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ARHGAP11A Promotes Lung Adenocarcinoma Proliferation and Invasion through ROCK-LIMK-Cofilin Pathway

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CA, US) supplemented with penicillin G (100 U/ml), streptomycin

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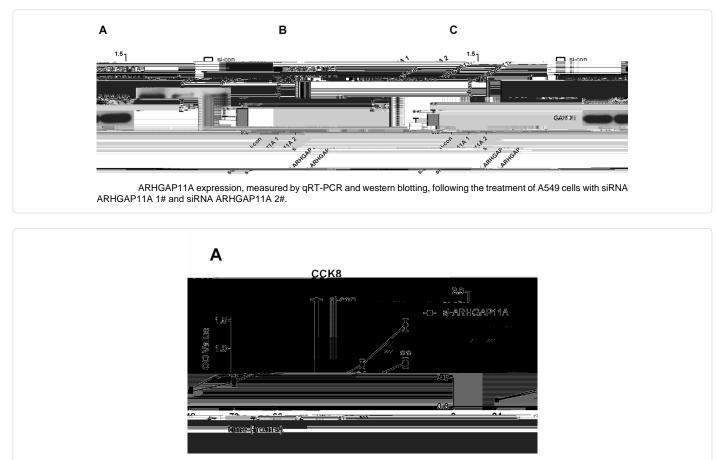
A549 was higher than that in Calu-3 cells, thus, in subsequent study, A549 cell line was used.

A HGAP11A is an independent predictor for survival in LUAD patients

e correlation between the *ARHGAP11A* expression status and the clinic pathologic characteristics of 535 LUAD tissues was further evaluated, and the results are listed in Table 1. A positive correlation was found between the *ARHGAP11A* over-expression and gender (p=0.000) and pathologic-node (p=0.040) (Table 1). Moreover, Kaplan-Meier survival analysis suggested that the survival rate was signi cantly lower in patients with *ARHGAP11A* high-expression than in the patients with lower *ARHGAP11A* expression (p=0.001, Figure 1B). Further, univariate and multivariate analysis exhibited that the up-

regulation of ARHGAP11A (p=0.004), pathological difference of the second state of the second second

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CCK-8 assay was conducted to analype the proliferation rate of si- ARHGAP11A-transfected A549 cells. Asterisk stands for statistically signi, cant differences relative to the negative control ("p<0.001).

Signi cantly, *ARHGAP11A* activation has been implicated to play key roles in cancer development. Nevertheless, the potential roles and the related molecular mechanisms of *ARHGAP11A* in LUAD are yet to be clari ed.

Our study is the rst direct investigation of the relationship between *ARHGAP11A* and LUAD. In the current report, we observed that the average expression level of *ARHGAP11A* in LUAD tissues was signi cantly higher than those in adjacent normal lung tissues. Furthermore, the TCGA dataset exhibited that *ARHGAP11A* could act as a prognostic factor for LUAD. Additionally, *ARHGAP11A* knockdown signi cantly inhibited LUAD cell viability, migration, and invasion *in vitro*. In a nutshell, the observations of our study demonstrate that *ARHGAP11A* may serve as an oncogene and may exert important functions in LUAD development and progression.

Cancer progression is a dynamic process involving adhesion, migration, invasion, as well as morphogenesis, which is controlled by the dynamics of actin cytoskeleton [13]. Co lin is a kind of actinbinding proteins that play a crucial role in mediating actin lament dynamics and reorganization via catalyzing polymerization or depolymerization of actin laments in migrating cells [14,15]. Co lin phosphorylation is needed for actin polymerization [15]. Co lin is inactivated by phosphorylation by LIMK1, and the p-co lin can in turn re ect the activity of LIMK1. LIMKs is phosphorylated and activated by Rho-associated kinase (ROCK), which facilitates actin polymerization through inactivating co lin by phosphorylation at Ser3 to prevent cleavage of actin bers [16]. In cancer cells, phosphorylation of co lin is controlled by RhoC/ROCK/LIMK pathway [17]. Abundant published evidence has demonstrated that Rho-related pathways, including that mediated by ROCK, participated in polarity control, invasion, in Itration, migration and metastasis [18-20]. Accordingly, our study highlighted the importance of the ROCK/LIMK/co lin pathway in controlling actin dynamics, which participates in invasion and metastasis of cancer cells. Signi cantly, silence of *ARHGAP11A* remarkably inhibited the expression of ROCK, pLIMK2, and pCo lin in A549 cells in the current study. Accordingly, our results suggest that the *ARHGAP11A* low-expression might be closely related with progression and prognosis of LUAD, which is mediated through the inactivation of ROCK/LIMK/co lin signaling pathway.

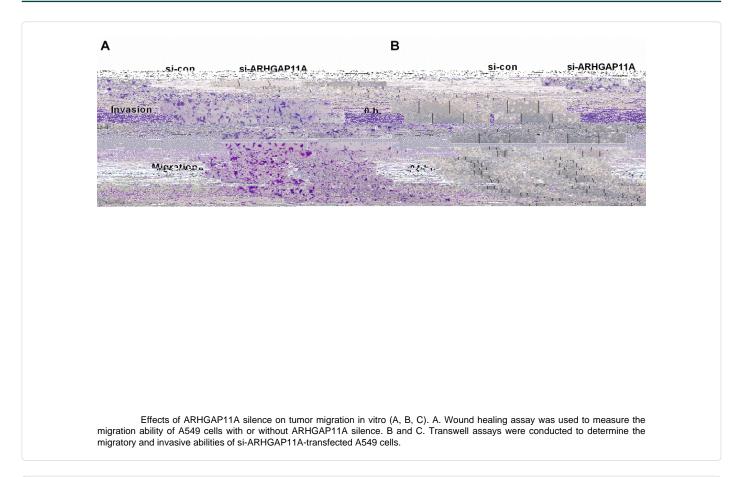
Conclusion

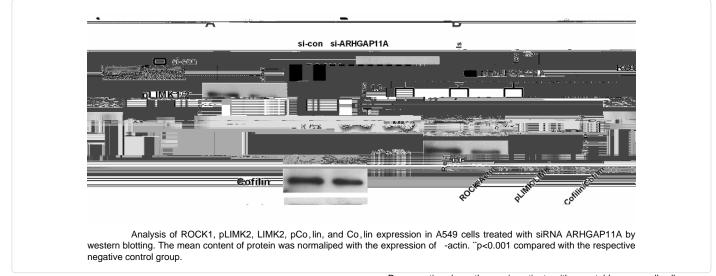
Taken together, our study identi es *ARHGAP11A* as a novel potential oncogene in LUAD that acts by in uencing the changes in action cutoskeleton. *ARHGAP11A* may serve as a prognostic factor in LUAD. e silencing of *ARHGAP11A* in LUAD cell line A549 dramatically inhibited tumor growth and migration *in vitro*, raising the possibility that *ARHGAP11A* could be a promising new therapeutic target for LUAD. However, our ndings were not veri ed using animal mode or patient tissues. us, in the late work, further studies are required to advance our understanding of the involvement of *ARHGAP11A* in LUAD progression using animal model or patient samples, because this gene is a potential candidate for LUAD diagnosis and treatment.

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