Crosstalk between β -catenin and WT1 signaling activity in acute myeloid leukemia

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Supplementary Table S1. Clinical characteristics of AML/MDS patient diagnostic/relapse samples used in this study.

Patien	Age (at	Sex	WBC	Sampl	Secondar	Genetic information	Other clinical
t no.	diagnosis		count	e type	y disease		information
)		(X107L		(Y/N)		
1	76	F	389	LP	N	Normal karyotype, NPM1 ⁺ , FLT3 ⁺	n/a
2	4	М	n/a	BM	n/a	n/a	n/a
3	10	F	n/a	BM	n/a	n/a	Deceased
4	n/a	n/a	>200	PB	Y	n/a	Post-allogeneic
							transplant. M0/1
							(previously diagnosed
							with M3 10 years
_	,	,		,	,	,	previously)
5	n/a	n/a	n/a	n/a	n/a	n/a	
6	17	M	n/a	BM	Ŷ	n/a	Post-BMI for AML
							Deceased
7	6	N/	70.7	n/a	V		Secondary to Ewings
1	0	171	10.1	n/a	1	11/a	Sarcoma
							Myelomonocytic
							morphology. Deceased.
8	14	F	7.6	BM	N	MLL rearrangement, Karvotype: 46.XX.ins(10:11)(g11.2:g23.1g23.3).ish	BMT for high-risk AML.
						ins(10;11)?inv(11)(q23.3)(5'MLL+)(q23.1)(3'MLL+)	CD33+, MPO+, CD34-,
							CD117+, TdT+, CD64+,
							CD11c+, CD15+,
							CD11b+, NG2+
9	24	М	256	BM	N	46,XY,inv(16)(p13q22)[16].ish	M4, relapsed,
						inv(16)(p13)(MYH11+,CBFB+)(q22)(CBFB+,MYH11+)[5]	deceased.
10	17	М	294	BM	N	46,XY[20]	Alive, complete
4.4	<u> </u>	-	40.0		N		remission.
11	64	F	13.3	BIN	N	погта кагуотуре	AML with underlying
12	13	F	01.0	BM	V		High Disk Delansed
12	15	1	31.3				AMI secondary to
							Rhabdoid tumour.
							Mixed cellular infiltrate
							consisting of
							predominantly
							monocyte/macrophage
							s (CD14+, CD11c+,

							CD64+, CD34-, CD117-
10). Deceased
13	4	F	2.6	BM	N	Normal karyotype, NPM1 (exon 12), FL13	MRD neg. CD13+,
							CD33+, CD34+,
							CD117+, MPO+
14	15	F	6.5	BM	N	MLL (KMT2A) rearrangement, t(10;11)(p11-p14,q23), MLL-MLLT10	MRD detected post
							treatment course 1
15	4	M	3.2	BM	N	t(10;11)(p11.2;q23) KMT2A-MLLT10. Cytogenetically cryptic. KMT2A ex8-	CD13-, CD33+, CD34-,
						MLL110 ex9 or KM12A ex9-MLL110 ex10 fusion detected. NPM1 FL13	CD117+/-, CD11c+,
							CD64+, CD14-, NG2+.
							High risk cytogenetics.
							BMT. MRD neg post
10							course 1+2.
16	14	F	14.7	PB	N	t(8;21)(q22;q22) RUNX-RUNX111.	CD13+, CD33+,
						46,XX,der(8)?del(8)(q11.2q21.3)?dup(8)(q24.3q21.3)?ins(8;21)	CD34+, CD11/+, DR+,
						(q22;q22.12q22.3),der(21)?ins(8;21)(q22;q22.12q22.3)[10]	MPO+, CD19+. MRD
							negative post treatment
			1.0				course 1, 2 and EOT
1/	5	M	1.6	BM	N		M5. Deceased.
18	14	F	2.1	BM	N	45,XX,-7,add(11)(p11.2)[9]/46,XX[1]	22% Myeloid blasts
							(CD117+, CD34+/-,
							CD33+, CD13+, MPO-)
							+ 10%
							immunophenotypically
							mature monocytes
							(CD11C+, CD64+,
10	-		,	514			CD117+) BMT
19	8	F	n/a	BM	N	n/a	M4/5. Deceased.
20	1	F	34.4	BM	Y	MLL rearrangement t(9;11)	M5a morphology. BM I
							following relapse.
	10						Deceased
21	16	F	20.6	BM	N	Normal karyotype 46,XX[20]	CD33+, MPO+, CD34+,
							CD117+, CD13+,
							CD14-, CD7+, CD45
	_						weak, CD11c+, IdI-
22	7	M	3.5	BM	N	t(8;21)(q22;q22) RUNX-RUNX1T1	8% myeloid blasts
						45,X,-Y,t(8;21)(q22;q22)[9]/46,XY[1]	present (CD13+,
							CD33+, CD34+,
			- , · · ·				CD11/+, MPO+)
23	11	M	n/a	BM	N	n/a	BMT for MDS.
							Deceased.
24	13	F	14.7	BM	N	Karyotype:	Only 2 megakaryocytes

						46,XX,der(8)?del(8)(q11.2q21.3)?dup(8)(q24.3q21.3)?ins(8;21)(q22;q22.12q22.3) , der(21)?ins(8;21)(q22;q22.12q22.3)[10]	seen. Erythropoiesis reduced. Prominent eosinophils and
						CD13+, CD33+, CD34+, CD117+, DR+, MPO+, CD19+., AML	c. 12%. No significant
							monocytoid population.
							Densely infiltrated with
							myeloid blasts.
							Analysis showed an
							with a derivative
							chromosome 8 from a
							variant 8:21
							rearrangement. This
							abnormality is
							consistent with a
							AMI with
							t(8;21)(q22;q22);
							RUNX1-RUNX1T1) and
							is reported in
							association with a
							favourable prognosis.
							Alive, complete
							remission.
25	2	М	2.4	BM	N	t(9;11)(p22;q23), t(11;21)(q23;q8)	n/a
26	4mo	M	5.1	BM	N	t(9;11)	BMT
27	7	F	n/a	BM	N	MPAL, 46XX, del5q, abnormal 21	n/a
28	7mo	F	168.6	ВМ	N	Karyotype: 47,XX,+21[5]/46,XX[5] nuc ish(CBFA2T3,GLIS2)X3(CBFA2T3 con GLIS2x2)[92/150] + RUNX1	BMT 24/12/20 due to high-risk genetics.
							CD33+, CD34+, CD117+, MPO+, DR-, CD13+
							Alive, in remission.
							Received Gemtuzumab
							Ozogamycin as part of
							Myechild trial treatment.

29	5	F	29.5	BM	N	Karyotype: 45,X,-X,t(8;21)(q22;q22.1)[8]/46,XX[2]	7% myeloid blasts (CD13+, CD33+, CD34+, CD117+, MPO+) Alive, in remission.
							Received 2 doses of Gemtuzumab Ozogamycin as part of Myechild trial treatment
30	76	F		BM			D45X Polycythaemia vera. M99503, transformation in to MDS.

- BM = Bone marrow
- PB = Peripheral blood
- LP = Leukapheresis
- MRD = Minimal residual disease
- BMT = Bone marrow transplant
- AML= Acute myeloid leukemia
- MDS= Myelodysplastic syndrome
- MPAL= Mixed phenotype acute leukemia
- MLL = Mixed-lineage leukemia
- NPM1 = *Nucleophosmin*
- FLT3 = Fms-like tyrosine kinase 3
- RUNX1 = Runt-related transcription factor 1
- GATA2 = GATA Binding Protein 2
- WHO = World Health Organisation
- n/a = not available

Supplementary Table S2. Enrichment values for β -catenin and WT1 following a TMTlabelled assessment of AML Patient #1 β -catenin interactome by mass spectrometry.

Protein	Score	Coverage	# Proteins	# Unique peptides	# Peptides	PSM	Cyt fold change (vs lgG)	Nuc fold change (vs IgG)
β-Catenin	535.53	64.08	10	33	40	175	8.03	4.159
WT1	2.51	4.49	5	1	1	1	0.889	1.74

Score: Displays the protein score, which is the sum of the scores of the individual peptides.

For Sequest results, the score is the sum of all peptide Xcorr values above the specified score threshold. The score threshold is calculated as follows:

0.8 + peptide_charge × peptide_relevance_factor

where peptide_relevance_factor is an advanced parameter of the SEQUEST or Sequest HT node in the "Protein Scoring Option" category with a default value of 0.4. For each spectrum, only the highest-scoring match is used.

For each spectrum and sequence, the Proteome Discoverer application uses only the highest scored peptide. When it performs a search using dynamic modifications, one spectrum might have multiple matches because of permutations of the modification site.

For Mascot results, the score is:

- Standard score, which is the cumulative protein score based on summing the ion scores of the unique peptides identified for that protein. If a peptide was redundantly identified, only the highest-scoring peptide is used.

-or-

– MudPIT score, which is the sum of the "excess of ions" score over the homology or identity threshold for each spectrum plus the average threshold. For MudPIT scoring, the score for each peptide is not its absolute score but the amount that it is above the threshold. Therefore, peptides with a score below the threshold do not contribute to the score. For each peptide, the threshold is the homology threshold, if it exists; otherwise, it is the identity threshold. By default, the Proteome Discoverer application automatically switches between the standard and the MudPIT score to calculate the protein score in the Mascot node results. It automatically uses the MudPIT score when the number of queries divided by the number of FASTA database entries exceeds 0.001.

Coverage: Displays by default the percentage of the protein sequence covered by identified peptides

Proteins: Displays the number of identified proteins in the protein group of a master protein **Unique Peptides:** Displays the number of peptide sequences unique to a protein group

Peptides: Displays the number of distinct peptide sequences in the protein group

PSMs: Displays the total number of identified peptide sequences (peptide spectrum matches) for the protein, including those redundantly identified

The authors wish to acknowledge that the full β -catenin interactome MS data for AML patient #1 is available from bioRxiv link below should researchers desire a full copy:

https://www.biorxiv.org/content/10.1101/2021.11.06.467095v2



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Supplementary Figure S1. (A) Immunoblots showing the level of β -catenin protein present in WT1 Co-IPs derived from KG-1 and K562 under basal (DMSO)or activated (5µM CHIR99021) Wnt signalling conditions. ID= immunodepleted lysate. (B) Immunoblot showing purified WT1 (HIS/GST tagged, and non-tagged) abundance in β -catenin-HIS or IRF4-HIS (negative control) resin columns. (C) Immunoblot showing level of β -catenin or positive control LEF-1 (derived from whole cell K562 lysates) present in HIS resin β -catenin and IRF4 containing lanes. LEF-1 is a known interactor of β -catenin and confirms recombinant β -catenin protein can still bind established partners. (**D**) CLSM Z-sections showing β -catenin and WT1 subcellular localisation in NB4 and HEL cells +/- 5μM CHIR99021. Phase (gray), WT1 (red), β-catenin (green), DAPI (blue) and merged WT1/β-catenin images are shown alongside Pearsons Correlation Coefficients (PCC: -1= inverse correlation, 0= no correlation, +1= positive correlation) indicating degree of overlap between β -catenin and WT1 signal. White scale bar indicates 5µm. (E) Immunoblot showing protein level of β -catenin and WT1 in NB4 and KG-1 cells +/- β -catenin shRNA, +/- β -catenin CRISPR/Cas9 following 16 hours incubation with 1µM proteasome inhibitor MG132. β-Actin detection indicates protein loading. (F) Summary graph showing fold change in mRNA expression of genes previously identified as WT1 target genes, in KG-1 cells by qRT-PCR. Fold change is in response to knockdown of WT1 using WT1 shRNA relative to expression in non-targeted shRNA control (dashed line). Expression was normalised to the housekeeping gene β -actin (ACTB). All data represents mean ± 1 s.d (*n* = 3). Statistical significance is denoted by **P*<0.05, ***P*<0.005, ***P<0.0005 and ****P<0.0001 as deduced by a one-sample t-test.