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β-hydroxybutyrate Does Not Influence Viability and Clonogenicity of A549 Lung Cancer Cells

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ABSTRACT

Background/Purpose: The metabolic shift from catabolism of carbohydrates to lipids results in production of ketone bodies leading to a state called ketosis. Ketosis via ketone supplement or ketogenic diet has been proposed as a non-toxic therapeutic option for a broad range of malignancies. Although the clinical impact of ketogenic diet is well-documented, the effect of ketone bodies on cancer cell biology is not clear for some cancers including non-small-cell lung cancer (NSCLC). In this study, we aimed to demonstrate the effects of the most prominent ketone body, β -hydroxybutyrate, on a NSCLC cell line, A549.

Methods: A549 cell line was utilized as the in vitro model in this study. The effects of different β -hydroxybutyrate concentrations on cell viability were measured via sulphorodamine-B (SRB) viability assay. Long term effects of ketosis were evaluated via colony formation assay. Finally, the effect of β -hydroxybutyrate on cell migration was determined via scratch assay.

Results: Our results suggest that introduction of β -hydroxybutyrate in physiologically relevant concentrations into the cell culture media does not influence cell viability, clonogenicity or migration.

Conclusion: β -hydroxybutyrate has been previously demonstrated to induce, inhibit or does not influence the viability of different cell lines but there is no report regarding its effects on NSCLC cells. Here we report that physiologically relevant concentrations of β -hydroxybutyrate have no effect on viability, clonogenicity and migration of A549 cells.

Keywords: ketosis, beta-hydroxybutyrate, cancer, non-small-cell lung cancer

Ketoz A549 Akciğer Kanseri Hücrelerinin Canlılığını ve Klonojenitesini Etkilememektedir

ÖZET

Giriş/Amaç: Metabolizmanın karbohidrat katabolizmasından lipid katabolizmasına geçişi ketoz adı verilen bir duruma yol açan keton cisimlerinin üretimine neden olur. Keton cismi takviyesi veya ketojenik diyet yoluyla tetiklenen ketoz, çok çeşitli maligniteler için toksik olmayan bir tedavi seçeneği olarak önerilmektedir. Ketojenik diyetin klinik etkisi iyi belgelenmiş olsa da, küçük hücreli dışı akciğer kanseri de dahil olmak üzere bazı kanserler için keton cisimlerinin kanser hücresi biyolojisi üzerindeki etkisi net değildir. Bu çalışmada en önemli keton cismi olan β-hidroksibütiratın küçük hücreli dışı akciğer kanseri hücre hattı A549 üzerindeki etkilerinin gösterilmesi amaçlanmıştır.

Yöntemler: Bu çalışmada in vitro model olarak A549 hücre hattı kullanılmıştır. Farklı β-hidroksibutirat konsantrasyonlarının hücre canlılığı üzerindeki etkileri, sülforhodamin-B (SRB) canlılık testi ile ölçülmüştür. Ketozun uzun vadeli etkileri, koloni oluşum testi ile değerlendirilmiştir. Son olarak, β-hidroksibutiratın hücre göçü üzerindeki etkisi, çizik testi ile belirlenmiştir.

Bulgular: Çalışmada elde edilen veriler, fizyolojik konsantrasyonlarda β-hidroksibutiratın hücre kültürü ortamına dahil edilmesinin hücre canlılığını, klonojenisitesini veya göçünü etkilemediğini göstermektedir.

Sonuç: β-hidroksibutiratın farklı hücre hatlarında canlılığı artırdığı, azalttığı veya etkilemediği daha önceki çalışmalarla gösterilmiştir ancak küçük hücreli olmayan akciğer kanseri hücreleri üzerindeki etkilerine dair bir veri bulunmamaktadır. Bu çalışmada fizyolojik β-hidroksibutirat konsantrasyonlarının A549 hücrelerinin canlılığı, klonojenitesi ve göçü üzerinde hiçbir etkisinin olmadığı belirlenmiştir.

Anahtar kelimeler: ketoz, beta-hidroksibütirat, kanser, küçük hücreli dışı akciğer kanseri

Copyright © 2021 the Author(s). Published by Acibadem University. This is an open access article licensed under a Creative Commons Attribution-NonCommercial-NoDerivatives (CC BV-NC-ND 4.0) International License, which is downloadable, re-usable and distributable in any medium or format in unadapted form and for noncommercial purposes only where credit is given to the creator and publishing journal is cited properly. The work cannot be used commercially without permission from the journal. Uring fasting, starvation or strenuous exercise, as a response to decreasing blood glucose levels, energy metabolism shifts from carbohydrate catabolism to lipid oxidation. Increased β -oxidation rate in liver enabled by this shift results in production of excessive amounts of acetyl-CoA which is then utilized to synthesize a group of small water-soluble metabolites called ketone bodies. Ketone bodies including acetoacetate, β -hydroxybutyrate (BHB), and acetone can be oxidized via Krebs cycle to produce energy when they are transported to extrahepatic tissues. Amongst ketone bodies BHB is the most prominent one in the blood during ketosis (1) and BHB is the most common ketone body supplement (2).

The state of ketosis which is characterized by elevated serum levels of ketone bodies occurs if the rate of ketone body production exceeds their utilization. Ketosis may be a physiological condition if the levels of ketone bodies in circulation are between 0.5 and 3.0 millimolar (mM) (2). Higher levels (\geq 10 mM) indicate ketoacidosis, a potentially dangerous form of metabolic acidosis, and require medical intervention (2).

Mild (physiological) ketosis, generally achieved via nutritional alterations such as ketogenic diet and ketone supplementation, has been demonstrated to offer therapeutic potential in various medical conditions including epilepsy, Alzheimer's disease, Parkinson's disease and metabolic syndrome (3). Recent preclinical and clinical studies suggest that ketogenic diet may also be a strong candidate as an adjuvant cancer therapy for a spectrum of malignancies of brain, breast, colon, lung and others (2,4). Ketogenic diet has been shown to slow tumor growth, prolong survival rate, and enhance drug response in mice with cancer (4) especially for brain malignancies including glioma (5), glioblastoma multiforme (6) and astrocytoma (7). Metaanalysis of clinical data for different cancers suggest that the ketogenic diet is safe and beneficial for cancer patients (8). On the other hand, there are many pre-clinical and clinical studies demonstrating that neither ketogenic diet nor ketone supplementation alone has any effect on viability of cancer cells and/or tumor progression for brain, pancreas, breast, liver (9–14) and other cancers (4).

Even though the data is more limited for lung cancer, the leading cause of cancer-related deaths (15), current evidence suggest that similar to many others, ketosis suppresses tumor growth (13,16) and according to the results

of one clinical study from Turkey, ketogenic diet improves survival and treatment response in metastatic non-smallcell lung cancer patients (NSCLC) (17). There is currently no data regarding the effects of ketone bodies on lung cancer cells. In this study we aimed to reveal the effects of β -hydroxybutyrate, the most prominent ketone body, on A549 non-small-cell lung cancer cells.

Material and Methods

Cell Culture

Non-small-cell lung cancer cell line A549 (CCL-185, ATCC) cells were cultured in RPMI-1640 medium containing 10% fetal bovine serum (FBS), 1% (2 mM) L-glutamine (L-Gln) and 1% penicillin/streptomycin (complete medium) at 37°C in a humid incubator with 5% CO, pressure.

Cell Viability

 β -Hydroxybutyrate (BHB) (Sigma, #166898) was dissolved in absolute Ethanol (EtOH) to obtain 50 mg/mL solution. Subsequently, different concentrations were prepared in complete medium. EtOH equivalent of the highest concentration was prepared in complete medium and was used as vehicle control.

The sulphorodamine B (SRB) test was performed to determine the effect of BHB on cell viability of A549 lung carcinoma cells (18). 5x10³ cells/well were seeded in 100 µL medium to the wells of 96-well plates. After overnight incubation, increasing concentrations of BHB in 100 µL medium were applied to the cells as 6 replicates (N=6) in the test wells. Final BHB concentrations were 1 µM, 1 mM and 3 mM representing physiological ketosis (2). After 48 hours of incubation following administration of the solutions, 50 µL of 50% trichloroacetic acid (TCA) solution was added to the wells and fixed at 4°C for 1 hour. TCA was then removed by sequential washes and 50 μ L of the SRB solution was added to each well and incubated for 30 min at room temperature in the dark. The wells were washed to remove unbound dye and the plate was dried. The protein-bound dye was dissolved with 150 µL/well of 10 mM tris base (pH 10) on a shaker at approximately 150 rpm for 10 min. Then, spectrophotometric reading was performed at 564 nm/690 nm. After subtraction of absorbance values at 690 nm from at 564 nm, the resulting signals were compared between wells equivalent to cell viability using the GraphPad Prism V9 program and visualized as doseresponse curves.

Migratory Abilities

Migratory abilities of A549 cells were determined by scratch assay. Cells were trypsinized and resuspended in complete medium. Cells were then counted and seeded in 3 replicates, 300,000 cells in 0.5 mL per well of 24 well plates. Cells were incubated in 37°C humidified CO, incubator overnight. The next day, scratches in the form of crosses were made using sterile 200 µL pipet tips. Wells were rinsed with PBS to remove detached cells. Subsequently sample wells were treated with 3 mM BHB. Experimental steps were performed according to previous literature (19). Images were acquired under inverted light microscope (Nikon, Eclipse TS2) and analyzed using FIJI (ImageJ) with the "Wound healing assay" macro by Kees Straatman. Images are also uploaded as a supplementary document. Calculations were performed to obtain percentage of migration against untreated cells and graphs were plotted using GraphPad Prism v9.

Clonogenicity

Assessment of clonogenicity of A549 cells was carried out by colony formation assay (CFA). Cells were trypsinized, resuspended in complete medium and counted on hemocytometer. 50 cells per well were seeded in 24 well plates in triplicate on the 1st day. Plates were incubated in 37°C humidified CO₂ incubator. 3 mM BHB was applied on the 2nd day. Media were replaced on 4th day. Cells were fixed and stained by 0.2% crystal violet (Sigma-Aldrich) solution in 2% EtOH for 10 min in dark at room temperature. Then the plates were washed with water, dried overnight and visualized by inverted light microscope (Nikon, Eclipse TS2) on the 8th day. Colonies were then counted; colony formation percentages were calculated against untreated wells and graphs were plotted using GraphPad Prism v9.

Data Analysis

All graphs were plotted using GraphPad Prism v9. All columns represent mean values of all samples and error bars represent standard deviation. In SRB data analysis, untreated cell viability was considered as 100% and all the others were calculated accordingly.

Results

Short-term BHB treatment does not influence A549 cell viability.

Cells were either left untreated, treated with vehicle control of with increasing concentrations of BHB (1 μ M, 1 mM and 3 mM) for 48 hours. We tested these concentrations to mimic physiological blood concentrations (2) of BHB during pre-ketosis (1 μ M) and mild ketosis (1-3 mM) states. We measured cell viability via SRB assay. According to our findings, BHB treatment failed to alter cell viability compared to untreated and vehicle controls (Figure 1A).

Long-term BHB treatment caused a slight decrease in A549 clonogenicity compared to untreated cells.

Since there was no viability inhibition after 48-hours of treatment, we decided to observe effects of BHB on longer periods of time. We carried out a colony formation assay by which we counted the number of formed colonies after the treatment for 8 days. Cells were either left untreated, treated with vehicle control or 3 mM BHB, and formed colonies were counted after the treatment period. Our findings suggest that the BHB treatment decreased the number of colonies formed only slightly compared to untreated and there was no difference compared to the vehicle control (Figure 1B).

BHB does not affect migratory abilities of A549 cells.

After short- and long-term effects were determined we moved on to investigate the effects of BHB on A549 cell migration. Cells were treated with 3 mM BHB for 3 days. Cell migration was evaluated each day via scratch assay. BHB treatment decreased cell migration compared to vehicle control on the first day, but the difference was not apparent on following days (Figure 1C).

Discussion

Ketosis achieved via ketone supplementation or ketogenic diet has been proposed as a safe adjuvant therapeutic option for cancer (20). However, its efficiency in reducing tumors and inhibiting cancer cell viability is up to debate as there are many contrasting reports including anti-tumor activity (60% of studies), ineffectiveness (17%) and pro-proliferative effects (10%) (4). The effect of ketosis on cancer progression may depend on the cancer type and it can indirectly influence tumor growth via enhancing chemo/radiotherapy response without directly influencing cancer cell viability (12,21).





In case of NSCLC, limited data suggest that ketosis, achieved via ketogenic diet, suppresses tumor growth, enhances chemo/radiotherapy response and reduces angiogenesis in mice models (13,16). One clinical study support this by providing evidence of improved survival and enhanced treatment response in patients with metastatic NSCLC (17). However, currently there is no data regarding the direct effects of ketone bodies on cancer cells and whether the anti-cancer effects of ketosis are due altered cancer cell viability. Here we report that the physiologically relevant concentrations of BHB does not have any short- or long-term effects on viability of A549 cancer cells. Therefore, previously reported anti-tumor activity of ketogenic diet in NSCLC may be due a mechanism other than inhibition of cancer cell viability.

Another proposed anti-cancer effect of BHB was the inhibition of cancer cell migration (22,23). However, we demonstrated that BHB does not influence cancer migratory ability of A549 cells in vitro. Since we focused on a single cell line, our results should not be generalized to NSCLC. Cell-line dependent effects of BHB may be investigated in future studies. Moreover, further studies are needed to identify the anticancer mechanism of ketogenic diet on NSCLC, focusing on previously proposed alternative mechanisms such as enhancing treatment response, altering cellular metabolism or remodelling tumor microenvironment (13,16,24–26).

Conclusion

Here we report ineffectiveness of BHB treatment on viability, clonogenicity and motility of A549 NSCLC cells. Since both clinical and in vivo data suggest an anti-cancer effect for ketogenic diet, further studies are needed to investigate the mechanism of such effect.

Declarations

Funding Internal funds of the institutions.

Conflicts of Interest/Competing Interests Authors declare no conflict of interest.

Ethics Approval

Not applicable (Cell culture study).

Availability of Data and Material (Data Transparency) All data has been presented.

Authors' Contributions

All authors contributed to this work in accordance with the ICMJE authorship criteria.

References

- 1. Newman JC, Verdin E. β -Hydroxybutyrate. Annu Rev Nutr. 2017 Aug 21;37:51–76.
- Veech RL. The therapeutic implications of ketone bodies: the effects of ketone bodies in pathological conditions: ketosis, ketogenic diet, redox states, insulin resistance, and mitochondrial metabolism. Prostaglandins, Leukotrienes and Essential Fatty Acids. 2004 Mar 1;70(3):309–19.
- Stafstrom CE, Rho JM. The ketogenic diet as a treatment paradigm for diverse neurological disorders. Front Pharmacol. 2012 Apr 1;3:59.
- Weber DD, Aminzadeh-Gohari S, Tulipan J, Catalano L, Feichtinger RG, Kofler B. Ketogenic diet in the treatment of cancer – Where do we stand? Molecular Metabolism. 2020 Mar 1;33:102–21.
- Strowd RE, Cervenka MC, Henry BJ, Kossoff EH, Hartman AL, Blakeley JO. Glycemic modulation in neuro-oncology: experience and future directions using a modified Atkins diet for high-grade brain tumors. Neurooncol Pract. 2015 Sep;2(3):127–36.
- Champ CE, Palmer JD, Volek JS, Werner-Wasik M, Andrews DW, Evans JJ, et al. Targeting metabolism with a ketogenic diet during the treatment of glioblastoma multiforme. J Neurooncol. 2014 Mar;117(1):125–31.

- Seyfried TN, Marsh J, Shelton LM, Huysentruyt LC, Mukherjee P. Is the restricted ketogenic diet a viable alternative to the standard of care for managing malignant brain cancer? Epilepsy Research. 2012 Jul 1;100(3):310–26.
- Zhao H, Jin H, Xian J, Zhang Z, Shi J, Bai X. Effect of Ketogenic Diets on Body Composition and Metabolic Parameters of Cancer Patients: A Systematic Review and Meta-Analysis. Nutrients. 2022 Oct 8;14(19):4192.
- Maurer GD, Brucker DP, Bähr O, Harter PN, Hattingen E, Walenta S, et al. Differential utilization of ketone bodies by neurons and glioma cell lines: a rationale for ketogenic diet as experimental glioma therapy. BMC Cancer. 2011 Jul 26;11:315.
- Rieger J, Bähr O, Maurer GD, Hattingen E, Franz K, Brucker D, et al. ERGO: a pilot study of ketogenic diet in recurrent glioblastoma. Int J Oncol. 2014 Jun;44(6):1843–52.
- Seyfried TN, Sanderson TM, El-Abbadi MM, McGowan R, Mukherjee P. Role of glucose and ketone bodies in the metabolic control of experimental brain cancer. Br J Cancer. 2003 Oct 6;89(7):1375–82.
- 12. Zahra A, Fath MA, Opat E, Mapuskar KA, Bhatia SK, Ma DC, et al. Consuming a Ketogenic Diet while Receiving Radiation and Chemotherapy for Locally Advanced Lung Cancer and Pancreatic Cancer: The University of Iowa Experience of Two Phase 1 Clinical Trials. Radiation Research. 2017 Apr 24;187(6):743–54.
- Allen BG, Bhatia SK, Buatti JM, Brandt KE, Lindholm KE, Button AM, et al. Ketogenic diets enhance oxidative stress and radio-chemotherapy responses in lung cancer xenografts. Clin Cancer Res. 2013 Jul 15;19(14):3905–13.
- Byrne FL, Hargett SR, Lahiri S, Roy RJ, Berr SS, Caldwell SH, et al. Serial MRI Imaging Reveals Minimal Impact of Ketogenic Diet on Established Liver Tumor Growth. Cancers (Basel). 2018 Sep 5;10(9):312.
- Siegel RL, Miller KD, Fuchs HE, Jemal A. Cancer statistics, 2022. CA A Cancer J Clinicians. 2022 Jan;72(1):7–33.
- Lin BQ, Zeng ZY, Yang SS, Zhuang CW. Dietary restriction suppresses tumor growth, reduces angiogenesis, and improves tumor microenvironment in human non-small-cell lung cancer xenografts. Lung Cancer. 2013 Feb;79(2):111–7.
- lyikesici MS. Feasibility study of metabolically supported chemotherapy with weekly carboplatin/paclitaxel combined with ketogenic diet, hyperthermia and hyperbaric oxygen therapy in metastatic non-small cell lung cancer. Int J Hyperthermia. 2019 Apr 1;36(1):446–55.
- 18. Vichai V, Kirtikara K. Sulforhodamine B colorimetric assay for cytotoxicity screening. Nat Protoc. 2006 Aug;1(3):1112–6.
- Liang CC, Park AY, Guan JL. In vitro scratch assay: a convenient and inexpensive method for analysis of cell migration in vitro. Nat Protoc. 2007 Feb 1;2(2):329–33.
- 20. Woolf EC, Syed N, Scheck AC. Tumor Metabolism, the Ketogenic Diet and β -Hydroxybutyrate: Novel Approaches to Adjuvant Brain Tumor Therapy. Front Mol Neurosci. 2016 Nov 16;9:122.
- Mikami D, Kobayashi M, Uwada J, Yazawa T, Kamiyama K, Nishimori K, et al. β-Hydroxybutyrate enhances the cytotoxic effect of cisplatin via the inhibition of HDAC/survivin axis in human hepatocellular carcinoma cells. Journal of Pharmacological Sciences. 2020 Jan 1;142(1):1–8.
- Shukla SK, Chaika NV, Singh PK. Abstract 3557: Beta-hydroxybutyrate inhibits oncogenic signaling and cellular motility in pancreatic cancer cells. Cancer Research. 2018 Jul 1;78(13_Supplement):3557.
- 23. Shang S, Wang L, Zhang Y, Lu H, Lu X. The Beta-Hydroxybutyrate Suppresses the Migration of Glioma Cells by Inhibition of NLRP3 Inflammasome. Cell Mol Neurobiol. 2018 Nov 1;38(8):1479–89.
- 24. Yao A, Li Z, Lyu J, Yu L, Wei S, Xue L, et al. On the nutritional and therapeutic effects of ketone body d-β-hydroxybutyrate. Appl Microbiol Biotechnol. 2021;105(16–17):6229–43.

- 25. Bartmann C, Janaki Raman SR, Flöter J, Schulze A, Bahlke K, Willingstorfer J, et al. Beta-hydroxybutyrate (3-OHB) can influence the energetic phenotype of breast cancer cells, but does not impact their proliferation and the response to chemotherapy or radiation. Cancer & Metabolism. 2018 Jun 11;6(1):8.
- 26. De Feyter HM, Behar KL, Rao JU, Madden-Hennessey K, Ip KL, Hyder F, et al. A ketogenic diet increases transport and oxidation of ketone bodies in RG2 and 9L gliomas without affecting tumor growth. Neuro-Oncology. 2016 Aug 1;18(8):1079–87.,