i> , 1999 Rodova <i>et al.</i> , 1999
RRS	Pituitary adenoma	Bottoni et al., 2005
CRS	Inflammatory myofibroblastic tumor	Cools et al., 2002; Debelenko et al., 2003
WRS	Neuroblastoma and pancreatic cancer dells	Paley et al., 2007
AIMP1	Prostate cancer Pituitary adenomas Hela and MCF 7 cell lines	Barnett et al., 2000 Barnett et al., 2000 Barnett et al., 2000
Emapll	LNCaP and DU-145 prostate adenocarcinoma cells	Barnett et al., 2000
IRS	Aletration at the (A) 10 (TA) 9 in 5' upstream regions of human mitochondrial isoleucyl-tRNA synthetase(IRS) in 59% of tumors	Miyaki <i>et al.</i> , 2001
KRS	Breast cancer	Park et al., 2005c

expression of TNF- $\alpha$  could contribute to the progress and growth of pituitary tumors (Schwarz *et al.*, 1999). The secreted AIMP1 controls angiogenesis (Park *et al.*, 2002) and systemic administration of the purified AIMP1 suppressed cancer progression (Lee *et al.*, 2006), implying its potential as anti-cancer therapeutic agent. The AIMP1 secretion inversely correlates with RRS expression and tumor diameter, which in turn negatively correlates with Micro-RNA16-1 (miR16-1) expression in pituitary adenomas, meaning that overexpression of RRS may hold AIMP1 within the multi-ARS complex, preventing AIMP1 secretion (Bottoni *et al.*, 2005). Coincidentally, miR16-1 gene which is located at chromosome 13q14 is deleted in many pituitary adenomas (Fan *et al.*, 2001).

AIMP2 (previously designated p38 or JTV-1), is also associated with the multi-ARS complex, playing a scaffold role in the assembly of the components (Han et al., 2006; Lee et al., 2004). AIMP2 was demonstrated to downregulate c-Myc expression through the inhibitory interaction with FUSE-binding protein (FBP), a transcriptional activator of c-Myc (Kim et al., 2003). The binding of AIMP2 to FBP stimulates ubiquitination and degradation of FBP, leading to downregulation of c-Myc, which is required for the differentiation of functional alveolar type II cells. Thus, AIMP2knockout mice caused neonatal lethality due to the respiratory distress syndrome resulting from hyperplasia of lung epithelial cells. AIMP2 is also translocated into nucleus by transforming growth factor- $\beta$  (TGF- $\beta$ ). This work identified a new activity of AIMP2 as a mediator of TGF-  $\beta$  signaling and its functional importance for lung cell differentiation (Kim et al., 2003). c-Myc is one of the well-known proto-oncogenes (Castresana et al., 1992) and TGF-β signaling pathway is crippled in different types of cancers (Markowitz and Roberts, 1996). If AIMP2 mediates TGF-ß signaling to c-Myc, its inactivating mutations or abnormal expression may be associated with cancer formation. The gene encoding AIMP2 is positioned complementary to PMS2 that is known to be an oncogene (Francia *et al.*, 2004; Nicolaides *et al.*, 1995) (Fig. **1C**). It would be interesting to see whether the two proteins give an influence to the expression of their counterparts.

The smallest factor, AIMP3/p18 is bound to the multi-ARS complex through the specific interaction with MRS (Lee *et al.*, 2004). Although biological function for the interaction of AIMP3 with MRS within the complex has not been understood, its role was unveiled in the maintenance of chromosomal DNA (Park *et al.*, 2005b). AIMP3 is translocated into nucleus upon DNA damage to upregulate p53 by direct activation of ATM/ATR. While AIMP3 knock-out results in early embryonic lethality, the heterozygous mice become highly susceptible to spontaneous tumor formation at various tissues (Park *et al.*, 2005a), and AIMP3 haploid cells also showed reduced chromosome stability, and abnormal cellular and nuclear division (Park *et al.*, 2006), demonstrating its significance as haploinsufficient tumor suppressor. Thus, all of these three ARS-interacting factors appear to be functionally linked to control cancer formation with their unique mechanisms.

### TRANSLATION INITIATION FACTORS

Tanslational initiation is a central control site in protein synthesis including at least 25 different factors. Modulations of the initiation machinery including phosphorylation of initiation factors and their controlled association with other proteins can regulate both specific mRNAs and overall translation rates to affect cell growth and phenotypes (Gray and Wickens, 1998). Accumulating evidences show that eIFs may be important in the regulation of cell growth or survival in addition to translational initiation, particularly for the case of eIF2, eIF4E, eIF4G and eIF5. Also, the expression of eIFs is abnormally elevated in diverse cancers implicating their involvement in cell transformation (Fig. 2). eIF4E has been a focus as a representative multifunctional regulatory protein that control gene expression in both nucleus and cytoplasm (Wilkinson and Shyu, 2001). The involvement of eIF4E in tumorigenesis has been



**Fig. (1). Schematic representation of genomic arrangement of ARSs and AIMP2.** (A) MRS (methionyl-tRNA synthetase) and CHOP (C/EBP homologous protein) genes reside on chromosome 12q13 and share a sequence of 39 bases in their respective ends. (B) The chromosomal loci of CRS (cysteinyl-tRNA synthetase) and ALK (anaplastic lymphoma kinase) (left) and their fusion sites (right) are shown. Note the last base of the CRS portion of the sequence (G) contributes to the GTG triplet encoding valine (*red*), maintaining the in-frame translation of the ALK catalytic domain at the C terminus of the predicted chimeric protein. (C) The chromosomal loci of AIMP2/p38/JTV-1 and PMS2 are shown (left). The human AIMP2/p38/JTV-1 and PMS2 genes are located in opposite orientation with approximately 200 bp distance between their transcription start sites.



Fig. (2). Expression profile of translation initiation factors (eIFs), elongation factors (eEFs) and ribosomal proteins (RPs) in various human cancers. Translational components are overexpressed (red) or downregulated (blue) in a wide range of cancers. BC: breast cancer, CC: colon cancer, EC: esophageal cancer, GC: gastric carcinoma, HC: hepatocellular carcinoma, LC: lung cancer, ME: melanoma, NHL: non-Hodgkin's lymphoma, OC: ovarian cancer, PC: pancreatic cancer, TC: thyroid carcinoma, TS : testicular seminomas, SC: stomach cancer, KC: kideny cancer, CeC: cervical cancer, HNC: head and neck squamous cancer, IT: intracranial teratoma, OSC: osteosarcoma, PrC: prostate cancer.

shown over the past decade, and its overexpression results in dramatic phenotypic changes such as rapid cell proliferation, loss of contact inhibition, growth in soft agar and tumor formation in nude mice (Clemens, 2004; De Benedetti and Harris, 1999). It also facilitates the synthesis of two powerful tumor angiogenic factors (VEGF and FGF-2) by selectively enhancing their translation, and correlation with these angiogenic factors potentiates its possible role in angiogenesis (De Benedetti and Harris, 1999). These results were confirmed by in vivo experiments, which showed the significant increase of eIF4E in breast invasive ductal carcinomas and the islets of viable cells in the center of poorly vascularized ductal carcinomas. Also, eIF4E expression is increased in early confined breast cancer lesions by hypoxia (DeFatta et al., 1999). On the contrary, the cells with reduced eIF4E expression showed delayed, reduced invasiveness and decreased experimental metastasis in Rastransformed clone of rat embryo fibroblasts (Graff et al., 1995).

Increased level of eIF4E might have influence on the expression level of some mRNA such as the Src family member, c-Myc, cyclinD1, VEGF, and FGF-2, which have critical roles in the regulation of cell growth or survival (Clemens, 2004; De Benedetti and Harris, 1999). In addition, gene amplification of eIF4E was also observed in the majority of human non-small-cell lung cancers, some breast cancer, and some benign and maliganant tumors of head and neck (Thornton *et al.*, 2003). The human gene encoding eIF4E is mapped to chromosome 4q21-22, and frequently amplified in prostate cancer of African Americans (Cher *et al.*, 1996). Thus, the cancer-associated overexpression of eIF4E could be explained by the amplification of the encoding gene. With all of these results, eIF4E is the first human oncogene among the components of the protein translation machinery that has a critical role in various human cancers (Clemens, 2004; Thornton *et al.*, 2003).

Overexpression of eIF4G may be also related to oncogenic transformation and its expression is also increased in the squamous cell lung carcinomas with gene amplification (Clemens, 2004). The human gene encoding eIF4G is mapped to chromosome 3q27-qter (Yan and Rhoads, 1995), and amplified within 3q26-q27 in squamous cell lung carcinomas (Keiper *et al.*, 1999). Also, it is the putative target gene induced by c-Myc (Coller *et al.*, 2000) (Fig. **3**). The transcript of eIF4G2 gene is downregulated in the transitional cells of bladder carcinoma, and this downregulation is significantly associated with invasive tumors (Buim *et al.*, 2005). This gene is mapped to chromosome 11p15.3 (Imataka *et al.*, 1997). Because deletion of chromosome 11 is observed in invasive bladder tumors, this region might harbor important tumor suppressor genes (Henis-Korenblit *et al.*, 2002; Zhang *et al.*, 2004).

eIF4A is an ATP-dependent RNA helicase, allowing the 40S ribosomal subunit to bind RNA and to search for the initiation site. In mammals, three isoforms of eIF4A have been identified. Among these, eIF4A1 has been considered as a putative proto-oncogene (Eberle *et al.*, 1997). It is induced by n-Myc (Boon *et al.*, 2001) (Fig. **3**), and differentially expressed in human melanoma cells and normal melanocytes (Fig. **2**). Particularly, only eIF4A1 mRNA is consistently overexpressed in malignant melanomas (Kraehn *et al.*, 1995). Antisense RNA against eIF4A1 mRNA decreased proliferation of human melanoma cell lines although its overexpression was not sufficient for transformation of other cell lines (Eberle *et al.*, 2002).

eIF5A is phylogenetically conserved from yeast to mammalian cells (Caraglia *et al.*, 2000). Although the precise function of eIF5A in translation initiation is not known yet, the accumulated evidences suggested that it is a multifunctional protein regulated through diverse mechanisms. Its potential functions include nucleocytoplasmic shuttle for specific subsets of mRNA, mRNA stability, transport of HIV mRNA (Hofmann *et al.*, 2001), cell proliferation and apoptosis (Jakus *et al.*, 1993; Kang and Hershey, 1994; Park *et al.*, 1998; Shi *et al.*, 1996; Wang *et al.*, 2001). It is the only cellular protein known to contain the unique spermidine-derived amino acid

hypusine (at Lys50 in human eIF5A) that appears to be required for cell proliferation. Previous studies showed that mutation (Lys50Arg) or intralcellular depletion of eIF5A gene inhibits cellular proliferation (Caraglia *et al.*, 2000) and the inhibition of deoxy-hypusine synthase impedes the growth of several cell lines, including malignant human cell. Hypusine-containing eIF5A promotes the association of a subset of proliferation-related mRNAs with polysomes facilitating translation, and with putative motifs of hypusine-dependent mRNAs which are located in the UTRs of cyclin D1 (Hanauske-Abel *et al.*, 2002) or cyclooxygenase-2 mRNA (Parker and Gerner, 2002) that are essential in cell cycle and cancer, respectively.

eIF5A exists as two or more isoforms in many eukaryotic organisms (Jenkins et al., 2001). In human, the two isoforms, eIF5A1 and eIF5A2, share 84% of amino acid identity, but their encoding genes are mapped to chromosomes 17p12-13 (Steinkasserer et al., 1995) and 3q26.2 (Guan et al., 2001), respectively. Recent studies suggested that both isoforms are implicated in certain types of human cancers. eIF5A1 is highly expressed in lung and some ovarian cancers (Chatterjee et al., 2006; Chen et al., 2003) (Fig. 2) and responsive to c- or n-Myc stimulation (Boon et al., 2001; Coller et al., 2000; Menssen and Hermeking, 2002) (Fig. 3). The eIF5A2 expresison is also enhanced in testis and colon cancers (Guan et al., 2001; Jenkins et al., 2001) (Fig. 2). Especially, amplification of 3q26 is one of the most frequent chromosomal alterations in various solid tumors containing ovarian cancer, suggesting the presence of one or more oncogenes in this region (Forozan et al., 2000). Interestingly, the eIF5A2 gene has been isolated from a frequently amplified region at 3q26.2 using chromosome microdissection-hybrid selection method (Guan et al., 2001), and its tumorigenic ability was confirmed by anchorage-independent growth in soft agar and tumor formation in nude mice as well as using antisense DNA of eIF5A2 in ovarian cancer cell line (Guan et al., 2004). eIF5A2 plays an important role in eukaryotic cell survival (Clement et al., 2003), and its overexpression is associated with the advanced stage of ovarian cancer (Guan et al., 2004). All of these results suggest that eIF5A1 and eIF2 might play an important role as putative oncogene in ovarian cancer.



n-Myc-induced Factors c-Myc-induced Factors

Fig. (3). Myc regulates the expression of proteins involved in translation. Many translational factors are upregulated in Myc-overexpressing cells. S3, S6, S12, S19, S27, L3, L6, L32, L35 and eIF5A1 are increased by both of c-Myc and n-Myc.

Deregulation of eIF2 $\alpha$  might be related to tumorigenesis. Phosphorylation of eIF2 $\alpha$  through activation of eIF2 $\alpha$  kinase such as PKR and HCR decreases the initiation of translation. The enforced expression of either nonphosphorylatable eIF2 $\alpha$  (S51A mutant) or dominant negative PKR mutant cause malignant transformation of NIH3T3 cells and the development of tumors in nude mice (Clemens, 2004). The elevated expression of eIF2 $\alpha$  has been also

shown in the diverse cancers (Fig. 2). Highly expressed  $eIF2\alpha$  is redistributed towards nucleus in gastrointestinal carcinomas and it is also highly expressed in c-Myc, v-Src, and v-abl-transformed cells, together with eIF4E (Rosenwald, 1996).

Eukaryotic initiation factor eIF3 contains at least thirteen nonidentical subunits, named from eIF3a to eIF3m with an apparent mass of approximately 700 kDa, and plays an essential role in the rate-limiting initiation phase of translation (Mayeur et al., 2003; Zhang et al., 2007). Aberrant mRNA and protein levels of several eIF3 subunits have been detected in a wide variety of solid tumors and cancer cell lines. Especially, increased mRNA and protein levels of the eIF3a, b, c, h and i subunits have been detected in a wide variety of human tumors, and frequently identified as prognostic biomarkers for poor clinical outcome, suggesting that these initiation factors may be promising therapeutic targets for treating cancer. The decreased expression of eIF3a in human lung cancer cell line and breast cancer cell line significantly reversed their malignant growth phenotype (Dong et al., 2004), and different isoforms of eIF3a are overexpressed in mouse melanoma and Hela cells, human breast, cervical, esophageal, lung and gastric cancers (Zhang et al., 2007). eIF3c is overexpressed in testicular seminomas and breast adenocarcinoma cells (Joseph et al., 2004; Rothe et al., 2000). Although its function and mechanism in tumorigenesis are unclear, some studies suggested that loss of chromosome 16p region containing the eIF3c gene correlates with seminomas (Summersgill et al., 1998). eIF3e is important in the regulation of cell proliferation and highly conserved subunit through evolution (Burks et al., 2001). It is encoded by the Int6 gene, a common integration site of mouse mammary tumor virus leading to the production of a truncated eIF3e (Miyazaki et al., 1997). In contrast with the full-length eIF3e, overexpression of truncated eIF3e causes the malignant transformation on mammary epithelial cells and NIH3T3 cells, and injection of these cells leads to tumor development in nude mice (Mayeur and Hershey, 2002). However, another study showed that eIF3e expression was reduced in primary human breast and non-small cell lung carcinomas (NSCLC), which frequently exhibits LOH at the eIF3e locus (Buttitta et al., 2005). Since many portions among NSCLC tumor samples were hypermethylated in the transcription promoter and first exon region, eIF3e expression might represent new prognostic marker in the patients with stage I of NSCLC (Buttitta et al., 2005). Interestingly, subcellular localization of eIF3e is cell-cycle dependent, being maximal in nucleus of early S phase, and different between primary human fibroblasts and transformed counterparts. Therefore, deregulation in subcellular localization of eIF3e may be a feature of malignant human cells (Watkins and Norbury, 2004). eIF3h is overexpressed in breast and prostate cancer (Caraglia et al., 2000). Many studies with CGH showed that the most common chromosomal aberrations are the loss of 1p, 6q, 8p, 10q, 13q, 16q and 18q, and gain of 1q, 2p, 7, 8q, 18q and Xq in prostate cancer (Visakorpi, 2003). Particularly, the gain of 8q was also a common genetic alteration in breast and prostate cancers (Isola et al., 1995; Sato et al., 1999). CGH analysis confirmed that there are at least two independently amplified subregions, 8q21 and 8q23-q24, suggesting the presence of several amplified target genes (Nupponen et al., 1998), including the wellknown c-Myc oncogene at 8q24.1. However, eIF3h amplification is not always associated with c-Myc amplification in breast and hepatocellular carcinoma (Okamoto et al., 2003). Using the suppression substractive hybridization analysis, eIF3h was identified to be overexpressed in breast cancer cell line as well as prostate and breast tumors (Joseph et al., 2004; Nupponen et al., 1998) (Fig. 2). Based on these studies, eIF3h appears to be the strongest target gene in the gain of 8q (Savinainen et al., 2004). Particularly, eIF3h may be also involved in progression of prostate and hepatocellular carcinomas (Okamoto et al., 2003; Saramaki et al., 2001). Since eIF3h was identified as a target gene of n-Myc (Boon et al., 2001) (Fig. 3), genomic aberrations of eIF3h might contribute to the pathogenesis of breast, prostate and hepatocellular carcinomas. Human eIF3i showed 99% similarity to the predicted protein of mouse TIF3 cDNA (GeneBank accession number AF271072) which was identified as a novel cadmium chloride (CdCl<sub>2</sub>)-responsive protooncogene (Joseph *et al.*, 2002). Its oncogenic potential was confirmed by several *in vitro* experiments and tumor formation in nude mice. Expression of antisense RNA against TIF3 mRNA resulted in the reversal of oncogenic potential of the CdCl<sub>2</sub>-transformed BALB/c-3T3 cells, suggesting its therapeutic potential especially to CdCl<sub>2</sub>-induced cancer cells (Joseph *et al.*, 2004).

#### **ELONGATION FACTORS**

The elongation phase of translation consists of two kinds of eukaryotic elongation factors (eEFs), eEF1A and B, to recruit the aminoacyl-tRNAs to the A-site of the ribosome, and eEF2 to mediate the translocation step of ribosome (Galasinski and Moldave, 1969; Kaziro *et al.*, 1991; Moldave, 1985; Taira *et al.*, 1972). eEFs are also implicated in various cellular processes or diseases involving translational control, signal transduction, cytoskeletal organization, apoptosis, autoimmune disease, oncogenic transformation, nutrition, and nuclear processes such as RNA synthesis and mitosis (Ejiri, 2002). Furthermore, some eEFs including eEF1A1, eEF1B $\alpha$ , eEF1B $\beta$ , eEF1B $\gamma$ , eEF2 and the mitochondrial elongation factor Tu are the target genes for n-Myc (Boon *et al.*, 2001) (Fig. **3**).

eEF1 consists of four different subunits (1A, 1B $\alpha$ , 1B $\beta$  and 1B $\gamma$ ) in mammals (Thornton *et al.*, 2003). Among them, eEF1A exists as two different isoforms (eEF1A1 and eEF1A2) that are expressed in tissue-specific manner. eEF1A1 and A2 share more than 90% of DNA and protein sequences, and have the same enzymatic function. While eEF1A1 is widely expressed, eEF1A2 expression is restricted to brain, heart, and skeletal muscle for unknown reason (Thornton *et al.*, 2003).

eEF1A1 enhances the rate of both spontaneous and chemically induced transformation of mouse and hamster fibroblasts and altered expression of eEF1A1 has been suggested to be linked to transformation phenotypes through several independent studies (Gopalkrishnan et al., 1999; Lamberti et al., 2004). The expression of eEF1A1 was elevated in the breast, colon, lung, pancreas, and stomach tumors (Fig. 2). Overexpression of eEF1A1 was also observed in human head and neck carcinoma cell lines and bronchial epithelial cells transformed with benzopyrene diolepoxide (Johnsson et al., 2000). Furthermore, overexpression of eEF1A1 seems to be correlated with the increased metastatic potential in rat mammary adenocarcinoma through its interaction with actin. Following the stimulation with epidermal growth factor, there is a parallel increase in the amount of F-actin and eEF1A1 associated with cytoskeleton. It has been suggested that a loose association of eEF1A with actin may be related to the metastatic process via an altered organization of the actin cytoskeleton and the differential translation of mRNAs associated with cytoskeleton. Since eEF1A1 associates with cellular structures including cytoskeleton and mitotic apparatus, its noncanonical activity is also thought to be closely related to apoptosis and carcinogenesis (Ejiri, 2002). Furthemore, differential RNA display experiment identified that prostate tumor-inducing gene 1 (PTI-1) contains eEF-1A1 sequence with truncated N-terminal residues to amino acid 68 and six additional point mutations (Gopalkrishnan et al., 1999). Since PTI-1 has been proposed as new class of oncogene, this finding adds another evidence to the implication of eEF1A1 for cell transformation.

The human eEF1A2 gene is mapped to 20q13.3, and this region frequently exhibits the amplification in breast, colorectal and ovarian tumors. The amplification of this region in breast and ovarian tumors are associated with poor clinical prognosis and increased tumor aggressiveness. Recently, several studies have suggested that eEF1A2 is a potential oncogene having many oncogenic properties such as the enhancement of foci formation, anchorage-independent growth and the decreases of the doubling time of rodent fibroblasts. Also, eEF1A2 is frequently overexpressed in ovarian tumors, but not detectable in normal ovary (Abbott and Proud, 2004; Thornton *et al.*, 2003) (Fig. **2**). Overexpression of eEF1A2 is also exhibited in 20-35% of human cancer tissues originating from colon, lung, rectum, ovary and kidney (Joseph *et al.*, 2004), while eEF1A1 expression level was unchanged. Interestingly, ectopic expression of eEF1A2 caused transformation of mouse and rodent fibroblasts, and allowed them to grow as tumors when xenografted into mice. Recent analysis of expression profile in 10 different human cancer cell lines revealed that eEF1A2 mRNA is overexpressed in nine cancer cell lines except for malignant melanoma cells. Particularly, its expression was increased as high as approximately 2000-fold in the lung adenocarcinoma cells. Nonetheless, its molecular mechanism in oncogenesis is not fully understood.

eEF1Bβ (eEF-1δ) is overexpressed in CdCl<sub>2</sub>-transformed BALB/c3T3 cells and ectopic expression of eEF1Bß protein seems to be also related to oncogenic transformation (Thornton et al., 2003). In addition, overexpression of eEF1B<sub>β</sub> has been observed in diverse cancers (Fig. 2). In case of oesophageal carcinoma, overexpression of eEF1B $\beta$  might be related to lymph node metastasis, advanced disease stages and poorer prognosis for patients (Thornton et al., 2003). Interestingly, its expression pattern exhibits reverse correlation with that of the TSG 14-3-3 sigma in NSCLC, implying the altered expression of both proteins might be involved in lung carcinogenesis (Liu et al., 2004). The cDNA encoding the part of the C-terminal domain of human eEF1B $\beta$  has been isolated from mammarian cancer cells by substractive hybridization (Caraglia et al., 2000). eEF1B $\gamma$  (eEF-1 $\gamma$ ) and eEF1B $\alpha$  (eEF-1 $\beta$ ) are also known to be related to cancers with more circumstantial evidences (Thornton et al., 2003) and their overexpressions have been also observed in diverse cancers (Fig. 2). Like eEF1 components, eEF2 also exhibits the enhanced expression in hepatocellular carcinoma (Caraglia et al., 2000) (Fig. 2).

#### **RELEASING (TERMINATION) FACTORS**

In eukaryotic cells, this process requires two classes of eukaryotic Releasing Factors (eRFs), eRF1 and eRF3 (Caraglia *et al.*, 2000; Nakamura *et al.*, 1996). The three types of termination codons are directly recognized by eRF1 to release a synthesized polypeptide chain from ribosome. Recent evidences suggest the potential association of eRFs with the development or progression of cancer although the responsible mechanisms await further investigation.

The eRF1 gene is mapped to 5q31 that contains unidentified genes responsible for genetic or malignant disorders (Guenet *et al.*, 2000). Interstitial deletion of the long arm of chromosome 5q causes recurrent abnormality, mainly concerned with myelodysplastic syndrome and acute myeloid leukemia (AML) (Boultwood *et al.*, 1994). From the aspect of its role in translation termination, deficiency of eRF1 could cause the poor recognition of stop codons, resulting in the read-through with the production of potentially oncogenic aberrant proteins. The eRF1 gene may be myeloid TSG based on the analyses of the human AML cell line HL60, and of the patients suffering from malignant myeloid diseases with cytogenetically defined abnormalities of chromosome 5 (Dubourg *et al.*, 2002).

eRF3 is a GTP-binding releasing factor containing guanine nucleotide binding motifs and has significant sequence homology to the prokaryotic EF-G and EF-Tu. It is a multi-functional protein involved in cell cycle regulation, mRNA decay, cytoskeleton organization, recycle of ribosomes and apoptosis (Hoshino *et al.*, 1999). Like eIFs and eEFs, eRF3 was described to associate with cancer. Overexpression of eRF3 in interstinal type gastric tumors is likely to be involved in tumorigenesis through dysregulating cell cycle, apoptosis, or transcription (Malta-Vacas *et al.*, 2005). The 12 glycine allele was exclusively detected in cancer patients, who have a 20-fold increased risk for gastric cancer, suggesting polyglycine expansion may have a potential role in regulating eRF3 expression

and/or changing the protein function that can lead to gastric cancer development (Brito *et al.*, 2005). Such several trinucleotide repeats have been associated with oncological pathologies, for example androgen receptor gene polymorphisms (Tran *et al.*, 2004).

#### **RIBOSOMAL PROTEINS**

The eukaryotic ribosome is composed of four rRNAs and about 80 different ribosomal proteins (RPs) (Woese, 1998; Wool, 1996), while E. coli ribosome contains about 54 different RPs (Nakao, et al., 2004). Interestingly, many RPs are involved in extraribosomal functions such as DNA damage repair, replication, transcription, RNA processing, cell growth, apoptosis, transformation and inflammation (Wool et al., 1990; Wool, 1996). Changes in gene expression of specific RPs have been reported in several pathologies including various cancers, abnormal blood cell differentiation, Turner syndrome and Diamond-Blackfan anemia (Ruggero and Pandolfi, 2003). Overexpression of several RPs is shown in diverse cancers (Fig. 2) through the de-regulation at transcriptional (Mager, 1988) or translational level (Kasai et al., 2003). Recently, several hundered lines of zebra fish, each heterozygous for a recessive embryonic lethal mutation, were generated to identify the genes involved in tumorigenesis (Amsterdam et al., 2004). From the analysis, the heterozygous mutations in 11 different RP genes containing S7, S8, S15a, S18, S29, L7, L13, L23a, L35, L36 and L36a predisposed zebrahfish to cancer. Since the wild-type allele appeared to be present and did not contain point mutations in the tumors, these results strongly suggest that these 11 genes should be considered as haploinsufficient tumor suppressor genes.

S3a plays an important role in cell transformation and death (Naora, 1999) and is highly expressed in tumor cell lines and tumor tissues. Although ectopic expression of S3a caused transformation of the NIH3T3 cells, it only occurred when S3a overexpressing cells were in close contact, implying that S3a might be involved in cell transformation, but not function as an oncogene. This notion has been supported by the studies that ectopic expression of *fte-1*, the rat homolog of human S3a, failed to induce cell transformation in normal Rat-1 fibroblast cells, but restored the transformed phenotype in revertant v-fos-transformed Rat-1 fibroblasts cells in which endogenous fte-1 was disrupted. Thus, the ability of enhanced S3a expression to induce transformation apparently requires the cooperative effect of the additional signals. Although the molecular mechanim of S3a still remains to be elucidated, it may facilitate an upregulation of oncoproteins or have an extraribosomal function related to cell transformation.

There are substantial evidences suggesting the implications of other RPs in both promoting or inhibiting oncogenic transformation and tumor development. The *Drosophila* homologue of human S29 significantly enhances tumor suppressor of Krev-1 protein on v-K-*Ras*-transformed fibroblasts, contrasting to those of *fte-1* (Naora, 1999). Recent study suggested that S29 induces apoptosis in NSCLC and augments the effect of anticancer. S6 is implicated in control of cell growth and proliferation. Mutations in *Drosophila* homologue of human S6 caused melanonic tumors formation, lymph gland hyperplasia, and abnormal blood cell differentiation in hematopoietic system, implying its potential tumor suppressive activity (Ruggero and Pandolfi, 2003).

Wilm's tumor is a pediatric nephroblastoma that is derived from embryonal kidney stem cells, and associated with genetic alterations in the 11p13 and 11p15 regions (Beckwith, 1983). Through substrative cDNA/RNA hybridization between the tumorigenic parent and a nontumorigenic microcell hybrid containing the der (11) chromosome, the putative Wilm's TSG was isolated and designated as QM. The QM-encoded L10 is the mammalian homolog of chicken jun-binding protein (Jif-1), which is a negative regulator of Jun (Chan *et al.*, 1996). QM interacts with protooncogene c-Yes, and these two proteins are colocalized in several tumor cell lines (Oh *et al.*, 2002). By protein-protein interaction, QM blocks the c-Yes kinase activity by inhibiting its autophosphorylation, thereby suppressing malignant transformation.

L5. L11 and L23 are associated with oncoprotein MDM2 to form quadruple complex, which stabilizes and activates p53 by inhibiting HDM2-mediating p53 suppression (Dai et al., 2004). Ectopic expression of L5, L11, and L23 reduced HDM2-induced p53 ubiquination, and induced p53-dependent G1 cell cycle arrest. These results suggest the possibility that some RPs is another regulator of the p53-HDM2 feedback regulation. LOH of L14 has been observed in esophageal squamous cell carcinomas, lung cancer, and squamous cell carcinomas of head and neck (Huang et al., 2006). The L14 gene is mapped to chromosome 3p21.3 region, and L14 protein contains a basic region-leucine zipper-like domain and polymorphic GCT repeats coding polyalanine tract. Allelic loss of chromosome 3p has been observed in multiple malignancies containing carcinoma of breast, female genital tract, kidney, lung, oral cavity, testis, and squamous cell carcinomas of head and neck and esophagus. Tumorigenicity of these carcinoma cell lines was suppressed by the introduction of chromosome 3p and 3p21 fragments (Uzawa et al., 1995). Several TSGs such as FHIT, RASSF1A, RAR- $\beta$  and VHL have been identified in these regions (Kuroki et al., 2003). Recently, alterations of the L14 gene at DNA and RNA levels were observed in esophageal squamous cell carcinomas (Huang et al., 2006).

Ectopic expression of mitochondrial L41 (MRPL41) inhibited the growth of tumor cells (Yoo *et al.*, 2005) and MRPL41 expression was reduced in most tumor tissues. The tumor suppressor effect of MRPL41 might be expressed in association with p53 and  $p27^{Kip1}$ . It increases the accmulation of p53 at the posttranslational level and induces cell cycle arrest at the G1 phase *via* the augmentation of  $p27^{Kip1}$  expression in the absence of p53 (Yoo *et al.*, 2005). MRPL41 arrests cell cycle by increasing the  $p21^{WAF1/CIP1}$  and  $p27^{Kip1}$  levels under the growth inhibitory conditions (Kim *et al.*, 2005) and induces apoptosis by interacting with Bcl-2 (Chintharlapalli *et al.*, 2005). The MRPL41 gene is mapped to chromosome 9q34.3 region, which frequently exhibits a LOH in a wide range of tumors including bladder and lung cancer (Hornigold *et al.*, 1999; Suzuki *et al.*, 1998).

A chimeric protein containing the N-terminal trans-activating sequences of L7a and the truncated receptor kinase domain of the trk proto-oncogene was identified in breast carcinoma. The chimeric protein is tightly associated with ribosomes in trk-2htransformed cells, and such localization has been suggested to be crucial for oncogene activation (Naora, 1999). Overexpression of L7a is shown in colorectal cancer and prostate carcinomas (Fig. 2). 37LRP/p40 has been identified as a precursor of the metastasisassociated 67 kDa laminin receptor (ribosomal protein SA), whose enhanced expression is associated with tumor invasion and metastatic potential (Naora, 1999). Overexpression of L18 causes to deregulate cell growth through the inhibition of PKR activity (Kumar et al., 1999). PKR provides a control step in the regulation of protein synthesis initiation through phosphorylation of  $eIF2\alpha$ . Kumar et al., (1999) suggested that L18 interacts with PKR, inhibiting both of PKR autophosphorylation and PKR-mediated phosphorylation of eIF2 $\alpha$ . L18 is highly expressed in colon carcinoma (Fig. 2). Thus, L18 may promote protein synthesis and cell growth in certain cancers through the inhibition of PKR activity.

p53 was previously found to be covalently linked to 5.8S rRNA (Fontoura *et al.*, 1992) and to be part of a ribonucleoprotein complex consisting p53, L5 and 5S rRNA (Marechal *et al.*, 1994). In fact, L37, S2 and P1 are highly expressed in human colon carcinoma-derived p53 mutant cell line (Loging and Reisman, 1999). p53 also regulates the expression levels of some RP genes (Budde and Grummt, 1999). Expression of L37 and PO showed the greatest increase in gastrointestinal tumors (Fig. **2**). S11 and L7 are highly expressed in carcinoma cells (Kasai *et al.*, 2003). S11 is downregulated in staurosporine-induced apoptotic human breast carcinoma

MCF7 cell line (Nadano *et al.*, 2001). Given that colorectal carcinogenesis is relate to the inhibition of apoptosis (Tsujitani *et al.*, 1996), this result implies that overexpression of S11 might inhibit apoptosis of colon cancer cells. In contrast to S11, the constitutive expression of L7 in Jurkat T-lymphoma cells caused an arrest in G1 phase and induced apoptosis (Neumann and Krawinkel, 1997). S30 is the intriguing protein because this protein is encoded as fusion protein by *fau* gene, a putative tumor suppressor with an ubiquitinlike protein (Michiels *et al.*, 1993). The *fau* gene has an antisense sequence of the *fox* gene in the Finkel-Biskis-Reilly murine sarcoma virus. Thus, expression of the *fox* gene gave the same effects like the antisense *fau* gene and increased the transforming capacity of the virus. Similar results demonstrated that low expression of fau protein sensitized cells to carcinogenicity of arsenite (Rossman and Wang, 1999).

Human L3 together with N-myristoyltransferase 2, retinoblastoma-like 2 and cyclin G2 was found to contain the positive correlation with telomerase activity (Bergqvist et al., 2006). Telomerase activity is upregulated during cancer progression in several malignances and more aggressive tumor type (Usselmann et al., 2001), and recent microarray analysis identified that some genes are involved in progression and regulation of telomerase activity and correlated with telomerase activity in several esophageal carcinoma cell lines (Bergqvist et al., 2006). RPs are also thought to be involved in multidrug resistance (MDR) in some tumors. For example, the phosphorylated form of S3a is immunoprecipiated with Bcl-2 from acute myeloblastic leukemia blasts treated by all-trans retinoic acid, and S3a expression level shows correlation with both Bcl-2 and cell growth (Hu et al., 2000) (Table 3). Overexpression of S13 and L23 have been identified in MDR gastric cancer cells suggesting the possibility as the regulators that control the responses to chemotheraphy (Shi et al., 2004). In particular, L23 may promote MDR through the regulation of GST-mediated drugdetoxifying system. S28 was upregulated by cisplatin treatment along with EF-1a (Johnsson et al., 2000), L4 and L5 were induced in the doxorubicin-resistant human colon carcinoma cell line (Bertram et al., 1998), and L6 and L7a were overexpressed in adriamycin-resistant gastric cancer cells (Du et al., 2003; Zhao et al., 2002). Increase of L7a expression was also found in paclitaxelresistant human head and neck cancer cell lines (Schmidt et al., 2006). L36 and L36aL (L36-related gene) showed the altered expression in cisplatin-resistant human epidermoid carcinoma cells, reflecting their potential association with cisplatin-resistance (Shen et al., 2006) (Table 3).

The myc oncogene family such as c-Myc, l-Myc and n-Myc are amplified, mutated, overexpressed and/or rearranged in many human tumor types. Myc appears to directly regulate ribosome biogenesis through the transcriptional control of RPs (Ruggero and Pandolfi, 2003) (Fig. 3), implying Myc proteins as major regulators of protein synthesis machinery. Among RPs, nine have been identified to be induced by both of n-Myc and c-Myc (Fig. 3).

#### CONCLUSION AND FUTURE DIRECTIONS

The pathological linkage of translational system to tumorigenesis can be viewed from a few different perspectives. The most straigtforward interpretation would be the abnormal promotion of protein synthesis due to the overexpression of translational components, which may result in uncontrolled cell proliferation. Additionally or alternatively, the fidelity of protein synthesis can be affected by the disturbance of translation system, which can be propagated to various diseases including cancer. However, neither of them seems to fully explain the reason for the cancer-specific aberrant expression of specific translational components. In addition, while most of these translational components are featured by their oncogenic properties, quite a few of them work as tumor suppressors. Thus, although the association of translational factors with tumorigenesis may result from their regulatory roles in global or local

RPs	Multidrug-Resistant Tumor	References
S3a	Acute myeloblastic leukemia/Cytosine arabinoside, Doxorubicin	Hu et al., 2000
S13	Gastric cancer cells/Adriamycin, Vincristine, 5-fludrouracil	Shi et al., 2004
S28	Head and neck cancer cells/Cisplatin	Johnsson et al., 2000
L4	Colon carcinoma cells /Doxorubicin	Bertram et al., 1998
L5	Colon carcinoma cells /Doxorubicin	Bertram et al., 1998
L6	Gastric cancer cells/Adriamycin	Du et al., 2003, 2005
L7a	Gastric cancer cells/Adriamycin, Head and neck cancer cells/Taxol	Zao et al., 2002 Schmidt et al., 2005
L23	Gastric cancer cells/Adriamycin, Vincristine, 5-fludrouracil	Shi et al., 2004
L36	Epidermoid carcinoma cells/Cisplatin	Shen et al., 2006
L36aL	Epidermoid carcinoma cells/Cisplatin	Shen et al., 2006

Table 3. Ribosomal Proteins Selectively Increased in Drug-Resistant Tumors

protein synthesis, it could be due to their noncanonical activities apart from protein synthesis. Since translational system must have emerged early in evolutionary history, the components should have higher chance to adopt additional activities, thereby being linked to diverse processes. Accumulating evidences reveal the intimate correlation between the deregulation and aberration in the multifunctionality of translational components and cancer formation, and suggest that the components of the translational machinery or signal transduction pathways involved in translational initiation could be promising targets for cancer therapy. As an example, inhibitors of the mammalian Target of Rapamycin (mTOR) showed some preliminary activity in clinical trials, giving a hope that we may be able to identify better and more reliable markers or new therapeutic targets for cancer therapy among translational components. So far, the functional promiscuity of the translational factors and their physiological or pathological implications have been studied on individual basis but rarely from systematic point of view. Since we now have sufficient data suggesting the tight association of these factors with tumorigenesis and technical tools to analyze them at more systematic level, it is possible to look into the whole translational machinery as a system to find any physiological or pathological correlation between the components during tumorigenesis. The linkage information of the translational components would provide the new way to determine cancer type and status or suggest promising targets for cancer treatment.

# ABBREVIATIONS

AIMPs	=	ARS-interacting multifunctional proteins
ALK	=	Anaplastic lymphoma kinase
AML	=	Acute myeloid leukemia
ARS	=	Aminoacyl-tRNA synthetase
CdCl <sub>2</sub>	=	Cadmium chloride
CGH	=	Comparative genomic hybridization
CHOP	=	C/EBP homologous protein
CRS	=	Cysteinyl-tRNA synthetase
ECs	=	Endothelial cells
eEFs	=	Eukaryotic elongation factors
eIFs	=	Eukaryotic Initiation factors
eRFs	=	Eukaryotic releasing factors
ERK1/2	=	Extracellular signal-regulated kinase
EPRS	=	Glutamyl-prolyl bifunctional tRNA synthetase
FBP	=	FUSE-binding protein
FRS	=	Phenylalanyl-tRNA synthetase

GRS	=	Glycyl-tRNA synthetase
HNPCC	=	Hereditary nonpolyposis colorectal cancer
IFN-γ	=	Interferon-y
IMT	=	Inflammatory myofibroblastic tumor
IP-10	=	Interferon inducible protein 10
IRS	=	Isoleucyl- tRNA synthetase
KRS	=	Lysyl-tRNA synthetase
LOH	=	Loss of heterozygosity
MDR	=	Multidrug resistance
Met-tRNA <sub>i</sub>	=	Initiator methionyl-tRNA
MIG	=	Monokine induced by IFN-γ
miR16-1	=	Micro-RNA16-1
MRPL41	=	Mitochondrial ribosomal protein L41
MRS	=	Methionyl-tRNA synthetase
MSI	=	Microsatellite regions
NSCLC	=	Non-small cell lung carcinomas
PTC	=	Papillary thyroid carcinoma
PTI-1	=	Prostate tumor-inducing gene 1
RP	=	Ribosomal protein
RRS	=	Arginyl-tRNA synthetase
TAM	=	Tumor-associated macrophages
TGF-β	=	Transforming growth factor-β
TNF-α	=	Tumor Necrosis Factor α
TSG	=	Tumor suppressor gene
UTR	=	Untranslated region
WRS	=	Tryptophanyl-tRNA synthetase

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#### Aminoacyl-tRNA Synthetases, Translational Components and Tumorigenesis

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#### Aminoacyl-tRNA Synthetases, Translational Components and Tumorigenesis

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