Non-contact Electric Field Exposure Provides Potential Cancer Therapy through p53-Independent Proliferation Arrest and Intrinsic Pathway Apoptosis Induction in MG-63 Cell Lines

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ABSTRACT

Osteosarcoma is a highly malignant primary tumor on bone that mainly attacks children and young adolescents. Until now, osteosarcoma therapy still combines some high costs and invasive therapy modalities that may give side effects, such as pain and nausea. Our previous studies suggested that non-contact electric field has anti-proliferative effect on breast cancer cells, in vitro and in vivo. In this study, we were interested studying alternating current electric field effects on osteosarcoma cells progression as well as its potential cytotoxic effects. MG-63 human osteosarcoma cells were cultured and treated with 200 kHz for 6 days. Several genes of interest including p53, p21, MDM2, caspase-3, caspase-8, and caspase-9 were analyzed using real-time qPCR method. Apoptotic index was measured using flow-cytometry assay. Apoptosis was observed through p53-independent p21 pathway (p = 0.011). Cells undergoing apoptosis through internal pathways were shown by the increase of caspase-3 (p = 0.015) and caspase-9 (p = 0.001) levels, but not caspase-8 (p = 0.080). This treatment has successfully reduced the number of living osteosarcoma cells by 14.7% (p = 0.000) and increased cell death up to 4.26% (p = 0.055). Apoptotic index was markedly increased to 16% (p = 0.001). 200 kHz non-contact electric field exposure can disrupt osteosarcoma progression through disruption of normal cell cycle via p53-independent p21 pathway and induction of apoptosis.

1. Introduction

Osteosarcoma is a highly malignant primary tumor on bone that mainly affects children and young adolescents (Solomon et al. 2010). In Indonesia, osteosarcoma was recorded to account for 22–25% of all bone and joint cancers (Hutagalung 2005; Ismono 2003) Osteosarcoma cells are the most significant inherent determinant for a bad prognosis in osteosarcoma patients because they are more prone to spreading and developing metastases (Bielack et al. 2002). The majority of the time, osteosarcoma spreads to the lungs, while it can also happen to bone and lymph nodes, the progression of osteosarcoma is marked by aggressive growth and local recurrence, resulting in low life expectancy caused by metastasis to lungs in more than 50% cases. So far, osteosarcoma therapy still combines some therapy modalities, including radiation therapy, immunotherapy, chemotherapy which uses chemotherapeutic agent, biological agent or neoadjuvant therapy, and surgical treatment including limb salvage and amputation (Jaffe et al. 2013). However, these therapies are...
high costs and can cause side effects, such as pain and nausea, and may also affect the healthy cells (Agarwal and Nayak 2012; Chen et al. 2013; Dicarpio et al. 2003; Hutagalung 2005; Harisson et al. 2018; Jaffe et al. 2013; Yang 2005).

Several alternative therapies have been proposed to treat osteosarcoma. Numerous cancer medicines that target cancer cells directly and specifically are under clinical development, e.g., multi-target drugs for receptor tyrosine kinase inhibitors, cell cycle and DNA repair proteins, or through indirect targeting of microenvironment modulation, such as macrophage regulator and loaded T lymphocytes (Brown et al. 2018). However, not only chemical drugs development, but several physical therapies have also been proposed, such as phototherapy (Yu et al. 2017), cold atmospheric plasma (Gumbel et al. 2017), ultrasound (Agnese et al. 2019), magnetic and water-based hyperthermia (Herea et al. 2018), and pulse electromagnetic field (Muramatsu et al. 2017). Having antimitic effect on cells that ultimately results in cell death (Kirson et al. 2004; McCaig et al. 2005; Rachmat et al. 2017), currently, alternating current, low intensity, intermediate frequency electric fields, have been revealed as a novel cancer treatment (Hottinger et al. 2016; Kirson et al. 2004). In our previous study, low intensity (18 Vpp) and intermediate frequency (100 kHz) electric fields exposure has shown anti-proliferative effect on breast cancer cells, in vitro and in vivo (Alamsyah et al. 2015), and was successfully inhibited in the proliferation of HeLa and oral cancer cells (Mujib et al. 2017). This intermediate frequency is used to treat cancer because it specifically targets cancer cells without affecting normal cells. Furthermore, we develop non-contact electric fields to avoid dermatitis or other injuries due to direct contact between the electrodes and the skin of animal model, as reported by Kirson et al. (2007).

Apoptosis is the main barrier of oncogenesis and tumor suppressor protein p53 is the main key for the regulation of apoptosis and carcinogenesis which is mediated by two main pathways, extrinsic and intrinsic pathways. In extrinsic pathway, caspase 8 activation occurs to induce apoptosis, whereas in the intrinsic pathway, there is a role of mitochondrial protein in caspase 9 activation to induce apoptosis. Both mechanisms resulted in pro-caspase 3 cleavage to become active caspase 3, the main executioner in the apoptosis. Caspase-3 causes chromosomal DNA degradation and induces cytoskeletal reorganization and cell body disintegration (Fiandalo and Kyprianou 2012; Lahiry et al. 2010; Maximov and Maximov 2008; Olsson and Zhivotovsky 2011; Parissh et al. 2013; Pirnia et al. 2002; Silke and Meier 2013). Protein p53 is an important factor that inhibits tumor progression by activating p21 protein that regulates cell cycle progression (Maximov and Maximov 2008). Mutations of p53 gene is the commonest mutation in more than 50% of cases of malignancy especially in osteosarcoma (Yao et al. 2014). The p53 protein in normal cells remains low so that cells keep growing and proliferating (Bai and Zhu 2006). Low p53 protein concentration is caused by the regulation of Murine Double Minute 2 (MDM2) oncoprotein. In most cases of osteosarcoma, MDM2 gene is overexpressed and this is related to a poor clinical prognosis (Hou et al. 2019). MDM2 functions as E3 ubiquitin ligase and is responsible for the continued degradation of p53 in normal cells.

Based on the backgrounds, intermediate frequency and low intensity electric field exposure can be a prospective, less invasive cancer therapy. As far as we know, this kind of novel treatment has not been done on osteosarcoma cancer cells. Based on the backgrounds, intermediate frequency and low intensity electric field exposure can be a prospective, less invasive cancer therapy. Thereby we were interested in studying the effect of this therapy on MG-63 cell line human osteosarcoma in vitro through the evaluation of apoptotic markers p53, p21, caspase 3, caspase 8, caspase 9, and MDM2 expression.

2. Materials and Methods

2.1. Cell Culture

MG-63 cell lines (ATCC®CRL-2522), provided by Aretha Medika Utama, Biomolecular and Biomedical Research Center, Bandung, West Java, Indonesia, were cultured in complete medium (Minimum Essential Medium-α (MEM-α) (Biowest L0022) + 10% Fetal Bovine Serum (FBS) (Biowest S181H) + 1% penicillin streptomycin (Biowest L0022) in 37 oC and 5% CO2 conditions. After reaching 80 to 90% confluence, cells were harvested for treatments (Rachmat et al. 2017).

2.2. Treatments

Cells were harvested with 1 mL trypsin EDTA and centrifuged at 2,000 rpm for 5 minutes. Supernatant was discarded and pellet was suspended in 1 ml MEM-a medium. Cells were inserted into a 6-well
plate at $2 \times 10^4$ cells/well density. Complete medium was added as much as 3 ml and incubated for 24 hours. After 24 hours and the cells were already attached, the medium was replaced. The culture plates were positioned between two capacitive electrodes that were connected to an oscillator (Figure 1) that was provided by Centre for Medical Physics and Cancer Research Ctech Labs Edwar Technology (Alamsyah et al. 2015; Mujib et al. 2017). Later, the electrodes and plates were placed in incubator at 37°C and 5% CO₂. Cells were treated with 200 kHz for 6 days based on previous research with medium replacement every two days (Rachmat et al. 2017).

### 2.3. RNA Isolation and cDNA Synthesis

Aurum Total RNA Mini kit (Bio-Rad, 1708841) [California, USA] was used to perform RNA isolation. All procedures were referred to Afifah et al. (2019) and Widowati et al. (2020a) protocol. The iScript cDNA synthesis kit (Bio-Rad, 1708890) [California, USA] was used on performing cDNA synthesis according to the manufacturer’s protocol. Temperature reaction for cDNA synthesis was 25°C for 5 minutes; reverse transcription at 42°C for 30 minutes; RT Inactivation at 85°C for 5 minutes; and the last hold at 4°C for 5 min (Afifah et al. 2019; Widowati et al. 2020a).

### 2.4. Gene Expression Measurement with Real-Time PCR

The qPCR reaction was done using SsoFast Eva Green Supermix kit according to manufacturer’s protocols (BioRad, 172-5200) [California, USA] which contained: 5 µl evagreen, 2 µl each reverse and forward primers (See Table 1), 2 µl Nuclease...
osteosarcoma had changed into spherical shaped cells. As also can be seen from (Figure 2), the gap between cells was seen at all treated groups.

3.2. Non-contact Electric Field May Causes Cell Cycle Arrest

The 200 kHz frequency of alternate current electric field in our experiment had caused significant changes on p21 gene and MDM2 gene expression (Table 2). The expression of p21 gene increased significantly compared to control which indicated increase inhibitory activity in cell cycle progression. Due to the MDM2 gene’s role as a p53 negative regulator, its expression was lower than that of the control. Cell cycle arrest and apoptosis result from an increase in p53 levels, which also increases p53 transcriptional activity. Insignificant variations in p53 expression levels imply potential alternate p21 regulatory mechanisms protein activity that implicated increased p21 response and activity. However, insignificant changes in p53 expression level indicated that there might be an alternative pathway in p21 regulation.

3.3. Non-contact Electric Field Induces Apoptosis through Intrinsic Pathway

Electric field exposure had caused decrease in MG-63 human osteosarcoma cell survival by 14.7% (p = 0.000), referring to the percentage of live cells. The dead of the cells in treatment group was thought mainly due to apoptosis (Figure 3). The 200 kHz frequency of alternate current electric field had caused significant difference increase of apoptotic index from 1.95(1.77–2.07) to 17.53 (17.36–18.91) (p = 0.001), which means that the electric field induced cell apoptotic activity (Table 3). Caspase 9 expression difference significantly (p = 0.001), while changes in caspase 8 are insignificant (p = 0.080), indicates that the cells are mainly induced to undergo apoptotic activity through intrinsic pathway (Table 2). Difference in caspase 9 expression implicated in difference of caspase 3 as the apoptotic executor by four-fold (p = 0.015).
Figure 2. Electrical field reduces MG-63 alters cells' morphology. The figure above shows the MG-63 cell population through an inverted microscope at 6 days incubation at 20 × 20,000 magnification. The non-treated cells show triangular spindle shape morphology. The cells undergone massive proliferation and already reached 100% confluency at 6 days in the control group. Electrical field induction causes alteration on cells' morphology where they seem to shrink and have spherical morphology and show the gap between cells in the treatment group.

Table 2. Effect of 200 kHz electrical field induction to p53, p21, MDM2, casp3, casp8, casp9 relative gene expression in MG-63 human osteosarcoma cells. Data was presented mean±standard deviation. The single star (*) show statistically significant differences based on the t-test (p<0.05)

<table>
<thead>
<tr>
<th>Variable</th>
<th>200 kHz treated</th>
<th>Control</th>
<th>Significance (p-value)</th>
</tr>
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<tbody>
<tr>
<td>p53 Expression</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean (SD)</td>
<td>1.37 (0.06)</td>
<td>1 (0.0)</td>
<td>0.198</td>
</tr>
<tr>
<td>Median (range)</td>
<td>1.36 (1.31–1.43)</td>
<td>1 (1–1)</td>
<td></td>
</tr>
<tr>
<td>p21 Expression</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean (SD)</td>
<td>9.96 (0.06)</td>
<td>1 (0.0)</td>
<td>0.011*</td>
</tr>
<tr>
<td>Median (range)</td>
<td>9.65 (11.71–8.51)</td>
<td>1 (1–1)</td>
<td></td>
</tr>
<tr>
<td>MDM2 Expression</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean (SD)</td>
<td>0.67 (0.12)</td>
<td>1 (0.0)</td>
<td>0.065</td>
</tr>
<tr>
<td>Median (range)</td>
<td>0.63 (0.57–0.81)</td>
<td>1 (1–1)</td>
<td></td>
</tr>
</tbody>
</table>

Figure 3. Percentage of MG-63 human osteosarcoma cell conditions with or without 200 kHz electrical induction treatment. The graph shows the proportion of live cells, dead cells, cells that underwent apoptosis, and necrotic cells based on the Flow cytometry result. Electrical induction can reduce MG-63 human osteosarcoma cells survival and induce them to undergo apoptosis resulted in cell death. Data was presented mean ± standard deviation. The single star (*) show statistically significant differences based on the t-test (p<0.05)
Table 3. Effect of 200 kHz alternate current in MG-63 human osteosarcoma cells apoptotic activity. Data was presented as mean ± standard deviation. The single star (*) show statistically significant differences based on the t-test (p<0.05).

<table>
<thead>
<tr>
<th>Variable</th>
<th>200 kHz treated</th>
<th>Control</th>
<th>Significance (p-value)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caspase 3 Expression</td>
<td></td>
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<tr>
<td>Mean (SD)</td>
<td>4.05 (0.96)</td>
<td>1 (0.0)</td>
<td>0.015*</td>
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<tr>
<td>Median (range)</td>
<td>4.08 (3.07-4.99)</td>
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<td>Caspase 8 Expression</td>
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<tr>
<td>Mean (SD)</td>
<td>1.55 (0.34)</td>
<td>1 (0.0)</td>
<td>0.080</td>
</tr>
<tr>
<td>Median (range)</td>
<td>1.47 (1.25-1.93)</td>
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<td></td>
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<tr>
<td>Caspase 9 Expression</td>
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</tr>
<tr>
<td>Mean (SD)</td>
<td>8.71 (1.69)</td>
<td>1 (0.0)</td>
<td>0.001*</td>
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<tr>
<td>Median (range)</td>
<td>8.82 (6.96-10.34)</td>
<td>1 (1-1)</td>
<td></td>
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<tr>
<td>Apoptotic Index</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean (SD)</td>
<td>17.93 (0.85)</td>
<td>1.93 (0.15)</td>
<td>0.001*</td>
</tr>
<tr>
<td>Median (range)</td>
<td>17.53 (17.36-18.91)</td>
<td>1.95 (1.77-2.07)</td>
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4. Discussion

200 kHz non-contact electric field is the effective frequency to treat osteosarcoma and the therapy should be performed for at least six days to give significant effect (Rachmat et al. 2017). As indicated in (Figure 2) the TTFields causes spindle shaped osteosarcoma cells to undergo morphological changes to sphere-like shapes with gap between cells during six days of treatment. The morphological changes indicate cell stress, which is caused by microtubule and actin filament network misalignments. These cytoskeletons also playing roles in maintaining cells adherent junctions and junction associated proteins such as cadherin/catenin that attach to F-actin which are maintained by microtubules (Gloushankova et al. 2017; Kasioulis et al. 2017), microtubule and actin filaments give mechanical strength and membrane stiffness to the cells (Kelliher et al. 2019).

Mitotic aberrations related to centrosome and mitotic spindle defects causes premature p53-p21 and p21-p16 premature senescence phenotype (Dikovskaya et al. 2015; Schmidt et al. 2010). Our result shows that p21 is significantly upregulated due to electrical field exposure, however p53 is not. This may indicate that there is a mechanism of p53-independent p21 upregulation pathway, although it has been known that p21 is p53 target. MELK (Maternal Embryonic Leucine Zipper Kinase) inhibition could cause cell cycle arrest at G1 stage through p21 expression in p53-knockdown cancer cells. Further investigation demonstrated two transcriptional regulators of p21, FOXO (Fork head box O) -1 and -3 which were de-activated through phosphorylation by MELK, is upregulated in MELK-knock down cells (Matsuda et al. 2017). Another proposed mechanism is upregulation of p21/p27 through autophagy-mediated downregulation of F box protein Skp2 and p62/SQSTM1 expression independent of p53 status due to Quinacrine induction in ovarian cancer (Jung et al. 2018). Our data also shows that MDM2 is not significantly downregulated due to electrical field exposure. MDM2 is a protein that is responsible in Akt-MDM2-p53 signaling pathway in p21 regulation (Ignacio et al. 2018). The thing that drives apoptosis is from p53 signaling which transcribes and activates a large number of genes so that it undergoes apoptosis which in turn leads to tumorigenesis that causes DNA damage. a study conducted by Mujib et al. (2017) regarding the p53 expression of cancer cells under exposure to a low-intensity and medium-frequency non-contact electric field, found that 80-85% of positively stained cancer cells prevented cell division through p53 protein in oral cultured cells and HeLa. From (Figure 3) necrotic index is significantly higher (p = 0.003) in non-treated cells compared to treated cells. Induced by oxygen and glucose deprivation (OGD) and beginning with cell swelling, leading to membrane rupture and release of cytoplasmic contents into the extracellular space, necrosis has been considered as an accidental and genetically unprogrammed form of cell death. Cells in the inner regions of solid tumors (including osteosarcoma) display higher OGD because of insufficient blood supply. Necrosis has a promotion potential by releasing Damage-Associated Molecular Pattern molecules including HMGB1 (High Mobility Group Box1) which resulted in enhanced inflammatory responses, reactive oxygen formation, and metastasis.
through the release of proinflammatory cytokines by activating NFκB and inflammasomes pathway. While our result shows that non-contact electric field exposure might potentially inhibit necrosis while promoting apoptosis, potentially, the necrosis inhibition in 200 kHz electric field treated cells is caused by inhibition of miR-23a-3p expression (Dong et al. 2017). The mechanism probably lies in miR-23a-3p because there is a sharing pathway between miR-23a-3p and pro-apoptotic protein bax (Grieco et al. 2017).

Our result suggests that non-contact electric field exposure causes intrinsic pathway apoptosis, marked by significant higher of casp3 and casp9 expression. Intrinsic pathway is a non-receptor-mediated pathway that cause intracellular cascades within the cell and is initiated within mitochondria. While some studies have suggested that electrical pulse stimulation may cause membrane permeabilization (Nuccitelli et al. 2007; Silva et al. 2015, 2016), the inner mitochondrial membrane could change because of pore opening of mitochondrial permeability transition, mitochondrial transmembrane potential loss, and pro-apoptotic proteins release from the intermembrane space into the cytosol (Elmore 2007). We hypothesized that the same mechanism might cause mitochondrial membrane permeabilization that leads to initiation of apoptosis intrinsic pathway.

Control and regulation of the mitochondrial-mediated apoptotic event are initiated by members of the Bcl-2 protein family. Bax (Bcl2-associated X protein), one of the family members, plays a role in cytochrome c release that leads to activation of pro-caspase-9. Later caspase-9 will cleave caspase-3 as the executioner. This protein will act through activation of CAD (Caspase-Activated DNAse) in chromosomal DNA degradation. In addition to the tumor suppressor protein p53 having a critical role in the Bcl-2 proteins family regulation (Elmore 2007), Caspase 3 induces cytoskeletal reorganization and the cell disintegration into apoptotic bodies. Tumor treating fields (TTFields) prevent DNA damage repair by hindering homologous recombination repair, which may enhance Bax expression and enhance intrinsic pathway apoptosis (Giladi et al. 2017). The insignificance between p53 level in electric field treated tumor cells and control may suggest that there might be another mechanism of intrinsic pathway apoptosis which is p53-independent.

In osteosarcoma patients, the microRNA-95-3p is upregulated. When compared to normal controls, miR-95-3p expression was decreased in both high-grade and low-grade osteosarcoma tissues (Novello et al. 2013). Reduced expression of miR-95-3p is a statistically significant risk factor that lowers overall survival in patients with osteosarcoma and works as an anti-oncogenic miRNA in osteosarcoma (Niu et al. 2016). The miRNA-95-3p expression is probably inhibited during electric field exposure, in osteosarcoma cells, micro-RNA-95-3p inhibition increases caspase-3 and caspase-9 activities and Bax/Bcl-2 protein expression, and eventually suppresses cell growth and induces apoptosis. MiRNA-95-3p suppression also gives anticancer effects on cell growth by suppressing TGF-b and p-Smad2 while inducing p21 protein expression and suppressing cyclin D1 protein (Zhao et al. 2018).

From our result and literature review, we proposed the possible mechanism of TTFields induction in inhibiting osteosarcoma progression as shown in (Figure 4). The alternating current may affect osteosarcoma cells through several mechanisms: 1) It causes mitotic aberration that causes p21 senescence phenotype through p53-independent pathway. This pathway is probably initiated by MELK inhibition that causes FOXO1 and FOXO3 transcription factor activation which upregulates p21. The upregulation of p21 resulted in inhibition of cyclin D1 that causes G1/S phase progression delay (senescence); 2) miR-23a-3p inhibition that resulted in necrosis inhibition and apoptosis progression; 3) inhibition of miR-95-3p that upregulate p21 and Bax, caspase9, and caspase3, marker proteins of apoptosis intrinsic pathway; 4) increased mitochondrial permeability that resulted in intrinsic pathway upregulation. In the intrinsic pathway apoptosis, protein Bax will cause cytochrome c release and together with caspase9 will create apoptosome that will result in caspase3 activation. Caspase3 later will cause cytoskeletal disorganization and DNA degradation through CAD activation; and 5) Inhibition of homologous repair that cause in DNA repair delay.

In conclusion, non-contact electric field exposure can disrupt osteosarcoma progression through disruption of cell morphology and adhesion between cells. Osteosarcoma treated with 200 kHz for 6 days gave the cell senescence through p53-independent p21 pathway. Cells undergone apoptosis through...
intrinsic pathway by the marked increase of casp-3 and casp-9 levels. This treatment had successfully reduced the number of living osteosarcoma cells by 14.7% and increased cell death by 4.26%. The non-contact electric field is an attractive candidate to serve as a novel, non-invasive treatment for osteosarcoma.

Conflict of Interest

The authors declare that they have no competing interests.

Acknowledgments

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