Abstract. Lung cancer is the third most frequent human malignant tumour and the leading cause of cancer-associated mortality worldwide. Emerging lines of evidence have demonstrated that microRNAs (miRNAs) are upregulated or downregulated in non-small cell lung cancer (NSCLC), and this phenomenon is involved in the regulation of various processes during tumorigenesis and progression, including tumour growth, apoptosis, cell invasion, and tumour metastasis. Therefore, understanding the molecular mechanism that associates abnormally expressed miRNAs with NSCLC formation and development may lead to the identification of novel diagnostic, and therapeutic targets for patients with NSCLC. miRNA-584 (miR-584) functions as a tumour suppressor in several types of cancer. However, the expression pattern, detailed biological function and underlying molecular mechanism of miR-584 in NSCLC remain unclear. Therefore, the present study detected the expression of miR-584 in NSCLC, investigated its role in NSCLC cells and determined its underlying molecular mechanism. In the current study, it was demonstrated that miR-584 was downregulated in NSCLC tissues and cell lines. Low miR-584 expression was correlated with tumour size, tumour node metastasis stage and distant metastasis. Overexpression of miR-584 inhibited cell proliferation and invasion in NSCLC. Additionally, metadherin was identified as a direct target gene of miR-584 in NSCLC as confirmed by a series of experiments. Moreover, upregulation of miR-584 was involved in the regulation of the phosphatase and tensin homolog/Akt serine/threonine kinase signalling pathway in NSCLC. Thus, miR-584 may serve as a tumor-suppressor, and the results of the present study provide a reference for future research into the potential mechanisms underlying NSCLC progression.

Introduction

Lung cancer is the third most frequent human malignant tumour and the leading cause of cancer death worldwide (1). Multiple risk factors of lung cancer have been validated, such as environmental deterioration, tobacco use and exposure to radon and occupational carcinogens (2-5). Non-small cell lung cancer (NSCLC), which accounts for approximately 80% of the total lung cancer cases, is classified into three subtypes: Squamous cell carcinoma, adenocarcinoma, and large cell carcinoma (6). The current therapeutic treatments used in NSCLC patients include surgery resection, chemotherapy and radiotherapy, and these strategies can be applied alone or in combination depending on the extent and progression of the disease (7). Despite improvements in NSCLC diagnosis and treatment, the prognosis of NSCLC patients remains unsatisfactory with a dismal 5-year survival rate of lower than 16% (8). The poor prognosis of NSCLC is due to late disease presentation, tumour heterogeneities within histological subtypes, recurrence, metastasis and the relatively limited understanding of tumour biology (9,10). Therefore, gaining full understanding of the mechanisms underlying tumorigenesis and tumour development of NSCLC and developing novel therapeutic approaches for patients with this deadly disease is essential.

MicroRNAs (miRNAs) are a class of endogenous, non-coding and small RNA molecules (19-23 nucleotides); miRNAs are vital gene regulators that base pair with a partially complementary site, predominantly in the untranslated region (UTR) of target messenger RNAs (mRNAs), thereby inducing either translational repression or transcript degradation (11). Studies have found that more than half of miRNAs are located in cancer-related genomic regions, suggesting that dysregulation of miRNAs possibly plays key roles in tumour occurrence and progression (12). Increasing number of studies have recently indicated that miRNAs are aberrantly expressed in various types of human cancers, such as lung cancer (13), bladder cancer (14), breast cancer (15) and gastric cancer (16). MiRNAs regulate diverse biological processes, especially those involved in critical pathways linked to cancer cell proliferation, cycle, apoptosis, metastasis, invasion and...
angiogenesis (17-19). MiRNAs may either serve as oncogenes or as tumour suppressors, depending on the characteristic of their target genes (20). Hence, investigation on aberrant miRNA expression may lead to the development of efficient therapeutic targets for cancer treatment.

MiR-584 functions as tumour suppressor in several types of cancer (21-24). In NSCLC, miR-584 expression was reported to be downregulated in tissue samples (25) and upregulated in the plasma of NSCLC patients (26). However, the detailed biological function and underlying molecular mechanism of miR-584 in NSCLC remains unclear. Therefore, this study detected the expression of miR-584 in NSCLC, investigated its role in NSCLC cells and determined its underlying molecular mechanism.

Materials and methods

Clinical specimens. The present study was approved by the Ethics Committee of The first Affiliated Hospital of Dalian Medical University. All of the patients had read and understood the aims and methods of this research. Signed written informed consents were also obtained from all participants before the study. A total of 57 pairs NSCLC tissues and corresponding adjacent normal lung tissues were obtained from patients who underwent surgery at Department of Thoracic Surgery, The First Affiliated Hospital of Dalian Medical University between March 2013 and June 2015. None patients had been treated with chemotherapy or radiotherapy before surgery resection. All of these tissues were immediately snap-frozen in liquid nitrogen and stored at -80°C.

Cell lines and transfection. Five NSCLC cell lines (SK-MES-1, H23, H522, SPC-A1, A549), a non-tumorigenic bronchial epithelium BEAS-2B cells and 293T cell line were acquired from American Type Culture Collection (Manassas, VA, USA). All cell lines were cultured in Dulbecco's modified Eagle's medium (DMEM; Gibco; Thermo Fisher Scientific, Inc., Waltham, MA, USA) supplemented with 10% fetal bovine serum (FBS; Gibco; Thermo Fisher Scientific, Inc.), 100 U/ml penicillin G (Gibco; Thermo Fisher Scientific, Inc.) and 100 µg/ml streptomycin (Gibco; Thermo Fisher Scientific, Inc.). Cells were incubated in a humidified atmosphere containing 5% CO₂ at 37°C.

The miR-584 mimics and miRNA mimics negative control (miR-NC) used in this study were synthesized by Shanghai GenePharma Co. Ltd., (Shanghai, China). MTDH overexpression plasmid (pcDNA3.1-MTDH) and its negative control (pcDNA3.1) were purchased from Guangzhou RiboBio Co., Ltd., (Guangzhou, China). For cell transfection, cells were dissociated into single cells and seeded into 6-well plates at a density of 5x10⁴ cells per well. Cells were transfected with miRNA mimics (50 pmol/ml) or plasmid (2 µg) using lipofectamine 2000 (Invitrogen, Carlsbad, CA, USA), according to the manufacturer's protocol. In rescue experiment, cells were cotransfected with miR-NC (25 pmol/ml) or miR-584 mimics (25 pmol/ml) and pcDNA3.1 (1 µg) or pcDNA3.1-MTDH (1 µg) at the same time.

Reverse transcription-quantitative polymerase chain reaction (RT-qPCR). Total RNA was isolated from tissue specimens or cells with TRIzol® reagent (Invitrogen), in accordance with the manufacturer's instructions. The concentration of total RNA was detected using a Nanodrop® ND-1000 spectrophotometer (NanoDrop Technologies; Thermo Fisher Scientific, Inc., Pittsburgh, PA, USA). To measure miR-584 expression, RNA was reverse-transcribed into complementary DNA (cDNA) using a TaqMan® MicroRNA Reverse Transcription kit (Applied Biosystems; Thermo Fisher Scientific, Inc.). Quantitative real time PCR was performed using the TaqMan MicroRNA Assay kit (Applied Biosystems; Thermo Fisher Scientific, Inc.) on Applied Biosystems® 7900HT Real-Time PCR system (Thermo Fisher Scientific Inc.). U6 served as an endogenous control for miR-584 expression. To quantify MTDH mRNA expression level, total RNA was synthesized into cDNA using M-MLV reverse transcriptase (Promega, Madison, WI, USA). The cDNAs were amplified using SYBR Premix Ex Taq™ Kits (TaKaRa Bio, Tokyo, Japan), with GAPDH as an internal control. The primers were designed as follows: miR-584 forward, 5'-TGCAATGTGTTGTT AGCCA-3' and reverse, 5'-ATCATTCTGCTTCTTGGAT GT-3'; U6 forward, 5'-CTCGTCTCGGACAGCACATA CT-3' and reverse, 5'-ACGCTTTACAGAATGGTCGATGC-3'; MTDH forward, 5'-TGCCCTCTTCAAGCAGCAA-3' and reverse, 5'-CGGCTGCAGATGATAG-3'; and GAPDH forward, 5'-GCACCGTCAAGGCTGAGAAC-3' and reverse, 5'-TGGTGAAGACGCGTGGGA-3'. Data were analyzed using the relative quantification method (2⁻ΔΔCt) (27).

Cell Counting Kit-8 (CCK-8) assay. Cell proliferation was examined using the CCK-8 assay. Transfected cells were collected at 24 h post-transfection, and plated on 96-well plates at a density of 3,000 cells/well. After incubation at 37°C in 5% CO₂ for 0, 24, 48, or 72 h, CCK-8 assay was carried out according to the manufacturer's instructions. Briefly, 10 µl CCK-8 reagent (Dojindo, Kumamoto, Japan) was added to each well and incubated for additional 2 h at 37°C in 5% CO₂. The optical density (OD) was determined at a wavelength of 450 nm using an enzyme-linked immunosorbent assay reader (Bio-Rad Laboratories, Inc., Hercules, CA, USA). Each experiment was repeated in triplicate.

Transwell invasion assay. Transwell chambers (8-µm pore size; BD Biosciences, San Jose, CA, USA) coated with Matrigel (BD Biosciences) were used to determined cell invasion. Cells at 24 h following transfection with miR-584 mimics or miR-NC were seeded into the upper transwell chambers at a density of 5x10⁴ cells. For rescue experiment, transfected cells (miR-NC, miR-584 mimics+pcDNA3.1 and miR-584 mimics+pcDNA3.1-MTDH) were seeded into the upper transwell chambers at a density of 5x10⁴ cells at 24 h posttransfection. A 500 µl volume of DMEM medium supplemented with 20% FBS was placed into the lower chamber as a chemoattractant. Following incubation at 37°C in 5% CO₂ for 24 h, the non-invaded cells on the upper surface of the membrane were removed by cotton swabs while the invasive cells were fixed with 100% methanol and then stained with 0.1% crystal violet (Beyotime Institute of Biotechnology, Haimen, China). The number of invasive cells was calculated with an inverted microscope (CKX41; Olympus, Tokyo, Japan) using 5 randomly-selected fields of view at a x200 magnification.
Bioinformatics analysis and luciferase reporter assay. TargetScan (http://www.targetscan.org/) and PicTar (http://pictar.mdcberlin.de/) were used to predict the potential targets of miR-584. MTDH was predicted to be a candidate target gene of miR-584. Luciferase reporter plasmids, pmirGLO-MTDH-3'-UTR wild-type (WT) and pmirGLO-MTDH-3'-UTR mutant (Mut), were synthesized and purified by GenePharma Co. Ltd. 293 T cells were seeded into 24-well plates at a density of 1x10^5 cells/well, and cultured for 24 h prior to transfection. Co-transfections with pmirGLO-MTDH-3'-UTR WT or pmirGLO-MTDH-3'-UTR Mut and miR-584 mimics or miR-NC into cells was performed using Lipofectamine 2000, according to the manufacturer's protocol. After incubation at 37˚C for 48 h, luciferase activities were detected using the Dual-Luciferase reporter assay system (Promega), following the manufacturer's instructions. Firefly luciferase activity served as an internal control.

Western blot analysis. The total protein was isolated from the cells or tissues using radioimmunoprecipitation assay lysis buffer containing protease inhibitor and phosphatase inhibitor (Roche, Mannheim, Germany). The lysates were centrifuged at 12,000 x g for 5 min at 4˚C and the supernatant was collected. The concentration of total protein was determined using a bicinchoninic acid assay kit (Nanjing KeyGen Biotech. Co., Ltd., Nanjing, China). The same amount of proteins were separated with 10% sodium dodecyl sulfate-polyacrylamide gel electrophoresis and transferred onto a polyvinylidene fluoride membranes (PVDF; EMD Millipore, Billerica, MA, USA). After blocking with 5% skim milk in Tris-buffered saline containing 0.1% Tween 20 (TBST) at room temperature for 1 h, the membranes were incubated with following primary antibodies overnight at 4˚C: Mouse anti-human MTDH monoclonal primary antibody (1:1,000 dilution; sc-517220; Santa Cruz Biotechnology, Inc., Santa Cruz, CA, USA), mouse anti-human monoclonal PTEN (sc-133197; 1:1,000 dilution; Santa Cruz Biotechnology Inc.), mouse anti-human monoclonal p-AKT (sc-81434; 1:1,000 dilution; Santa Cruz Biotechnology Inc.), mouse anti-human monoclonal GAPDH antibody (sc-47724; 1:1,000 dilution; Santa Cruz Biotechnology Inc.). Subsequently, the membranes were washed three times with TBST and incubated with goat anti-mouse horseradish peroxidase (HRP) conjugated secondary antibody (sc-2005; 1:5,000 dilution; Santa Cruz Biotechnology Inc.) for 2 h at room temperature. Afterwards, the protein bands were detected using an enhanced chemiluminescence reagents (ECL; Pierce; Thermo Fisher Scientific Inc.). Densitometric analysis was performed using ImageJ.
miR-584 expression is associated with clinicopathologic factors of NSCLC patients. To explore the potential associations between miR-584 expression and the clinicopathological features of NSCLC, we subdivided the 57 NSCLC patients in 57 pairs of NSCLC tissues and their corresponding adjacent normal lung tissues. The results showed that miR-584 expression was significantly downregulated in NSCLC tissues compared with that in adjacent normal lung tissues (Fig. 1A, P<0.05). In addition, expression levels of miR-584 were detected in five NSCLC cancer cell lines (SK-MES-1, H23, H522, SPC-A1, A549), with a non-tumorigenic bronchial epithelium BEAS-2B cells as control. The expression levels of miR-584 were markedly lower in all NSCLC cell lines than in BEAS-2B cells (Fig. 1B, P<0.05). These results suggested that miR-584 contributes to the initiation and progression of NSCLC.
into low miR-584 expression group (n=29) and high miR-584 expression group (n=28) based on median expression of miR-584. As shown in Table I, low miR-584 expression was significantly correlated with tumour size (P=0.011), TNM stage (P=0.012), distant metastasis (P=0.005), whereas no statistical difference was found in the correlation of miR-584 expression with gender (P=0.337), age (P=0.701), smoking history (P=0.704) and tumour differentiation (P=0.514).

miR-584 inhibits cell proliferation and invasion in NSCLC. Considering that miR-584 level decreased in NSCLC, we speculated that miR-584 is a tumour suppressor in NSCLC. To examine the biological roles of miR-584 in NSCLC, we transfected H522 and A549 cells, which expressed relatively low miR-584 level, with miR-584 mimics or miR-NC. After transfection with miR-584 mimics, miR-584 was markedly upregulated in H522 and A549 cells as confirmed by RT-qPCR (Fig. 2A, P<0.05). CCK-8 assay was performed to investigate the effect of miR-584 overexpression in NSCLC cell proliferation. As shown in Fig. 2B, upregulation of miR-584 obviously inhibited H522 and A549 cell proliferation compared with its effect on cells transfected with miR-NC (P<0.05). To determine the role of miR-584 in NSCLC cell invasion, we performed Transwell invasion assay. According to the CCK-8 assay, we demonstrated that miR-584 did not significantly affected the NSCLC cell proliferation at 24 h incubation time. Hence, we believed that the anti-proliferative role of miR-584 did not be responsible for part of the observed effect on cell invasion ability in NSCLC. As shown in Fig. 2C, restored expression of miR-584 dramatically reduced the invasion abilities of the H522 and A549 cells (P<0.05). These results suggested that miR-584 plays tumour-suppressive roles in NSCLC progression.

MTDH is a direct target gene of miR-584 in NSCLC. To understand the molecular mechanisms by which miR-584 inhibits NSCLC cell proliferation and invasion, we performed bioinformatics analysis in predicting the potential targets of miR-584. Among these candidates, MTDH, which was upregulated in NSCLC and involved in NSCLC occurrence and progression (28-30), was chosen for confirmatory test (Fig. 3A). Two high-scoring binding sites of miR-584 exist on the 3′-UTR of MTDH mRNA. To determine whether miR-584 directly targets the 3′-UTR of MTDH, we transfected the luciferase reporter plasmid containing wild-type miR-584 binding sites (WT 1 and WT 2) or mutant miR-584 binding sites (Mut 1 and Mut 2), along with miR-584 mimics or miR-NC, into 293T cells. The relative
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luciferase activity of 293T cells co-transfected with miR-584 mimics or miR-NC. As shown in Fig. 3C and D, ectopic expression of miR-584 reduced MTDH expression in H522 and A549 cells at both mRNA (P<0.05) and protein (P<0.05) levels, respectively. These results demonstrated that miR-584 directly inhibited the expression of MTDH by binding to its 3'-UTR.

MTDH is upregulated in NSCLC tissues and such upregulation is negatively correlated with miR-584 expression. To determine the association between miR-584 and MTDH, we measured MTDH expression in NSCLC tissues and in their corresponding adjacent normal lung tissues by using RT-qPCR and western blotting analysis. As shown in Fig. 4A and B, NSCLC tissues displayed significantly higher levels of MTDH mRNA (P<0.05) and protein (P<0.05) compared with those in adjacent normal lung tissues. Furthermore, Spearman correlation analysis indicated an inverse association between MTDH mRNA and miR-584 expression levels in NSCLC tissues (Fig. 4C; r=-0.6785, P<0.0001).

Restoration of MTDH rescues the miR-584-mediated inhibitory effects on NSCLC cells. To further investigate whether the effects of miR-584 on the NSCLC cell proliferation and invasion were mediated by MTDH, we performed rescue experiments involving H522 and A549 cells cotransfected with miR-584 mimics, together with or without MTDH overexpression plasmid (pcDNA3.1-MTDH). Western blotting analysis confirmed that the reduced level of MTDH induced by miR-584 overexpression was rescued by cotransfection of pcDNA3.1-MTDH (Fig. 5A, P<0.05). The results of CCK-8 assay and Transwell invasion assay showed that the inhibitory effects of miR-584 on NSCLC cell proliferation (Fig. 5B, P<0.05) and invasion (Fig. 5C, P<0.05) were partly restored by pcDNA3.1-MTDH. These results suggested that miR-584 exerted its suppressive effects in NSCLC by downregulating MTDH.

miR-584 inhibits activation of PTEN/AKT pathway in NSCLC. Studies have reported that MTDH is involved in the regulation of PTEN/AKT signalling pathway (31-33). Thus, western blotting analysis was utilized to detect PTEN, AKT and p-AKT protein expression levels in H522 and A549 cells after transfection with miR-584 mimics or miR-NC. As shown in Fig. 6, miR-584 overexpression promoted PTEN expression but reduced p-AKT expression in H522 and A549 cells (P<0.05). However, miR-584 exerted no regulatory effect on AKT expression in H522 and A549 cells. These results suggested that miR-584 inactivates the PTEN/AKT signalling pathway in NSCLC.

Discussion

Emerging lines of evidence have demonstrated that miRNAs are upregulated or downregulated in NSCLC, and this phenomenon is involved in the regulation of various processes during tumorigenesis and progression, including tumour growth, apoptosis, cell invasion and tumour metastasis (34-36). Therefore, understanding the molecular mechanism that links abnormally expressed miRNAs with NSCLC formation and development may lead to the identification of novel diagnostic and therapeutic targets for NSCLC patients. In the present study, we found that miR-584 was frequently downregulated

Figure 4. MTDH level is positively correlated with miR-584 expression in NSCLC tissues. Relative MTDH mRNA (A) and protein levels in NSCLC tissues and their corresponding adjacent normal lung tissues were determined using RT-qPCR and western blot analysis, respectively. *P<0.05 compared with normal lung tissues. (C) Spearman correlation analysis of the association between miR-584 and MTDH mRNA expression in NSCLC tissues. r=-0.6785, P<0.0001.
in NSCLC tissues and cell lines. Low miR-584 expression was correlated with tumour size, TNM stage and distant metastasis. In addition, upregulation of miR-584 inhibited NSCLC cell proliferation and invasion in vitro. MTDH was identified as a direct target of miR-584 in NSCLC. Moreover, MTDH was upregulated in NSCLC tissues, and such upregulation was negatively correlated with miR-584 expression level. Restoration of MTDH rescued the miR-584-mediated inhibitory effects on NSCLC cells. Furthermore, miR-584 overexpression inhibited the activation of PTEN/AKT pathway in NSCLC. Altogether, these results demonstrated the tumour-suppressive role of miR-584 in NSCLC by directly targeting MTDH and by regulating PTEN/AKT pathway.

miR-584 is frequently dysregulated in multiple types of human cancers. For example, miR-584 is downregulated

Figure 5. MTDH overexpression partially reverses the inhibitory effects of miR-584 on NSCLC cell proliferation and invasion. (A) Western blot analysis of MTDH protein expression in H522 and A549 cells transfected with miR-NC, miR-584 mimics+pcDNA3.1 or miR-584 mimics+pcDNA3.1-MTDH. *P<0.05 compared with miR-NC, miR-584 mimics+pcDNA3.1-MTDH. Cell proliferation (B) and invasion (C) were assessed in H522 and A549 cells transfected with miR-NC, miR-584 mimics+pcDNA3.1 or miR-584 mimics+pcDNA3.1-MTDH (×200 magnification). *P<0.05 compared with miR-NC, miR-584 mimics+pcDNA3.1-MTDH.

Figure 6. miR-584 inhibits the activation of PTEN/AKT signalling pathway in NSCLC. Western blot analysis of PTEN, p-AKT and AKT expression levels in H522 and A549 cells following transfection with miR-584 mimics or miR-NC.
in gastric cancer tissues and cell lines. Decreased miR-584 expression levels is negatively correlated with tumours larger than 3 cm (37). In neuroblastoma, miR-584 is underexpressed both in tumour tissues and cell lines. Low expression levels of miR-584 were correlated with poor differentiation and with advanced cancer stage based on the International Neuroblastoma Staging System. Neuroblastoma patients with low miR-584 expression showed lower survival probability than patients with high miR-584 levels. Additionally, miR-584 is an independent prognostic factor for the outcome in neuroblastoma patients (38). Downregulation of miR-584 was also observed in clear cell renal cell carcinoma (21), thyroid carcinoma (22,23) and glioma (24). These findings suggested that aberrant expression of miR-584 is a potential prognostic factor in these cancer types.

Abnormally expressed miR-584 plays important roles in the occurrence and development of several types of human cancers. Li et al found that restored expression of miR-584 suppressed cell proliferation and invasion in gastric cancer (37). Xiang et al reported that ectopic expression of miR-584 attenuated neuroblastoma cell growth, migration, invasion, and angiogenesis in vitro (38). Ueno et al revealed that miR-584 overexpression decreased cell motility in clear cell renal cell carcinoma (21). Moreover, Orlandella et al showed that resumed expression of miR-584 inhibited the migration and invasion of thyroid carcinoma cells and induced their resistance to apoptosis (22,23). Wang et al indicated that miR-584 reexpression repressed cell growth, migration, invasion and vasculogenic mimicry of glioma (24,39,40). These findings suggested that miR-584 can be developed into an effective therapeutic target for these types of cancer.

Multiple targets of miR-584 have been validated, including WWP1 (37) in gastric cancer, MMP14 (38) in neuroblastoma, ROCK1 (21) in clear cell renal cell carcinoma, TUSC2 (23) and ROCK1 (22) in thyroid carcinoma, and PTG11HP (24) and ROCK1 (39,40) in glioma. These studies suggest that miR-584 exhibits tissue-specific functions. The current study found that miR-584 is a direct functional target of miR-584 in NSCLC. MTDH, also known as astrocyte elevate gene-1, is first discovered in human foetal astrocytes in 2002 (41). MTDH is a multifunctional oncogene and overexpressed in multiple types of human cancer, including glioma (42), breast cancer (43), gastric cancer (44), colorectal cancer (45), cervical cancer (46) and bladder cancer (47). MTDH is correlated with tumorigenesis and tumour development by regulating cell growth, cell cycle, apoptosis, metastasis, epithelial-to-mesenchymal transition, chemoresistance and angiogenesis (48-51).

In NSCLC, MTDH is highly expressed in tumour tissues and correlated with clinical stage, T classification, N classification, distant metastasis, lymph node metastasis and differentiation (29,52,53). NSCLC patients with higher MTDH expression showed shorter overall survival time than those with lower MTDH expression (52). In addition, multivariate analysis indicated that MTDH expression is an independent prognostic factor for both overall survival and disease-free survival in NSCLC (29). Functional experiments demonstrated that MTDH is involved in NSCLC progression by playing a role in cell proliferation, apoptosis, motility and epithelial-to-mesenchymal transition (28,30,52-54).

In our study, we confirmed that miR-584 may inhibit NSCLC progression by directly targeting MTDH and indirectly regulating PTEN/AKT pathway. Given the importance and role of MTDH in NSCLC, regulation of the miR-584/MTDH/PTEN/AKT axis is a potential novel therapeutic strategy for treatment of this aggressive cancer.

In conclusion, our result indicated that miR-584 regulates tumorigenesis and malignant progression of NSCLC by directly targeting MTDH and regulating the PTEN/AKT signalling pathway. Therefore, miR-584 is a potential molecular target in NSCLC treatment. Further studies should evaluate the potential of miR-584 as therapy for NSCLC. The absence of the survival analysis may have been a weakness of the study, and that this is something that will be included in future studies.

References

A six-microRNA panel in plasma was identified:


