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Original Article

Two Chinese Herbal Regimens Safe for the Elderly on Inhibiting Liver and Bladder Tumor Cell Growth and Regulating Gene Expression^{\dagger}

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SUMMARY

Background: Cancers have become one of the most lethal diseases in elders. In traditional Chinese medicine, Tan-Chih-Hsiao-Yao-San (TCHYS) and Long-Daan-Shiah-Gan-Tang (LDSGT) are used to treat cancers. However, the growth-inhibitory effects and gene expression profiles of these drugs on cancer cells are still unclear.

Methods: This study assessed the effects of TCHYS and LDSGT on viability of liver and bladder tumor cells, and bladder TCCSUP cells were further subjected to profile gene expression patterns with microarray technology for identifying gene candidates that may be involved in the tumorigenesis.

Results: The results revealed that both drugs significantly eliminated the growth of Chang liver and three hepatoma cells. On the contrary, the embryonic liver WRL68 cells showed less response to the treatments, whereas the control agent genistein had much higher inhibitory effect in WRL68 cells than in the other hepatoma cells. Both TCHYS and LDSGT, as well as cisplatin and paclitaxel, exhibited dose-dependent suppression on the viability of all bladder cancer cells. To characterize the possible regulation for such effects, the profiling of gene expression was performed with complementary DNA chips. When bladder transitional cell carcinoma (TCC) TCCSUP cells were treated with TCHYS, 29 upregulated and 28 downregulated genes were detected; whereas 54 genes were upregulated in the same cells treated with LDSGT. Moreover, the detected gene expression patterns were also confirmed by using the reverse transcription-polymerase chain reaction assay.

Conclusion: This study initiates the evaluations of drug efficacies and gene expression profiles of traditional Chinese medicines, which may provide important information and identify useful biomarkers for treating cancers.

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1. Introduction

Aging involves a complex physiologic process that may lead to increased susceptibility to cancers and other diseases^{1,2}. An article

** Co-correspondence to: Dr Ching Li, Department of Microbiology and Immunology, National Chiayi University, 300 Syuefu Rd, Chiayi 600, Taiwan. investigated the male-to-female incidence rate ratios for specific cancer sites and histologies for the period from 1975 to 2004 and found that urinary bladder cancer and hepatocellular carcinoma (HCC) (aged 40–59 years) are two of the largest increases of cancers³. Although surgical and chemotherapeutic procedures are the routine treatment approaches, many cancer patients in different stages of disease have selected treatment with alternative medicines, because there are numerous successful cases of prescribing traditional Chinese medicine (TCM) to treat cancer patients that result in substantial health improvements^{4,5}. The clinical practice and therapeutic theory of TCM are completely different from those of Western medicine. Accordingly, the doctors of Chinese medicine select the appropriate herbal formulas for treating patients, after considering holistically patients' constitution, predisposition,

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stamina, as well as their physical and mental strengths against the illness. For hundreds of years, if not thousands, several kinds of traditional Chinese herbal formulas or TCM have been recommended for treating disease symptoms similar to cancers in China, Taiwan, and the Chinese-populated countries/regions. In particular, Tan-Chih-Hsiao-Yao-San (TCHYS) and Long-Daan-Shiah-Gan-Tang (LDSGT) are two of the most well known and popular herbal formulas used for treating cancers of liver, kidney, and bladder origins⁶. However, patients who have been taking anticancer herbal medicines for a long time may also develop some side effects with different levels of severity⁷. Moreover, the efficacies of these frequently prescribed medicines like TCHYS and LDSGT have never been confirmed with the modern biomedical methodology, and the complexity of TCM formulas containing many constituents makes it very difficult to standardize the preparation of the herbal products.

For years, many laboratories worldwide have participated in the isolation of pure and bioactive chemical compounds from herb mixture-decocted extracts⁸. They anticipated the identification of similar or identical compounds from the functional-related herbal medicines so that the historical medicinal theory of "curing a disease with the administration of different Chinese herbal medicines" may be confirmed: however it seems not the case. We believe that the investigation of the molecular regulatory pathways in cells is the key to elucidating efficacies of herbal drugs, because different herbs blended and decocted together may produce many unaccountable bioactive compounds, but they may only exert their activity through the limited numbers of genes or molecular pathways in vivo. Therefore, the original intention was to use functional genomic technology to assess gene expression patterns in a variety of tumor cell lines treated with two clinical application-alike Chinese herbal drugs, TCHYS and LDSGT, both of which have been suggested to be anticancer.

Aging increases incidence of cancers and TCM is used for a long time to treat cancers. Because CHYS and LDSGT are commonly prescribed TCMs used for promoting health; their safety has been accepted for decades. Therefore, those regimens may be beneficial to the elderly with cancers who may not tolerate toxic regimens. The present study uses the cell line model to test the effects of TCHYS and LDSGT on inhibiting the growth of liver and bladder tumors, which have been reported to be susceptible to drug treatments clinically, and compare with those exerted by the modern anticancer agents such as genistein, cisplatin, and paclitaxel. Because both TCMs showed promising efficacies on all bladder transitional cell

Table 1

Component herbs of TCHYS and LDSGT

carcinoma (TCC) cell lines tested, bladder TCCSUP cell line was further subjected to profile gene expression patterns with microarray technology, which resulted in identifying many gene candidates that may be involved in the tumorigenesis of urothelial cell carcinoma. In summary, the significance of this study is to initiate the systematic and scientific evaluations of TCM, whose molecular and cellular bases of treating human diseases remain largely unknown.

2. Materials and Methods

2.1. Materials and herbal drug preparations

Molecular biological enzymes were mainly purchased from Stratagene (La Jolla, CA, USA) unless otherwise specified, whereas standard chemicals and reagents were obtained from Sigma (St. Louis, MO, USA). All reagents were used according to the recommendations of the manufacturers. Both TCHYS and LDSGT extracts were prepared and provided by Koda Pharmaceutics, Ltd (Taoyuan, Taiwan), a pharmaceutical company that conforms to Good Manufacturing Practice and is approbated by the Taiwan government. The herbal formulas and their preparation protocols are described in Table 1. When preparing LDSGT, Mutong (Caulis akebiae, Koda Pharmaceutics), but not Guamutong (Aristolochia manshuriensis Kom, Koda Pharmaceutics), was used so as to avoid possible toxicity of aristolochic acid that is produced by incorrect processing of Guamutong^{9,10}. Three other anticancer compounds, genistein, cisplatin (PLATINOL-AQ, Bristol Myers Oncology, Princeton, NJ), and paclitaxel (TAXOL, Bristol Myers Oncology), were also used for comparative studies. The stock solution of genistein (Sigma, St Louis, MO, USA, 50 mM) was prepared in pure DMSO (Sigma) and was later diluted to the appropriate concentrations with Dulbecco's Modified Eagle medium (DMEM) before use. The other two drugs were produced by the same pharmaceutical company (Bristol-Myers Squibb Co, New York, NY, USA), and made as aqueous reagents. All the above drugs (TCHYS, LDSGT, genistein, cisplatin, and paclitaxel) and diluting solvents (DMSO, water, and cell culture media) were prepared and handled under the endotoxin-free environment in our laboratories.

2.2. Cells and cell culture

Five human liver cell lines, including one Chang Liver cell line, three HCC (equal to hepatoma) HA22T/VGH, Hep3B and HepG2 cell

Drugs	Component herbs/amounts	Extraction processes
тснуѕ	Baishaoyao (Paeoniae lactiflora)/4 g Baizhu (Atractylodis macrocephalae)/4 g Chaihu (Bupleurum chinense)/4 g Danggui (Angelicae sinensis)/4 g Fuling (Poria cocoa)/4 g Ginger root (Zingiber officinale)/4 g Mudanpi (Moutan radicis)/2.5 g Peppermin (Mentha haplocalyx)/2 g Shanzhi (Gardenia jasminoides)/2.5 g	The herb mixtures (total weight of 33 g) were decocted under the endotoxin-free environment with 1.5 L of water to produce 7 g of extract paste containing 57.3% moisture.
LDSGT	Chaihu (B chinense)/4 g Cheqianzi (Semen plantaginis)/2 g Danggui (A sinensis)/2 g Huangqin (Scutellaria baicalensis)/2 g Longdancao (Gentiana scabra)/4 g Mutong (Caulis akebiae)/2 g Shanzhi (G jasminoides)/2 g Shengdihuang (Rehmain glutinosa)/2 g Shenggancao (Glycyrrhiza uralensis)/2 g Zexie (Rhizoma alismatis)/4 g	The herb mixtures (total weight of 26 g) were decocted under the endotoxin-free environment with 1.5 L of water to produce 5 g of extract paste containing 66.1% moisture.

Ipregul	ated genes				
	AHCYL1	S-Adenosylhomocysteine hydrolase-like 1	Hs.4113	AA179513	One-carbon compound
	AKAP1	A kinase (Adenosine 5' monophosphate-activated	Hs.78921	R37961	metabolic process RNA/protein binding
	AOP2	protein kinase, PRKA) anchor protein 1 Antioxidant protein 2	Hs.120	T65419	(1) Lipid catabolism
	BCR	Breakpoint cluster region	Hs.234799	R51875	(2) Oxidative stress(1) Signal transduction(2) Protein phoenhomilation
	BRCA2 homolog	EST1669 highly similar to BRCA2	NA	NA	NA
	CCNE	Cyclin E	NA	NA	(1) Cell cycle (2) Cell division
	CEBPG	CCAAT/enhancer binding protein (C/EBP). gamma	Hs.2227	AA179189	(1) Differentiation(2) Transcription
	E2F4	E2F transcription factor 4, p107/p130-binding	Hs.108371	R59900	Transcription
	EIF4B	Eukaryotic translation initiation factor 4B	Hs.93379	AA173296	Regulation of translation
	ELK1	ELK1	NA	NA	Regulation of transcription
	EPRS	Glutamyl-prolyl-tRNA synthetase	Hs.55921	T47357	tRNA aminoacylation
	ESTs 4002	NA	Hs.79308	R51324	NA
	ESTs	Weakly similar to alternatively spliced	NA	NA	NA
		product using exon 13A			
	ESTs 6051	NA	Hs.164352	T57042	NA
	HERC1	HECT and RCC1 (CHC1)-like domain 1	Hs.76127	AA181680	(1) Protein modification(2) Transport
•	HMGCR	3-Hydroxy-3-methylglutaryl-coenzyme A reductase	Hs.11899	R51541	 Biosynthetic process Development Oxidation reduction
,	IRE_6	IRE_6	Hc 11801	NΔ	NA
	MLN62	MLN62	NA	NA	(1) Apoptosis(2) Development
					(3) Signal transduction
•	NA6106	NA6106	NA	AA063310	NA
•	NUP210	KIAA0906 protein	Hs.56966	R37724	(1) Transport(2) Translocation
	PKIA homolog	ESTs, highly similar to PKIA	Hs.3407	NA	NA
	RALBP1	RalA binding protein 1	Hs.75447	AA085619	GTPase activator
	RCN1	Reticulocalbin 1	Hs.167791	AA114081	Calcium ion binding
	RPL27	Ribosomal protein L27	Hs.111611	AA190881	Translational elongation
•	SLC16A1	Solute carrier family 16 (monocarboxylic acid transporters), member 1	Hs.75231	R49543	Transport
i.	SOX22	SRY (sex-determining region Y)-box 22	Hs.43627	AA283123	Transcription
	TNNI2	Troponin I, skeletal, fast	Hs.83760	AA181380	Transcription
	UBE2H	Ubiquitin-conjugating enzyme E2H	Hs.28505	N35796	Protein ubiquitination
	UBXD2	KIAA0242 protein	Hs.77495	H10657	Response to unfolded protein
wnre.	gulated genes				
	C4A	Complement component 4A	Hs.170250	R37128	Complement activation
•	COH1	KIAA0532 protein	Hs.21077	R37311	NA
	CRABP1	Cellular retinoic acid-binding protein 1	Hs.7678	W95693	(1) Development(2) Signal transduction(3) Transport
	DLX4	Distal-less homeobox 4	Hs.172648	R32170	(1) Development (2) Transcription
	DTNA	Dystrobrevin, alpha	Hs.54435	H09172	Signal transduction
	ESTs 3978	NA	Hs.6262	T89093	NĂ
	EST	Homo sapiens mRNA full length insert cDNA clone EUROIMAGE 248114	Hs.8963	R33043	NA
<i>'</i> .	ESTs	Weakly similar to C44C1.2	Hs.10463	AA088448	NA
	EST	Homo sapiens clone 23808 mRNA sequence	Hs.12537	R39535	NA
	ESTs 5577	NA	Hs.21124	R20560	NA
•	EST	Homo sapiens cDNA FLJ20562 fis, clone KAT11992	Hs.107444	H09790	NA
	ESTs 5606	NA	Hs.113137	R60530	NA
	FEZ1	Fasciculation and elongation	Hs.79226	H09157	(1) Axon guidance
-	FGB	protein zeta 1 (zygin I) Fibrinogen, B beta polypeptide	Hs.7645	W94873	(2) Cell adhesion(1) Signal transduction
					(2) Protein polymerization
l.	HPCL2 MKP-1	2-Hydroxyphytanoyl-CoA lyase MAP kinase phosphatase-1	Hs.63290 Hs.109895	R41792 NA	Fatty acid alpha-oxidation (1) Protein dephosphorylation
•					
).					(2) Cell cycle (3) Oxidative stress

Table 2 (continued)

Genes f	or	Gene products	Hs.ID	Acc. No	Biological functions
48.	NA1337	NA1337	NA	R98174	NA
49.	NCL	Nucleolin	Hs.79110	H05666	Angiogenesis
50.	NELL1	NEL (chicken)-like 1	Hs.21602	H10041	Cell adhesion
51.	OAZIN	Antizyme inhibitor	Hs.223014	R32814	Polyamine biosynthetic process
52.	PR48	Protein phosphatase 2A 48 kDa	Hs.124942	W88679	NA
		regulatory subunit			
53.	PSG7	Pregnancy-specific beta-1-glycoprotein 7	Hs.173609	R35240	Female pregnancy
54.	PSMA6	Proteasome (prosome, macropain)	Hs.74077	H06487	Ubiquitin-protein activity
		subunit, alpha type 6			
55.	ROR1	Receptor tyrosine kinase-like	Hs.274243	H10667	(1) Protein phosphorylation
		orphan receptor 1			(2) Transmembrane receptor protein
					tyrosine kinase activity
56.	RPS9	Ribosomal protein S9	Hs.180920	H22514	(1) Cell proliferation
					(2) Translational elongation
57.	TAF1B	TATA box binding protein-associated factor,	Hs.121044	R32478	Regulation of transcription
		RNA polymerase I, B, 63 kDa			-

The Hs. ID numbers identify the genes sorted in the NCBI UniGene database in NIH, USA, whereas the Acc. No are the official identification numbers for the genes stored in databases. Gene numbers 5 (BRCA homolog), 7 (CEBPG), and 8 (E2F4) were chosen for the semiquantitative reverse transcription-polymerase chain reaction confirmation on the gene expression patterns (Fig. 4).

Acc. No = accession numbers; cDNA = complementary DNA; NA = nonavailable.

lines, one embryonic WRL68 cell line, and three bladder TCC T24, TSGH-8301 and TCCSUP cell lines, were obtained from Bioresources Collection and Research Center (Hsinchu, Taiwan). All of the cells were routinely cultured in Dulbecco's-modified Eagle's medium, supplemented with 10% fetal bovine serum, 100 U/mL penicillin, and 100 μ g/mL streptomycin (these tissue cultural reagents were from Gibco, Grand Island, NY, USA), under 5% CO₂ at 37°C.

2.3. Cell viability assay and microarray hybridization

The growth rates of tumor and normal cell lines were determined by cell proliferation assay using a tetrazolium compound and phenazine ethosulfate provided in a commercial reagent package (CellTiter 96® AQueous One Solution Cell Proliferation Kit, Promega; Madison, WI, USA). When performing assays, approximately 5,000 cells were seeded into the wells of 96-well culture plates, followed by the addition of 100 µL of culture medium containing various concentrations of TCHYS, LDSGT, genistein, cisplatin, or paclitaxel, as indicated in the figures. The cells were incubated for 72 hours before being applied to the cell proliferation assaying reagents according to the protocol of the Kit. The production of complementary DNA (cDNA) microarray (cDNA chip) containing 6,371 human genes/expression sequence tags followed the protocols described previously¹¹⁻¹³. The experiments of profiling gene expression patterns were performed at least three times with mRNA samples derived from bladder TCC TCCSUP cells treated with 1.0 mg/mL of TCHYS or LDSGT extract individually for 0, 1, 2, 6, 12 and 24 hours. In every experiment, 4 µg of mRNA were subjected to one-step cDNA conversion and biotin labeling, followed by hybridizing to cDNA chips, as described previously^{11–13}. The colorimetric detection procedure produces a blue image when the biotin-labeled cDNA targets hybridize to human gene probes spotted on cDNA chips. The darker the color, the higher the transcriptional levels of the target genes in the cells are. The cDNA-chip image can be computerized using a high-resolution scanner (PowerLook 3000, UMAX; Taipei, Taiwan) and then digitized using a Web site available (www.microarrays.org/) program ScanAlyze¹⁴.

2.4. Reverse transcription-polymerase chain reaction verification of gene expression patterns

Although all cDNA microarray hybridization experiments had been performed three times to obtain the consensus lists of genes with altered gene expression patterns (Tables 2 and 3), the expression levels for the genes of interest were subjected to experimental verification by a semiguantitative reverse transcription-polymerase chain reaction (RT-PCR) method described earlier^{11,15}. In the present study, the genes for BRCA2 homolog, CEBPG (accession number AA179189) and E2F4 (accession number R59900), which show altered expression patterns at various time points during the treatment of TCCSUP cells with TCHYS, are selected for the confirmative experiments. The amplification primer sets used were (1) the BRCA2 homolog gene: 5'-GTG GCACCAAATACGAAACA-3' and 5'-CCCGATACACAAACGCTGAG-3'; (2) the CEBPG gene: 5'-TCGGGAATTGTGAGGTGACT-3' and 5'-AACA GCTGCAGAATGGACTT-3'; and (3) the E2F4 gene: 5'-GCAGGGGAA CAGGACTCAGC-3' and 5'-AGGTGGGGCCAATCATCAGG-3'. In all experiments, the amplification of the β -Actin gene was used to normalize the amount of RNA used. RT-PCR of these genes was performed at the cycles when the detected amplicon molecules were in the exponential increasing stage. After performing many tests to correlate amounts of the PCR product with number of thermocycles (data not shown), we used 20 amplification cycles for the β -Actin gene and 27 cycles for other three genes. The RT-PCR products of the target genes were then visualized by agarose gel electrophoresis in the presence of ethidium bromide, followed by fluorescent intensity quantifications and comparisons.

2.5. Statistical analysis

The results are expressed as the mean \pm standard derivations from at least three experiments. Statistical comparisons were based on the Student *t* test or analysis of variance. Differences were considered significantly at *p* < 0.05. All statistical analyses were carried out using SigmaStat software (Jandel Scientific, San Rafael, CA, USA).

3. Results

3.1. Inhibitory effects of TCHYS and LDSGT on hepatoma cell lines

The components and the extraction procedures of TCHYS and LDSGT were listed in Table 1 and the yield of these two drugs were about 21.6% and 19.2%, respectively. TCHYS and LDSGT extracts were first tested for their growth inhibitory capability on nonmalignant liver epithelial (Chang Liver) and liver embryonic (WRL68), hepatoma (HA22T/VGH, Hep3B, and HepG2) cell lines. The results

 Table 3

 Alternations in gene expression levels in TCCSUP cells treated with LDSGT

Genes f	or	Gene products	Hs, ID	Acc. No	Biological functions
Unregulated genes					
1	AKT2 homolog	Highly similar to Rac-beta serine/threonine kinase	NA	NA	NA
2	RIP	Rip	Hs 95008	X87949	NA
3	CAPN2	Calpain large polypeptide 12	Hs 76288	R39609	Proteolysis
4	CCT2	Chaperonin containing TCP1 subunit 2 (heta)	Hs.6456	R12806	Protein folding
5.	CD138	CD138	Hs.82109	NA	NA
6	CDC37	CDC37 (cell division cycle 37	Hs 160958	R17767	(1) Protein targeting
0.		Saccharomyces cerevisiae homolog	113,100330	K17707	(2) Cyclin-dependent protein kinase
		Succharomyces cerevisiae, noniology			(2) IFN-mediated signaling
7	CFTR	Cystic fibrosis transmembrane conductance regulator	Hs 663	AA515982	Respiratory gaseous exchange
	IN	ATP-binding cassette (subfamily C member 7)	115,000	101313302	Respiratory Suscous exchange
8	CGI-119	CGI-119	Hs.25615	AA133459	Protein binding
9.	CHI3L2	Chitinase 3-like 2	Hs.154138	T65854	Chitin catabolic process
10.	CKS2	CDC28 protein kinase 2 (CKS2) mRNA	NA	NA	(1) Cell division
					(2) Cell proliferation
					(3) Signal transduction
					(4) Spindal organization
11.	CLTA	Clathrin, light polypeptide (Lca)	Hs.104143	T65963	Transport
12.	COL4A4	Collagen, type IV, alpha 4	Hs.180828	H68555	Strengthening of neuromuscular
		-O- / JI - / - F			junction
13.	CPG2 homolog	EST, highly similar to CPG2 protein	Hs.43398	N23629	NA
14.	CRABP1	Cellular retinoic acid-binding protein 1	Hs.7678	H92182	(1) Development
		O r			(2) Signal transduction
					(3) Transport
15.	CYP4F3	Cytochrome P450, subfamily IVF, polypeptide 3	Hs.106242	AA099667	(1) Leukotriene metabolic process
		(leukotriene B4 omega hydroxylase)			(2) Oxidation reduction
16.	DF	D component of complement (adipsin)	Hs.155597	AA037782	NA
17.	EST	NA	NA	AA070188	NA
18.	EST	NA	Hs.8469	T40769	NA
19.	EST	Weakly similar to hypothetical protein	Hs.31848	AA069144	NA
20.	EST	Weakly similar to RCN1_human	Hs.39619	H73236	NA
		reticulocalbin 1 precursor			
21.	EST	Weakly similar to T20B12.3	Hs.95196	H61179	NA
22.	EST	KIAA1285	Hs.119175	AA031699	NA
23.	EST	NA	Hs.123069	AA043364	NA
24.	EST	NA	Hs.193771	T95064	NA
25.	EXT2	Exostoses (multiple) 2	Hs.75334	R39966	(1) Cell cycle
					(2) Signal transduction
					(3) Biosynthesis
					(4) Ossification
26.	FKBP4	FK506-binding protein 4 (59 kDa)	Hs.848	H21077	Protein folding
27.	HLA-DPB1	Major histocompatibility complex, class II, DP $\beta 1$	Hs.814	N23695	Antigen processing and
					presentation, MHC II
28.	HSD11B2	Hydroxysteroid (11-beta) dehydrogenase 2	Hs.1376	T49293	(1) Glucocorticoid biosynthesis
					(2) Oxidation reduction
29.	IGF2R	Insulin-like growth factor 2 receptor	Hs.76473	R40651	(1) Transport
					(2) Signal transduction
30.	ITGB1	Integrin beta-1 (fibronectin receptor, beta polypeptide,	Hs.166373	NM_002211	(1) Adhesion
		antigen CD29 includes MDF2, MSK12) mRNA			(2) Integrin-mediated signaling
					pathway
31.	IVD	Isovaleryl-coenzyme A dehydrogenase	Hs.77510	R38739	Oxidation reduction
32.	KCNJ13	Potassium inwardly rectifying channel,	Hs.11364	H97186	Potassium ion transport
	MARGUO	subtamily J, member 13			
33.	MARCKS	Myristoylated alanine-rich protein kinase C substrate	Hs.75607	AA031774	(1) Actin filament binding
	MDUD			1110000	(2) Calmodulin binding
34.	MDH2	Malate dehydrogenase 2, NAD (mitochondrial)	Hs.111076	H19304	(1) Glycolysis
					(2) TCA cycle
25	METTER 1	Mathedramoforman like 1	11- 42057	D17664	(3) UXIDATION reduction
35. 20		Metrix metallemetainee 7 (metailerin staria)	HS.42957	KI/004	(1) Collagon estate l'ant
30.	IVIIVIP7	watrix metanoproteinase 7 (matrilysin, uterine)	HS.2250	AAU31514	(1) Collagell Catabolism (2) Protochusis
27	NDM1	Nucleophosmin (nucleolar	Uc 172205	D27221	(2) Proteolysis (1) Antiaportesis
57.	14121011	nucleophosnini (nucleolar phosphoprotoin P22, pumatrin)	пз.1/3205	N37231	(1) Annapoptosis (2) Transport
		ארט			(2) IIdlispuit (3) Signal transduction
					(4) Stress
					(5) Cell proliferation
38	OLFR91 homolog	FSTs moderately similar to	Hs 269151	H69005	NA
50.	Stand 1 Homolog	olfactory receptor-like protein	113,203131	1105005	
39	PFKP	Phosphofructokinase, platelet	Hs.99910	NA	Glycolysis
40.	POLR2E	Polymerase (RNA) II (DNA directed)	Hs.24301	AA031493	(1) Transcription
		polypeptide E (25 kD)			(2) mRNA splicing
					(3) Interspecies interaction
41.	PPA2267 homolog	ESTs, highly similar to 6-phosphofructokinase, type C	Hs.99910	NA	NA

Effects of TCHYS and LDSGT on Tumor Cells

Table 3 (continued)

Genes for		Gene products	Hs. ID	Acc. No	Biological functions
42.	PRKAA2 homolog	ESTs, highly similar to 5'-AMP-activated protein kinase, catalytic #2 chain	NA	NA	NA
43.	QDPR	Quinoid dihydropteridine reductase	Hs.75438	R38198	(1) Metabolism
					(2) Oxidation reduction
44.	RAC1	Ras-related C3 botulinum toxin substrate 1	Hs.173737	R37122	(1) Structure morphogenesis
		(rho family, small GTP binding protein Rac1)			(2) Cell adhesion
					(3) Cell motion
					(4) Signal transduction
					(5) Hydrogen peroxide metabolism
45.	RB1CC1	KIAA0203 gene product	Hs.50421	R38102	(1) Cell cycle
	BBI 00				(2) Transcription
46.	RPL28	Ribosomal protein L28	Hs.4437	AA035400	Translational elongation
47.	RPS15A	Ribosomal protein S15a	Hs.2953	R33435	(1) Cell cycle
					(2) Cell proliferation
10	CERRING	Cardia II and the factor	N1.4	N1.4	(3) Iranslational elongation
48.	SERPINES STAT1	Cyclin H assembly factor	NA Us 21490	NA AAO252C2	(1) WW/NE bP assessed
49.	SIATI	of transcription 1, 01 kDa	П5.21460	AA055502	(1) INK/INF-KD Cascade
		of transcription 1, 91 kDa			(2) Caspase activity (2) Interspecies interaction
					(3) Interspectes Interaction (4) Transcription
					(4) Transcription (5) Tyrosing phosphorylation
50	ΤΙΔΕ1	TCEB1_induced antiapoptotic factor 1	Hc 75877	44035188	(1) IKK/NE-KB cascade
50.	11/11 1	Torbi-induced annapoptotic factor 1	113.75022	101055100	(1) INCINI-RD Cascade (2) Apoptosis
51	TPP2	Tripeptidyl peptidase II	Hs 1117	R39682	Proteolysis
52	VIL2	Villin 2 (ezrin)	Hs 155191	AA068995	(1) Cytoskeletal anchoring
					(2) Adhesion
					(3) Cell shape
53.	XRCC5	X-ray repair complement defective repair	Hs.84981	H17933	(1) Double-strand break repair
		in Chinese hamster cells 5 (Ku autoantigen, 80 kDa)			(2) Viral infection
					(3) Telomere maintenance
54.	YWHAQ	Tyrosine 3-monooxygenase/tryptophan	Hs.74405	H11374	Transcription
		5-monooxygenase activation			-

The Hs. ID numbers identify the genes sorted in the NCBI UniGene database in NIH, USA, whereas the Acc. No are the official identification numbers for the genes stored in databases.

Acc. No = accession numbers; NA = nonavailable; NAD = nicotine adenine dinucleotide; TCA = tricarboxylic acid.

revealed that the viability of WRL68 cells remained unchanged when being treated with 1.5 mg/mL or less of either drug, whereas the cell viability just reduced slightly (to about 80% growth rate of mock-treated cells) when the maximal concentration of 2.0 mg/mL was used (Fig. 1A). On the other hand, the growths of all other liver cell lines were mildly stimulated by TCHYS and LDSGT at low concentrations (1.0 mg/mL or less of either drug), ranging from 110 to 130% of the mock-treated cells (Fig. 1B–E). When being treated with drug of higher concentrations (greater than 1.5 mg/mL TCHYS or at 2.0 mg/mL LDSGT), the growth rate of Chang Liver cells reduced dramatically to 10–20% (Fig. 1B). In the malignant hepatoma or HCC cells, high concentration (2.0 mg/mL) of these two drugs significantly decreases the cell viability (Fig. 1C–E).

In parallel, an isoflavone and tyrosine protein kinase inhibitor, genistein, which had been reported to be effective in treating bladder tumor cells^{11,12,15}, was used as the control agent. The data showed inhibitory effect on WRL68 cell growth, as the cell viability could readily be suppressed to 40% of the mock-treated cells at the concentration greater than 20 μ M (Fig. 1A). For the other liver and hepatoma cells, Chang Liver, HA22T, and Hep3B cells, genistein at high concentration of 80 μ M has only less than 25% inhibitory effect (Fig. 1B–D). Furthermore, there was almost no response with genistein treatment in hepatoma HepG2 cells (Fig. 1E).

3.2. Inhibitory effects of TCHYS and LDSGT on human bladder TCC cell lines

In contrast to human liver and hepatoma cell lines, both TCHYS and LDSGT had marked inhibitory effects on growth of all bladder TCC cell lines tested in this study (Fig. 2A and B). All T24, TCCSUP, and TSGH-8301 cell lines exhibited dose-dependent reductions in growth rates responding to the treatments of increasing concentrations of TCHYS or LDSGT (from 0.6 to 2.0 mg/mL), and the levels could be reduced to less than 20% growth rate of untreated cells. The positive control drug cisplatin can also dramatically reduce the growth rates of all bladder TCC cell lines to less than 10% at the concentrations of as low as $10 \mu g/mL$ (Fig. 2C). However, T24, TCCSUP, and TSGH-8301 cells exhibited somewhat dose-dependent growth inhibitory patterns at lower concentrations of paclitaxel, from 0.001 to 0.1 μ M. With greater amounts (>0.1 μ M) added to the culture medium, their growth rates reduced to different levels (Fig. 2D), with the TSGH-8301 cell line being most susceptible to the inhibition (to less than 30% growth rate of mock-treated cells), followed by TCCSUP cells (to about 50%) and the least responsive T24 cells (only to 80%).

3.3. Profiling of gene expression patterns in TCCSUP cells treated with TCHYS or LDSGT

Among all cell lines treated with TCHYS and LDSGT, the bladder tumor TCCSUP cell line exhibited relatively the best, most similar growth inhibitory responses (down to about 30%) to both drugs (at 1.0 mg/mL concentrations), and was thus chosen for further profiling of gene expression patterns by cDNA-chip hybridization/ colorimetric detection. Approximately 0.9% (57 genes selected in TCHYS experiments, Table 2) and 0.8% (54 genes in LDSGT group, Table 3) of the total 6,371 genes spotted on cDNA chip exhibited substantial altered gene expression levels. There are 29 and 28 genes whose expression levels were induced and repressed, respectively, when TCCSUP cells were treated with TCHYS (Fig. 3A and B); whereas only gene expression inductions were detected, 54 of them, in LDSGT-treated cells (Fig. 3C and D). The genes identified here may be involved in inhibiting bladder tumor cell growth that warrants further investigation.



Fig. 1. Growth inhibitory effects of TCHYS and LDSGT extracts on liver cell lines. Viabilities of (A) WRL68, (B) Chang Liver, (C) HA22T/VGH, (D) Hep3B, and (E) HepG2 liver cells treated with TCHYS, LDSGT, or genistein are shown. Approximately 5,000 cells were treated with the indicated concentrations of the TCHYS or LDSGT extract (0-2.0 mg/mL) or genistein ($0-50 \mu$ M for WRL68 cells or $0-80 \mu$ M for other cell lines), followed by assaying cell growth rates. Experiments in the present study are performed at least three times, and the results are shown as means \pm standard deviations. *Significance (p < 0.05 by the *t* test), as the tested values are statistically compared with those of mock-treated cells for the two drugs or cells treated with 1% DMSO, the solvent to dissolve genistein. LDSGT = Long-Daan-Shiah-Gan-Tang; TCHYS = Tan-Chih-Hsiao-Yao-San; DMSO.



Fig. 2. Growth inhibitory effects of TCHYS and LDSGT extracts on bladder cell lines. Viabilities of T24, TCCSUP, and TSGH-830 bladder transitional cell carcinoma (TCC) lines treated with (A) TCHYS, (B) LDSGT, (C) cisplatin, and (D) paclitaxel were assessed. Approximately 5,000 cells were treated with different concentrations of TCHYS, LDSGT, and the positive control drugs cisplatin and paclitaxel, followed by cell viability assays to reveal the growth inhibitory effects. The concentrations used here are: 0-2.0 or 1.8 mg/mL with increasing intervals of 0.2 mg/mL for the TCHYS or LDSGT extract, respectively; 0-20 µg/mL with increasing intervals of 2.0 µg/mL for the TCHYS or LDSGT extract, respectively; 0-20 µg/mL with increasing intervals of 2.0 µg/mL for the tree times, and the results are shown as means \pm standard deviations. *Significance (p < 0.05 by the *t* test), as the tested values are statistically compared with those of mock-treated cells. LDSGT = Long-Daan-Shiah-Gan-Tang; TCHYS = Tan-Chih-Hsiao-Yao-San.

3.4. Confirmation of gene expression patterns by semiquantitative RT-PCR assay

To verify the detected gene expression patterns, semiquantitative RT-PCR was used to check the transcription levels of three genes of interest identified previously. Fig. 4A shows that, basically, the expression levels for the BRAC2 homolog, CEBPG, and E2F4 genes (Gene Nos. 5, 7, and 8, respectively) are all upregulated in TCCSUP cells by the TCHYS treatment of 0–2 hours, and then decrease. Thus, the time-course changes detected by RT-PCR are similar to those detected by cDNA chips (Table 2 and Fig. 4B–D), especially at the early time points (0–6 hours posttreatment) of drug treatment to TCCSUP cells. These data suggest that the results obtained from cDNA microarray profiling gene expression patterns are faithful.

4. Discussion

In Taiwan, the prevalence of cancers, including hepatoma and bladder TCC, also increases rapidly, and it has become one of the most lethal diseases in elders¹. In this study, we tested the inhibitory effect of TCHYS and LDSGT, two common clinically prescribed TCM for promoting health, on the growth rates of four human liver and three bladder tumor cell lines (Figs. 1 and 2). The purpose of this study was to (1) examine the efficacies of herbal medicines

with the current bioassay technique using the cell line model and (2) profile the gene expression patterns that may lead to the discovery of the molecular pathway responsible for the effects of these herbal drugs. We detected that the liver cell lines did not respond well to the treatment of either herbal extracts at the concentration ranges tested, whereas both drugs suppressed the growth of all three bladder TCC cell lines in a dose-dependent manner. In parallel, this study used several control compounds in the same assaving methods, and one of the results indicates that genistein and the tested TCM extracts exert their anticancer functions on different regulatory pathways because both TCHYS and LDSGT inhibited efficiently the growth of bladder TCC T24 cell line, which overexpressed the oncogenic H-Ras that rendered the resistance to the treatment of genistein¹⁵. Furthermore, the present study also tested two other control anticancer drugs cisplatin, which causes cross-linking of nucleic acid molecules in vivo, and paclitaxel, which inhibits microtubules assembling, that were manufactured to treat patients with bladder, breast, and/or other tumors in clinics^{16,17}. These two drugs were found to inhibit the growth rates of the tested bladder TCC cell lines to different levels.

The mystery of TCM is that they are usually composed of many herbal components which can only be efficacious when decocted with the appropriate amount of water or ethanol for several hours. As one may have known, TCHYS and LDSGT each contain 10 herbs



Fig. 3. Gene expression alternations in TCCSUP cells treated with TCHYS and LDSGT. The expression-level plots of (A) upregulated genes and (B) downregulated genes in TCHYStreated cells. Briefly, the digitalized signals for all genes on complementary DNA chips detected at six time points (0–24 hr) were compared with those at time 0 to yield the fold changes at different time points. Panels (C) and (D) show the genes with induced expression patterns, during the treatment of bladder transitional cell carcinoma (TCC) TCCSUP cells with LDSGT for a period of 24 hr. The identified genes, with their Gene numbers (No.) assigned in Table 2 or 3, are sequentially arranged from the higher gene expression levels to the lower ones. LDSGT = Long-Daan-Shiah-Gan-Tang; TCHYS = Tan-Chih-Hsiao-Yao-San.

including three identical and seven specified herbs (Table 1); and yet they are used to treat different as well as similar symptoms clinically. Chaihu, Danggui, and Shanzhi are the three identical herbs used in both TCHYS and LDSGT. Extracts from Chaihu (Bupleuri chinese) may be effective as a therapeutic agent to treat hepatomas only, because it increased mitochondria membrane potential collapse in HepG2 cells, but not in lymphocytes¹⁸. Danggui (Angelicae sinensis) has been reported to possess immunomodulatory functions, as the treatment of Danggui-containing TCM to cancer patients, who were receiving chemotherapy and/or radiotherapy, showed improvement in their immune functions⁵. Finally, geniposide, an iridoid glucoside extracted from Shanzhi (Gardenia jasminoides), was an effective hypoglycemic agent, by inhibiting the hepatic glycogen phosphorylase and glucose-6phosphatase activities, in diabetic mice¹⁹. The Shanzhi extract has also been reported to possess antigastritic, antioxidant, acidneutralizing, and anti-Helicobacter pylori activities²⁰. It is worthy to note that when we prepared LDSGT, Mutong (Caulis akebiae), instead of Guamutong (Aristolochia manshuriensis Kom), was used so as to avoid the toxic aristolochic acid produced by incorrect processing of Guamutong^{11,12}. In fact, described in a recently published Chinese Internal Medicine textbook²¹, TCHYS is suggested repeatedly for patients suffering from a variety of symptoms, such as abdominal/gastric distention, poor appetite, anorexia, headache, and irregular menstruation of dysmenorrhea for women; whereas LDSGT is prescribed on 10 different occasions to treat illnesses manifesting soreness of lower limbs, distending pain, insomnia, low fever, anxiety, irritability, loss of hair, and inability to have penis erection with frequent nocturnal emission for men. Therefore, it seems that these TCMs have versatile therapeutic applications and the molecular and cellular basis of such efficacies merit further investigation.

On examining symptoms that can be released by TCHYS and LDSGT, many similarities are found. This remains a puzzle in our clinical practice of TCM; how can different herbal drugs, which comprise many different herbs, be used for treating similar illnesses. Therefore, the present study aimed to use functional genomic technology to assess gene expression patterns in a variety of liver and bladder tumor cell lines treated with TCHYS and LDSGT, which are clinical application-alike TCM and prescribed to patients suffering from similar cancers. It is hoped that similar gene expression patterns could be detected to account for their similar therapeutic effects. Studies with gene chips demonstrated that a number of genes were indeed induced to alter their gene expression levels in TCCSUP bladder tumor cells treated with either TCHYS or LDSGT (Tables 2 and 3 and Fig. 3). The results provide important information that can further be subjected to advanced functional (anticancer) analyses. However, the gene expression patterns obtained from treating TCCSUP cells with the two drugs produced totally unrelated results, indicating that the data obtained here are still insufficient for a definitive conclusion; and therefore more gene expression profiling with different TCM is required to reveal the possible common molecular pathways mediating the similar therapeutic effects. Meanwhile, the genes whose expressions were



Fig. 4. Semiquantitative RT-PCR confirmation of the expression patterns detected by complementary DNA microarrays. (A) Semiquantitative RT-PCR and agarose gel electrophoretic assays on the genes for BRCA2 homolog, CEBPG, and E2F4 were performed. The comparisons of expression patterns for the (B) BRCA2 homolog, (C) CEBPG, and (D) E2F4 genes detected by RT-PCR and microarray analysis are shown. In the present study, appropriate number of TCCSUP bladder cells were treated with 1.0 mg/mL TCHYS for indicated periods of time (0–24 hr), followed by total RNA isolation. Then, 1.0 µg each of the RNA samples were reverse transcribed to become biotin-complementary DNA. The expression kinetics of the three genes was subjected to semiquantitative RT-PCR analysis, and the amplification of β-actin was used to normalize the amount of RNA used in every experiment. The RT-PCR products were visualized by 2% agarose gel electrophores in the presence of ethidium bromide. Experiments in this study are performed at least three times, and all experiments show similar results. RT-PCR = reverse transcription-polymerase chain reaction; TCHYS = Tan-Chih-Hsiao-Yao-San.

altered during the treatment of TCHYS and LDSGT may be useful to scientists who are currently working in the fields of identifying crucial genes involved in suppressing tumor cell growths.

To verify whether the detected gene expression patterns were reliable, semiquantitative RT-PCR was used in this study for confirming the transcription levels of three genes of interest identified in TCCSUP cells treated with TCHYS (Fig. 4). The data suggest that the results of cDNA-chip profiling gene expression patterns are faithful, and therefore microarray technology can be readily applied not only to gain insights into the molecular mechanism, but also to discover the biomarkers associated with the efficacies of TCM. Biomarkers are substances used as indicators of a biologic state in organisms, and the tumor biomarkers have now been constantly used to evaluate the clinical performances including cures and recurrences, and they have also become more and more important in cancer diagnostic and prognostic assessments²². For example, Elongation Factor 1 alpha, a pAkt-interacting protein, has been successfully demonstrated by Pecorari et al.²³ as a biomarker for monitoring the proliferation, survival, and invasion of breast cancer cells. Therefore, our study also initiated to set up the routine platform for identifying TCM-derived tumor biomarkers using microarray technology and the cell line model.

In summary, this report describes the testing of the efficacies of two traditional Chinese herbal medicines on liver and bladder tumor cell lines and the profiling gene expression patterns in TCCSUP cells treated with these two drugs. CHYS and LDSGT are commonly used for promoting health and may be beneficial to the elderly with cancers who may not tolerate toxic regimens. To help herbal drug-related functional genomics and bioinformatics further develop and become more useful, we appeal to all scientists currently conducting or having conducted microarray researches related to Chinese herbal medicines to join forces by comparing, combining, and posting gene expression patterns on the public domain. Not only can this accelerate the identification of tumor biomarkers, but also foster the discovery of candidate genes/pathways that mediate similar effects from different herbal drugs.

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References

- Hu SC, Chen GS, Wu CS, et al. Rates of cutaneous metastases from different internal malignancies: experience from a Taiwanese medical center. J Am Acad Dermatol 2009;60:379–387.
- Chen YJ, Liao HF. NK/NKT cells and aging. Int J Gerontol 2007;1:65–76.
 Cook MB, Dawsey SM, Freedman ND, et al. Sex disparities in cancer incidence
- by period and age. *Cancer Epidemiol Biomarkers Prev* 2009;18:1174–1182. 4. Chiu SC, Lai YL, Chang HH, et al. The therapeutic effect of modified Yu Ping Feng
- San on idiopathic sweating in end-stage cancer patients during hospice care. *Phytother Res* 2009;23:363–366.
- Zhuang SR, Chen SL, Tsai JH, et al. Effect of citronellol and the Chinese medical herb complex on cellular immunity of cancer patients receiving chemotherapy/ radiotherapy. *Phytother Res* 2009;23:785–790.
- Li F, Fan Q, Zhu Z, et al. Prescriptions for removing heat from Zang-Fu organs. In: Zuo Y, editor. *Science of Prescriptions*. Shanghai: Publishing House of Shanghai University of Traditional Chinese Medicine; 2002:119–124.
- Tagwireyi D, Ball DE, Loga PJ, et al. Cantharidin poisoning due to "Blister beetle" ingestion. *Toxicon* 2000;38:1865–1869.
- Chen YJ, Kuo CD, Tsai YM, et al. Norcantharidin induces anoikis through Jun-Nterminal kinase activation in CT26 colorectal cancer cells. *Anticancer Drugs* 2008;19:55–64.
- Mengs U. Acute toxicity of aristolochic acid in rodents. Arch Toxicol 1987;59: 328–331.
- Jadoul M, de Plaen JF, Cosyns JP, et al. Adverse effects from traditional Chinese medicine. *Lancet* 1993;341:892–893.

- 11. Chen CC, Jin YT, Liau YE, et al. Microarray profiling of gene expression patterns in bladder tumor cells treated with genistein. *J Biomed Sci* 2001;8: 214–222.
- 12. Shieh B, Li C. Microarray profiling of gene expression patterns of genistein in tumor cells. In: Bao Y, Fenwick R, editors. *Phytochemicals in Health and Disease*. New York: Marcel Dekker; 2004:77–103.
- 13. Li C, Chen RS, Hung SK, et al. Detection of EBV infection and gene expressions in human tumors by microarray analysis. *J Virol Meth* 2006;133:158–166.
- Eisen MB, Spellman PT, Brown PO, et al. Cluster analysis and display of genomewide expression patterns. Proc Natl Acad Sci USA 1998;95:14863–14868.
- 15. Li C, Teng RH, Tsai YC, et al. H-ras oncogene counteracts the anticancer effect of genistein in bladder tumor cells. *Br J Cancer* 2005;92:80–88.
- 16. Vaughn DJ, Malkowicz SB. Recent development in chemotherapy for bladder cancer. *Oncology* 2001;15:763–771.
- O'Shaughnessy J. Gemcitabine combination chemotherapy in metastatic breast cancer: phase II experience. Oncology 2003;17(S14):15-21.
- Kang SJ, Lee YJ, Kim BM, et al. Effect of Bupleuri Radix extracts on the toxicity of 5-fluorouracil in HepG2 hepatoma cells and normal human lymphocytes. *Basic Clin Pharmacol Toxicol* 2008;103:305–313.
- Wu SY, Wang GF, Liu ZQ, et al. Effect of geniposide, a hypoglycemic glucoside, on hepatic regulating enzymes in diabetic mice induced by a high-fat diet and streptozotocin. Acta Pharmacol Sin 2009;30:202–208.
- Lee JH, Lee DU, Jeong CS. Gardenia jasminoides Ellis ethanol extract and its constituents reduce the risks of gastritis and reverse gastric lesions in rats. *Food Chem Toxicol* 2009;47:1127–1131.
- Zhou Z, Wang Y, Wang X, et al. In: Zuo Y, editor. Internal Medicine of Traditional Chinese Medicine. Shanghai: Publishing House of Shanghai University of Traditional Chinese Medicine; 2002:74–452.
- 22. Eang R, Girbal-Neuhauser E, Xu B, et al. Characterization and differential expression of a newly identified phosphorylated isoform of the human 20S proteasome beta7 subunit in tumor vs. normal cell lines. *Fundam Clin Pharmacol* 2009;23:215–224.
- Pecorari L, Marin O, Silvestri C, et al. Elongation Factor 1 alpha interacts with active Akt in breast cancer cells and regulates their proliferation, survival and motility. *Mol Cancer* 2009;8:58.