

Unlocking the therapeutic potential of selective CDK7 and BRD4 inhibition against multiple myeloma cell growth

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Supplemental Methods

Western Blot. Treated MM cells were lysed using RIPA lysis buffer (Boston Bio Products, #BP-115) supplemented with a protease inhibitor cocktail (Thermo Fisher Scientific, #78440). Protein concentrations were measured by the BCA Protein Assay Kit (Thermo Fisher Scientific, #23227) and separated by SDS-PAGE. The following primary antibodies were employed in this study: Rb (sc-73598), phospho-Rb (s780) (CST, #8180), phospho-Rb (s795) (CST, #9301), phospho-Rb (s807/811), p-CDK4 (ABclonal, AP-0593), CDK4 (CST, #12790), Cleaved-caspase3 (CST, #9661), MYC (sc-40), and Tubulin (CST, #2128).

Supplemental Figure Legends.

Figure S1. Dual inhibition synergistically inhibits MM cell growth. **A.** A panel of 10 MM cell lines was treated with YKL-5-124 or JQ1 alone or in combination, and cell survival was assessed by CTG uptake assay. Data are shown as % of cell viability compared to untreated cells. Data represent mean \pm SD; n=3. **B.** PBMCs from healthy donors were treated with different concentrations of YKL-5-124 or JQ1 alone or in combination for 72 hours, and cell viability was assessed by CTG uptake. Data are presented as % of cell viability compared to untreated cells. Data represent mean \pm SD; n=3. **C.** XG1 cells were cultured in the presence of different concentrations of YKL-5-124 with or without 50nM JQ1 for 72h, and apoptotic cells were assessed by flow cytometric analysis following Annexin V+/PI staining. **D.** H929 and JJN3 cells were treated with 100nM YKL-5-124 or 100nM JQ1 alone or in combination for 24 hours, and WB analysis was performed using indicated antibodies against cleaved caspase3, with Tubulin as a loading control. **E-F.** A panel of MM cells was treated with a low dose of Palbociclib or JQ1 alone or in combination, and cell viability was assessed by CTG. Data from a representative panel of cell lines are shown as % of cell viability compared to untreated cells (**E**). Data represent mean \pm SD; n=3. Synergism analysis was performed with the Calcosyn software (**F**). The gray area delineates potent synergistic combinations. CI = 1 means additive effect, CI < 1 means synergistic effect, and CI > 1 means antagonistic effect.

Figure S2. Targeting CDK7, alone and in combination, halts WM cell growth. **A.** Three WM cell lines were treated with different doses of YKL-5-124 for 24-72 hours, and cell growth was assessed by CTG assay. Data represent mean \pm SD; n=3. Data from these WM cells are shown as % of cell viability compared to untreated cells. **B.** Primary WM cells from patients were treated with low doses of YKL-5-24 for 24 hours, and cell

growth was assessed by CTG assay. Data from these WM cells were shown as % of cell viability compared to untreated cells. Data represent mean \pm SD; $n=3$. $**p < 0.01$ and $****p < 0.0001$. **C.** RPCIWM1 cells were treated with DMSO or YKL-5-124 for 24h, and then subjected to RNA-seq analysis. Gene Sets Enrichment Analysis of differentially expressed genes using Hallmark gene set in panel. **D-E.** BCWM1 and MWCL1 were treated with low doses of YKL-5-124 and JQ1 for 72 hours, and cell growth was assessed by CTG uptake assay (**D**). Data was shown as % of cell viability compared to untreated cells. Data represent mean \pm SD; $n=3$. Synergism analysis was performed with the CalcuSyn software (**E**). Data represent the average over 3 replicates. CI = 1 means additive effect, CI < 1 means synergistic effect, and CI > 1 means antagonistic effect.

Figure S3. MYBL2 is oncogenic in MM. **A.** CRISPR screen score (CSS) for MYBL2 in CRISPR-Cas9 KO screening in 16 MM cell lines. **B-C.** Correlation of MYBL2 with overall survival (OS) or event-free survival (EFS) in the MMRF CoMMpass (**B**) and GSE2685 patient datasets (**C**).

Figure S4. Therapeutic potential of combination therapy ex vivo and in vivo. **A.** Primary MM cells from patients were treated with a low dose of Palbociclib and JQ1 for 24 hours, and cell viability was assessed by CTG uptake assay. Data represent mean \pm SD; $n=3$. $***p < 0.001$ and $****p < 0.0001$. **B.** PBMCs and primary MM cells were treated with a low dose of Palbociclib and JQ1 for 24 hours, and cell viability was assessed by CTG assay. Data represent mean \pm SD; $n=3$. **C.** Sub-lethally irradiated SCID mice were injected subcutaneously with H929 cells. Mice were randomized to receive YKL-5-124 (2.5 mg/kg, i.p, 5 days/week), JQ1 (50mg/kg, 2 days/week) or a combination for 2 weeks. Tumor volume was evaluated by caliper measurement. Fold change increase of tumor volume compared to start of treatment (Day 1) (mean \pm SD) are shown. p-values indicate significant differences between groups. $*p < 0.05$. **D.** Sub-lethally irradiated SCID mice were injected subcutaneously with H929 cells. Mice were randomized to receive Palbociclib (25 mg/kg, i.p, 3 days/week), JQ1 (50mg/kg, 2 days/week) or a combination for 2 weeks. Tumor volume was evaluated by caliper measurement. p-values indicate significant differences between groups. $*p < 0.05$.

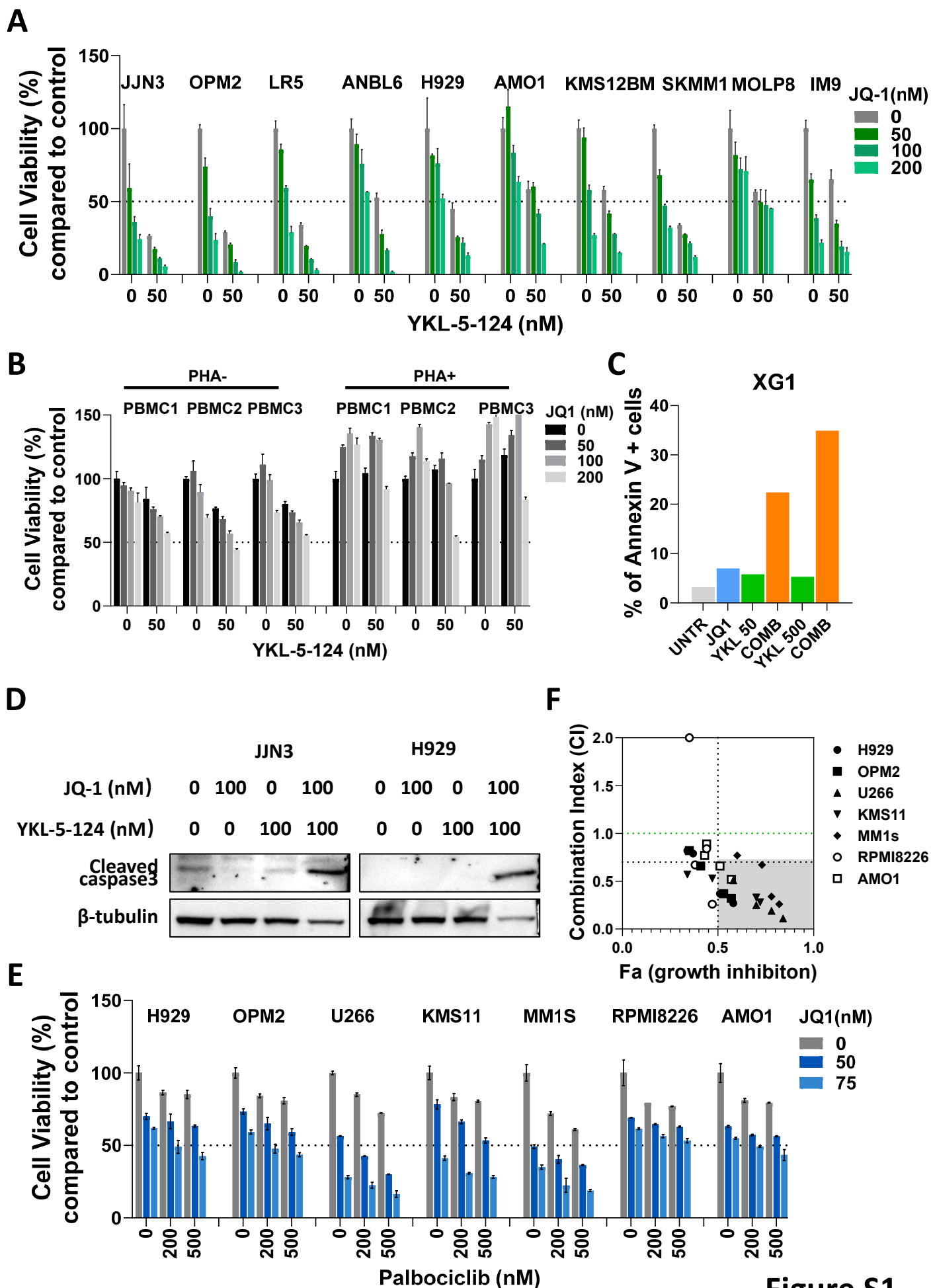


Figure S1

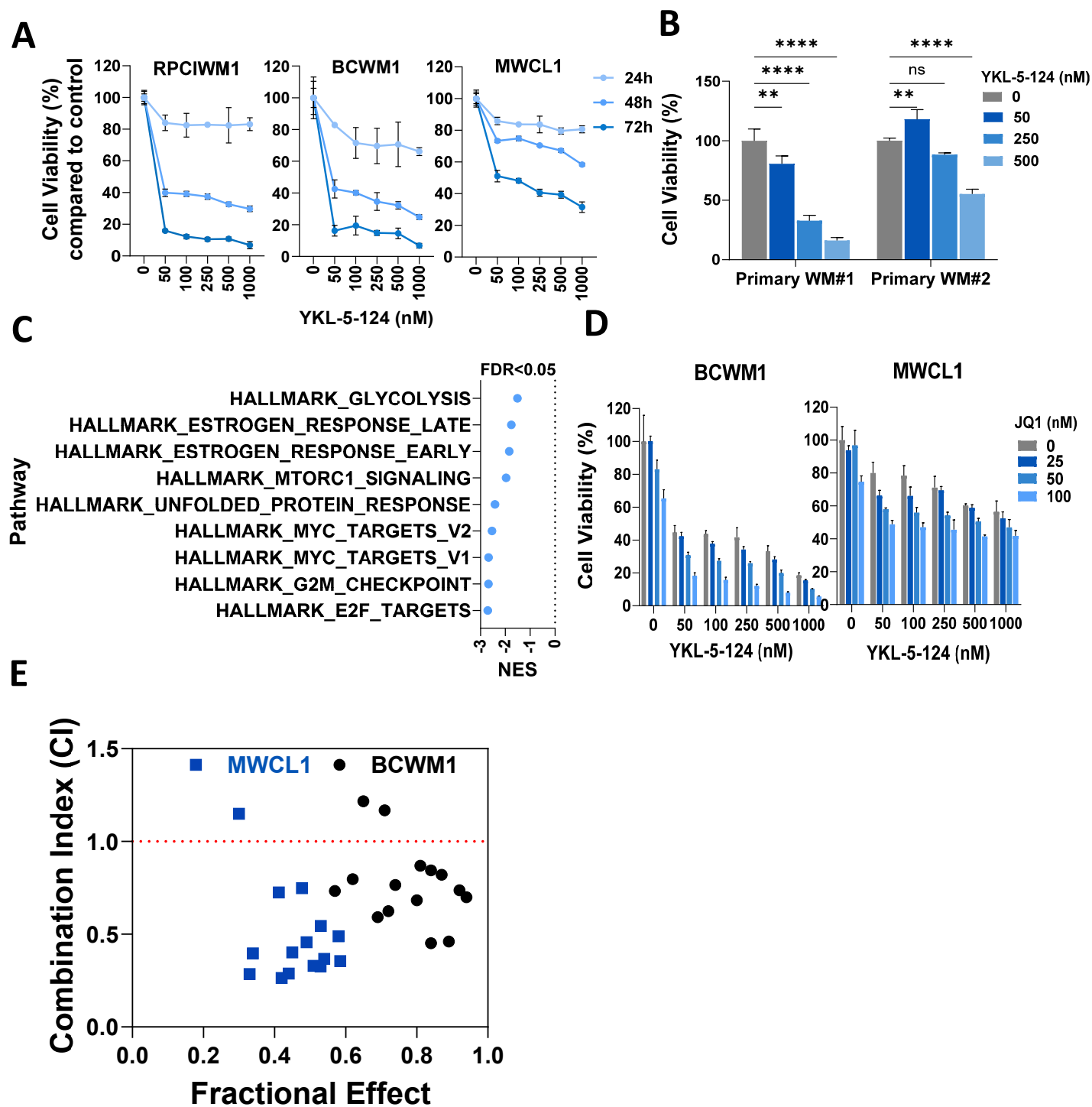
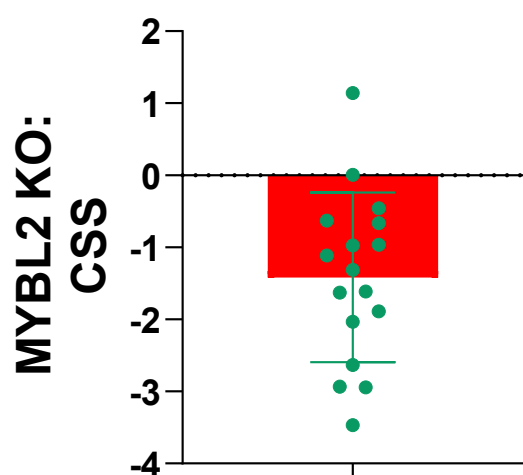
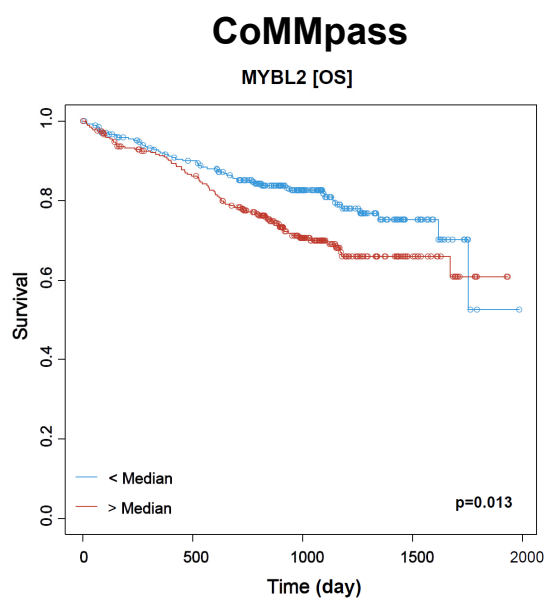
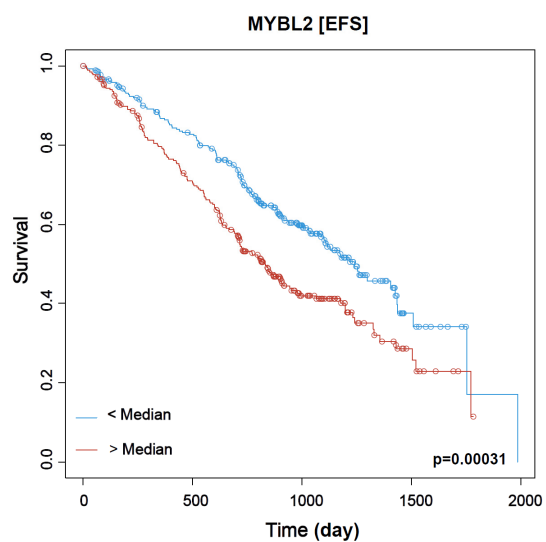
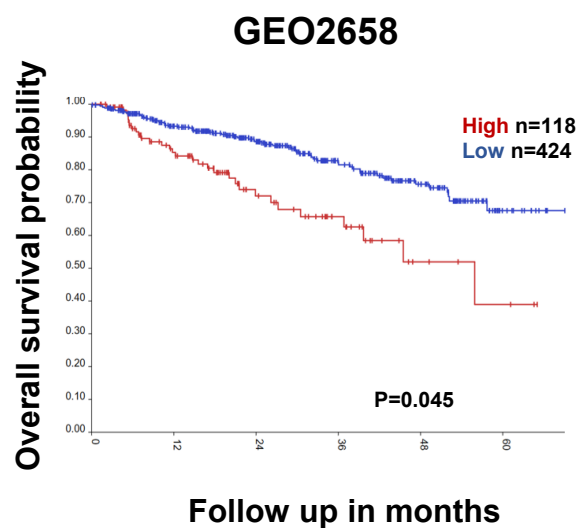


Figure S2

A**B****C****Figure S3**

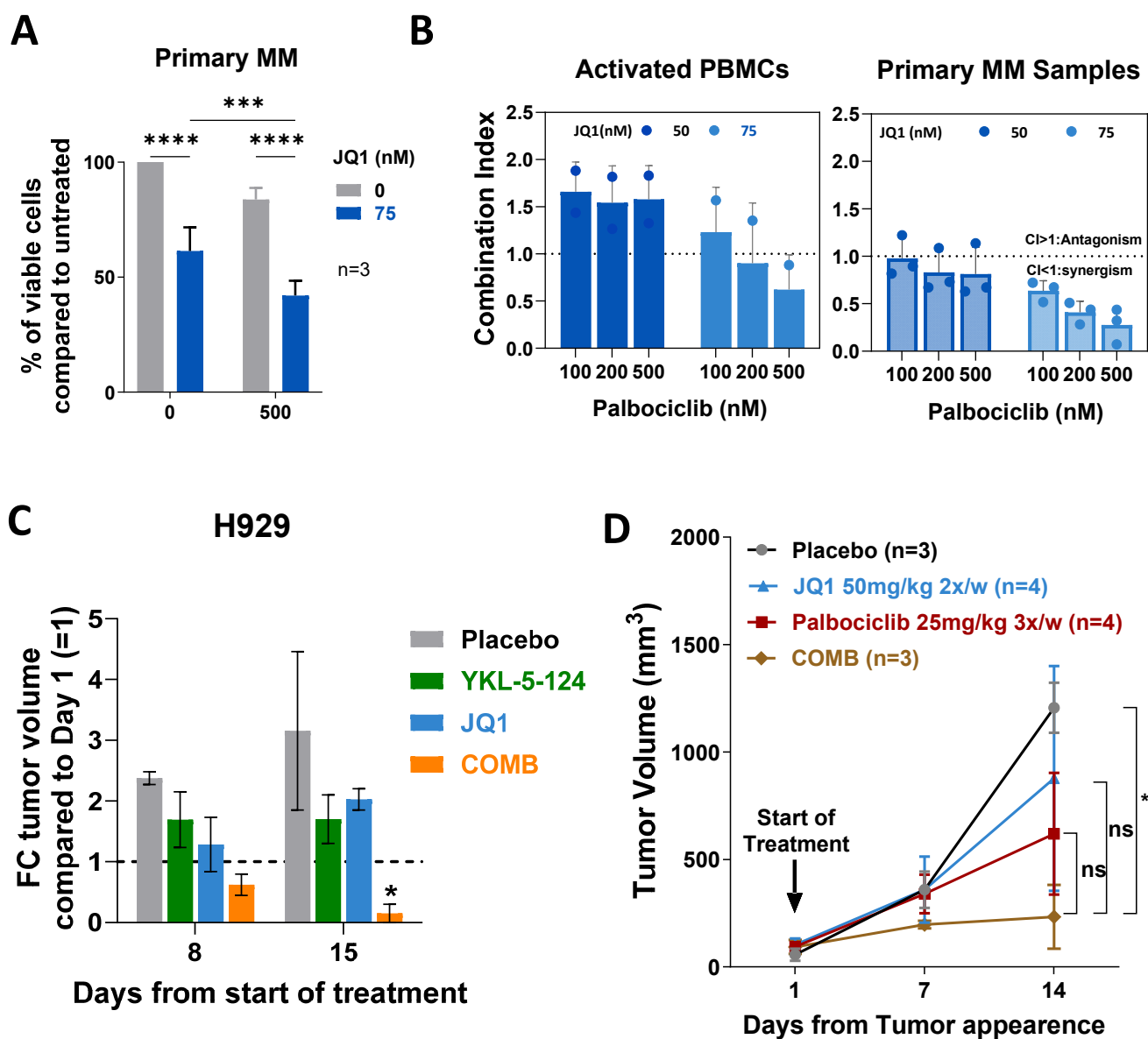


Figure S4