



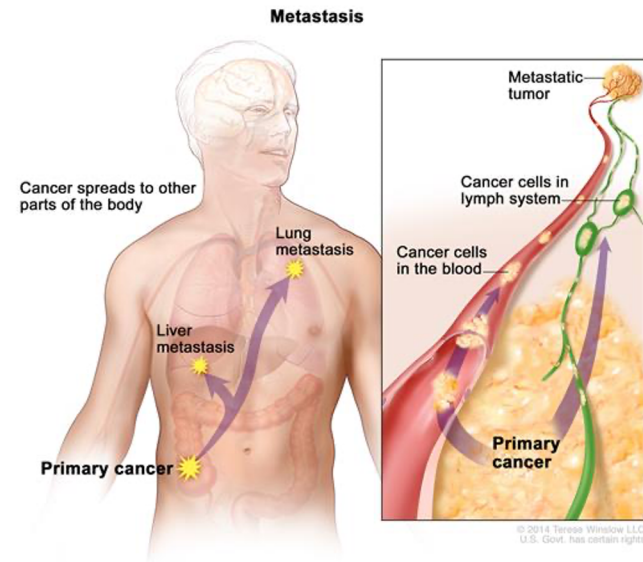
# Investigating the combined effects of natural killer cell enhancement and platelet inhibition on cancer metastasis rates

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# Introduction to Metastasis

- Metastasis is the leading cause of treatment failure in cancer treatments [1]
- There is currently no effective treatment option available for individuals with this advanced stage of the disease [2]

[1] C. N. Qian, *et al.*, 2017. [2] M. Iizumi, *et al.*, 2008. [3] American Association for Cancer Research, 2015. [4] National Institutes of Health, 2020.



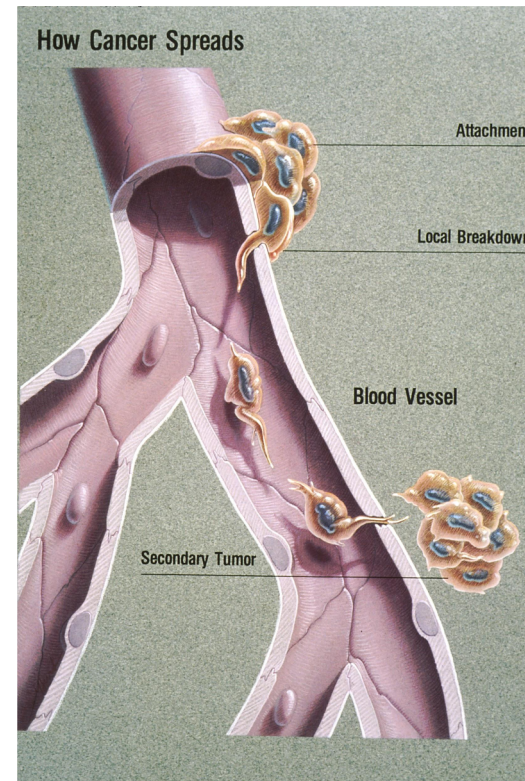
[3]

90%  
of cancer deaths are a result  
of **metastatic disease.**

[4]

## Mechanism of Metastasis

- The majority of metastasis occurs through the bloodstream [5]
- Extravasation of cancer cells into neighbouring tissues is the rate-limiting step of the process [6]

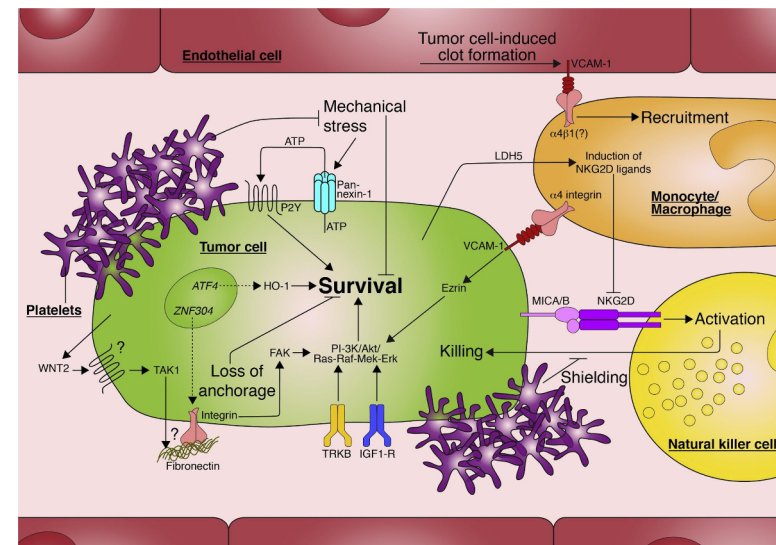


[5] B. Strlic, *et al.*, 2017.

[6] Proceedings of the National Academy of Sciences of the United States of America, 2000.

## Metastasis Prevention Studies

- Targeting cancer cells in the bloodstream: activate NK cells [7], inhibit platelet activation [8][9]
- Combination therapy involving the two strategies has yet to be researched [5]



[5]

[5] B. Strilic, *et al.*, 2017. [8] J. S. Miller *et al.*, 2005.

[8] M. Z. Woitukiewicz, *et al.*, 2017. [9] A. L. Pana *et al.*, 2019.


## Hypothesis

Given that the inhibition of platelet activation and enhancement of natural killer cell cytotoxicity have been shown to negatively affect cancer cell growth and metastasis, it is predicted that

**inducing both effects will result in a greater tumour cell response than either strategy alone.**


## Hypothesis

Specifically, it is hypothesized that the addition of interleukin-2 and Aspirin to a culture of KHYG-1 NK cells, MDA-MB-468 breast cancer cells and platelets will result in

**decreased MDA-MB-468 cell survival over a predetermined period of time, when compared to the effects of interleukin-2 or Aspirin alone.**

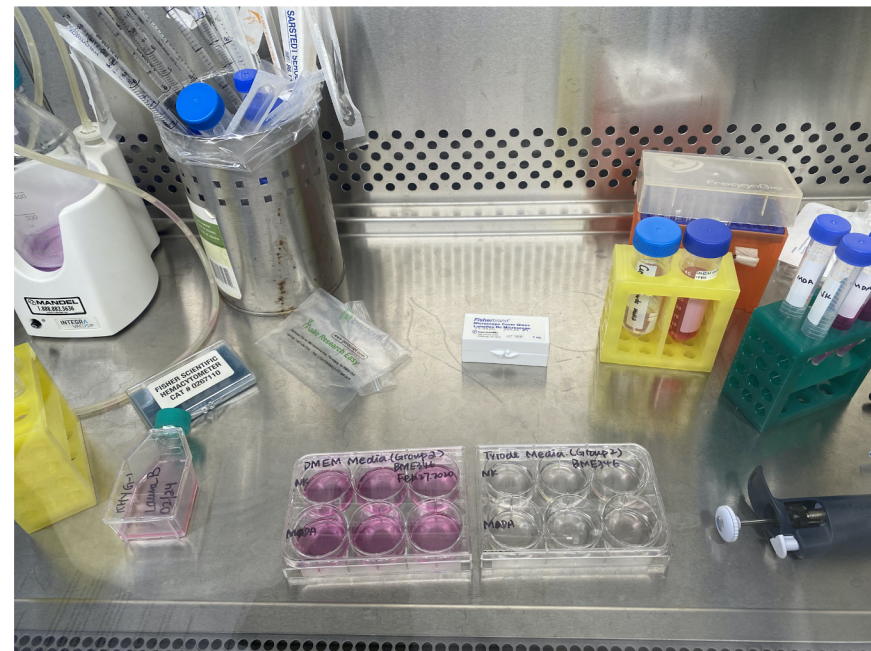
  


## Specific Aims/Objectives

- 1) Determine a **method for co-culturing** platelets, cancer cells and natural killer cells in a compatible culture medium
- 2) Determine the **length of time** over which the effects of interleukin-2 and Aspirin occur after being added to the cell culture
- 3) Determine the **mechanism** by which cancer cell survival is primarily affected

## Methods

- Assembly of the culture media
- Experimental design
- Co-culturing
- Experimental techniques
- Experimental plan







## Methods - Assembly of Culture Media

- Require a media that does not cause platelet activation (no calcium)
- Assembled a modified Tyrode's buffer solution without  $\text{CaCl}_2$  and added HEPES buffer, according to literature [9][10]

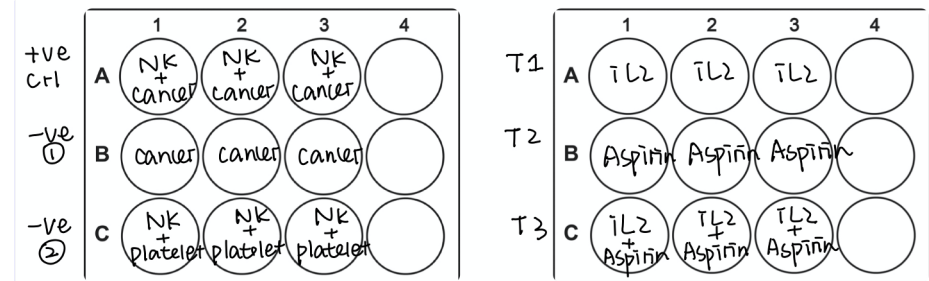
NaCl	137 mM
KCl	2.7 mM
MgCl	1.0 mM
2HPO4	0.2 mM
NaHCO3	12 mM
Glucose	5.5 mM
HEPES	25 mM



## Methods - Experiment Design

Positive Control	Negative Control 1	Negative Control 2	Test Case 1	Test Case 2	Test Case 3
KHYG-1 NK MDA-MB-468	MDA-MB-468	KHYG-1 NK MDA-MB-468 Platelets	KHYG-1 NK MDA-MB-468 Platelets  IL-2	KHYG-1 NK MDA-MB-468 Platelets  Aspirin	KHYG-1 NK MDA-MB-468 Platelets  IL-2 Aspirin

## Methods - Culturing

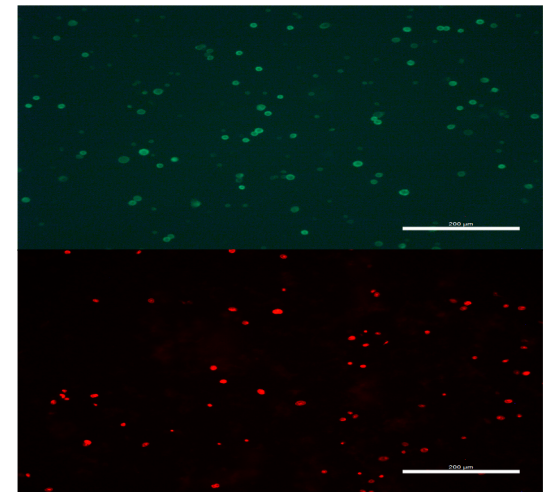


\*All test cases are co-culture of MDA-MB-468 cancer cells, KHYG-1 NK and platelets

- Each case was plated in triplicate on a 12-well plate, with 0.5 mL of each cell type at 100 000 cells/mL and 0.1 mL of platelets at stock concentration
- IL-2, Aspirin added in concentrations of 0.01 mg/L and 325 mg/L, respectively

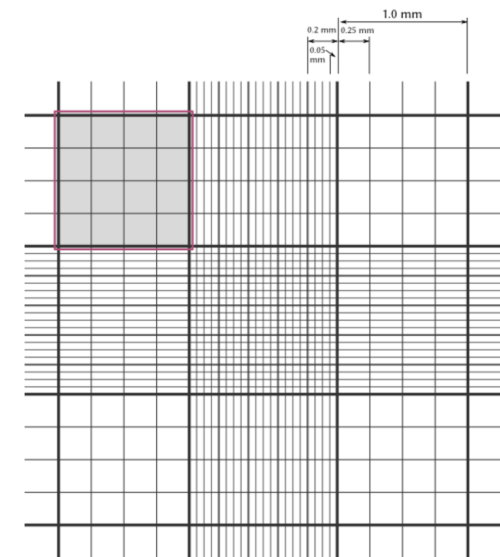
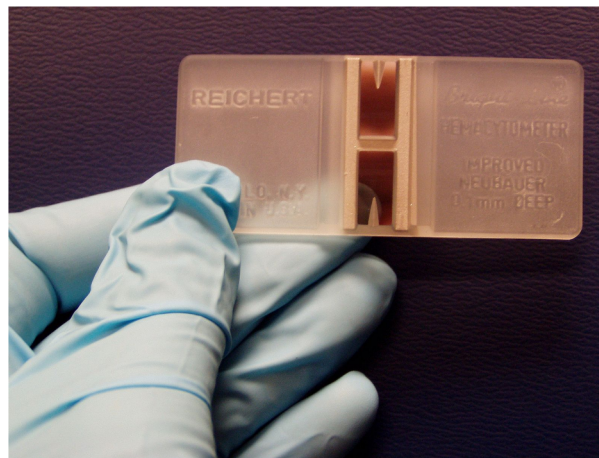
## Experimental Technique - Fluorescent Staining and Analysis

- MDA-MB-468 Cells incubated with CellTracker stain (green) in Tyrode's solution with a concentration of 0.5 mM/ml
- After incubation, ethidium homodimer (EthD-1) added as a dead stain (red) to differentiate between live and dead cancer cells
- Live/dead count used to determine % survival



# Experimental Technique - Hemocytometer

- Cell concentration calculations
- Cancer cell survival calculations

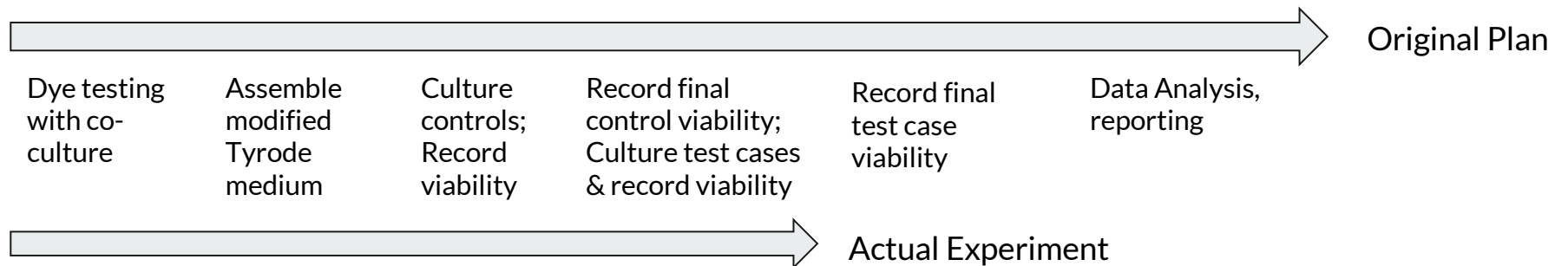


Numer of cells in a 1mm<sup>2</sup> square (red) x 10<sup>4</sup> = No. cells/ml.

[11]

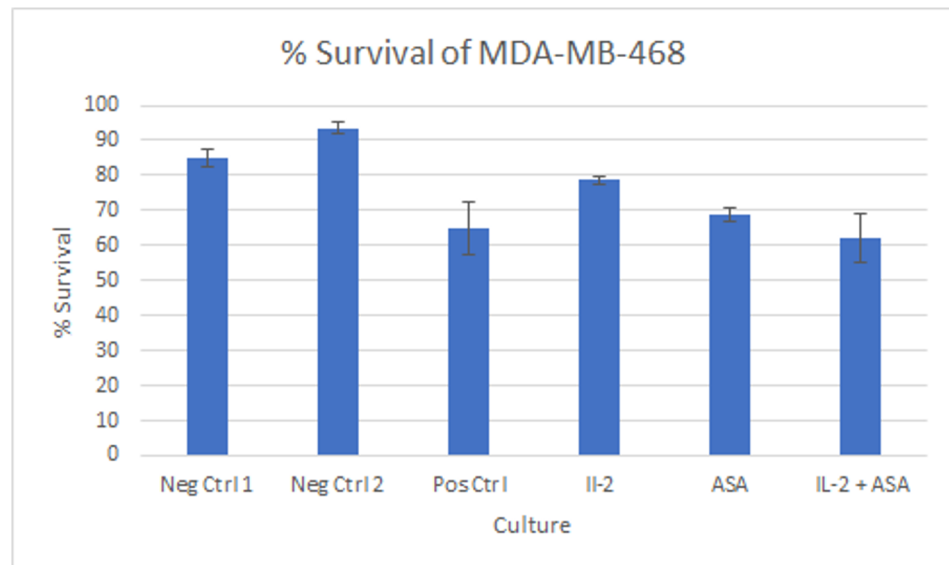


## Changes to Experimental Plan



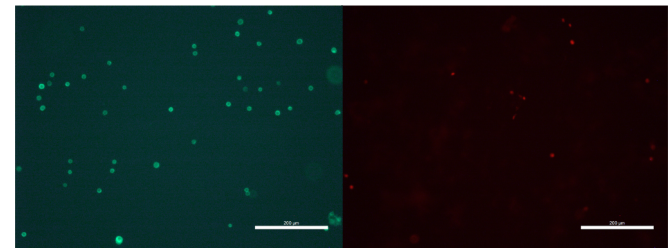
## Results

- IL-2 + ASA combination resulted in 20.9% and 9.7% than ASA and IL-2 alone, respectively
- All three test cases resulted in decreased survival compared to negative controls

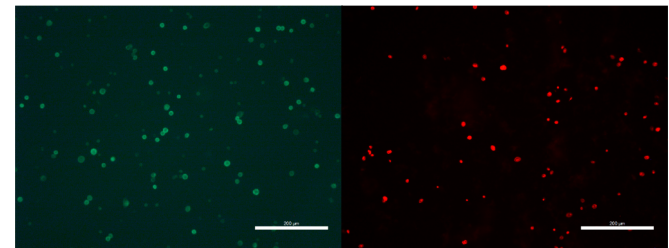


## Noteworthy Observations

- Positive control did not give expected results; more cells survived than expected
- Single-drug wells gave more consistent results than the combination therapy



Positive Control



ASA + IL-2 Combination



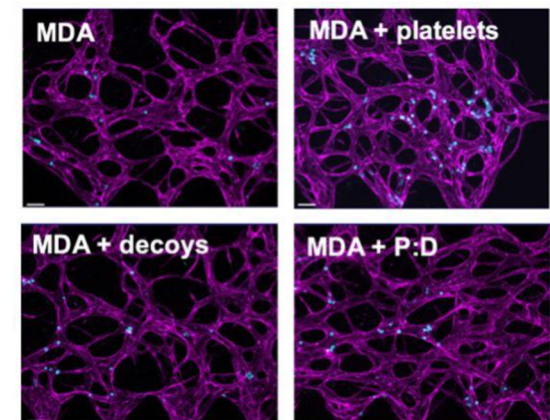


## Conclusion

- Due to the small sample size, no definite conclusions can be made from this experiment
- However, the synergistic effect observed between IL-2 and ASA is an important step in establishing this type of combination therapy as a potential antimetastatic treatment
- This trial justifies future studies to evaluate different doses and types of immune-enhancing and antiplatelet therapies

## Future Directions

- Further study of NK-antiplatelet combination therapies with larger sample size for more robust statistics
- Run experiment within blood vessel mimic to directly observe the process of extravasation - HUVEC microfluidic device
- Imaging - more dyes, imaging of platelets and KHYG-1 cells



[9]

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**THANK YOU!**

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