TABLE II CONCENTRATION OF GAG FRACTIONS EXPRESSED AS $~\mu \mathrm{g}$ URONIC ACID PER $~\mathrm{mg}$ DNA

Tissue	DNA (Mg/g dry. defatted		GAG concentration					
	tissue)	HA	HS	Ch-4-S	Ch-6-S	DS	Н	
Normal Oral Cancer P Value	$\begin{array}{c} 1268 \pm & 48.4 \\ 1893 \pm & 106.1 \\ < 0.01 \end{array}$		95 ± 8.6 83 ± 6.9 N.S.	108 ± 4.8 106 ± 5.2 N.S.	93 ± 3.6 156 ± 4.9 < 0.01	132 ± 3.2 241 ± 6.8 < 0.01	54 ± 0.86 56 ± 1.45 N.S.	

Values given are the average of 6 different experients + SEM. N.S. = Not Significant.

(b) Concentration of GAGs expressed in terms of gram, dry, defatted tissue weight:

The GAG content of tumour tissue as comared to normals, expressed as μ g uronic acid/ g of dry, defatted tissue are given in Table I.

There is a significant increase in the amount of HA and the total sulphated GAG content of umour tissues. Of the sulphated GAGs, all the ractions showed a significantly higher concentation in tumour tissue. Both normal and umour tissues showed the same pattern of IAGs, DS showing the maximum amount, and I the least.

c) Concentration of GAG expressed in terms $f\ mg\ DNA$:

Tumour tissues are known to have acreased cell mass as compared to normal ounterparts. Although the function of GAG in ell recognition and adhersion are extracellular, neir synthesis depends on the total cell number. n view of these reasons, the absolute amount of AG fractions expressed in terms of DNA ontent was determined (Table II). As expected, ne DNA content per gram of dry, defatted ssue was higher for the tumour tissue. Ch-6-S. S and HA show increased levels in tumour ssue whereas all the other GAG fractions did ot show any significant difference from the ormal tissue. The increased amounts of HS. h-4-S and H in tumours observed when epressed in terms of dry tissue disappeared hen the data was expressed in terms of DNA ontent.

DISCUSSION

The idea that the external membrane has 1 important role in growth control in normal imal cells and that partial or complete loss of ontrol in transformed cells can reside in

membrane changes has been supported by mu new evidence in recent years. Numerous chang in the cell surface carbohydrates (Satoh et 1973) membrane glycolipids (Steiner at Melnick, 1974) and cell surface glycosamin glycans (Robin et al, 1975; Kraemer and Tobe 1972) have been reported as a result of tran formation.

Oral cancer tissues show about two-fo increase in Ch-6-S and DS content. The increa in the amount of DS is of particular intere since it is observed that DS containing prote glycans interact more extensively to collage than all other GAGs (Obrink, 1973). It would seem that the primary function of DS is stimulation of collagen production and binding collagen fibres (Kennedy, 1979). The increase collagenous, fibrillar structure of oral tumot tissues could be due to their increased D content.

Oral cancer tissues are known to be a differentiated squamous cell carcinoma. Class cally, they form epithelial pearls with abundar keratinization. Macroscopically, the tumour are will be hard and composed of increased amount of fibrous elements. The genesis of this fibroti reaction is not fully explained. It is possible that the increased amount of DS is partly responsible for this reaction by stimulating the synthesis of collagen.

The present data is in agreement with th reported increase of HA in tumour cells, but doe not confirm reports that sulphated GAGs ar generally decreased in transformed cell line (see introduction). This apparent discrepancy can be explained by the fact that all the report cited above have been on cells in culture. In the present study, since tumour tissue itself is used all the accumulated extracellular GAG of the tissue mass has also to be accounted for. More

er, the present data is in agreement with the servation of Dietrich et al (1979) that sulphated λG is increased in tumour tissues.

A mechanism has been proposed (Dietrich al, (1979) for the possible mode of action of phated GAGs in stimulation of cell division. cording to this, the inhibition of cell growth brought about by the contact of HS molecules adjacent cells. In the case of the tumour cells, increased amount of Ch-6-S and DS on the 1 surface, prevents the normal contact of HS decules of adjacent cells. This would result a lack of cell-to-cell contact inhibition and is uncontrolled growth of cells leading to

malignancy.

Recent reports indicate the involvement GAGs in nuclear function and protein biosy thesis (Arnold et al, 1972; Cook and Aikav 1973; Saiga and Kinoshita, 1976; Kraemer a Coffey, 1970). Do membrane changes, especia cell surface GAG changes, lead to subseque nuclear alterations and finally uncontrolled c division and tumour growth? This question 1 mains unanswered for the present, due to la of sufficient data on changes of tumour c surface GAGs, and so it is too early to draw a definite conclusion on the role of GAG on tranformation of normal cell to tumour cell.

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Glycosaminoglycan Composition of Human Oral Cancer Tissue

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SUMMARY

Changes in the Glycosaminoglycan (GAG) composition of human oral cancer tissue as compared to normal tissue was studied using cellulose column chromatography to separate the different GAG fractions. The results indicated an absolute increase in the amounts of hyaluronic acid (HA) chondroitin-6-Sulphate (Ch-6-S) and dermatan sulphate (DS) fractions of the oral cancer tissue. The importance of these findings on the role of GAG as cellular growth regulators and in cell recognition and didhesion are discussed. A possible mechanism by which GAG may affect the transformation of a normal cell to a tumour cell is also discussed.

INTRODUCTION

AMMALIAN cells contain a variety of glycosaminoglycans (GAGs) associated ith their surfaces (Lindahl and Hook, 1978). ne physiological role of these cell surface dysaccharides is not understood; among the verse functions suggested, regulation of cell owth (Ohnishi e: al, 1975) and mediation of cell cell communication (Robin et al, 1975) have en proposed. Many of the cell surface prorties have been found to be modified in tumour transformed cells, although few of these seem be universal for the neoplastic state (Nicolson, 976). Virus-transformed cell lines have been own to have enhanced rate of synthesis of cell rface hyaluronic acid compared to untransrmed parental cell lines (Makita and Shimojo, 73; Satoh et al, 1973). Other reports show a nerally lower rate of synthesis of sulphated AG by transformed cells (Satoh et al. 1973: ito et al. 1975: Robin et al. 1975: Kraemer and bey, 1973). However, this may be an over nplification due to the large number of ferent classes of glycosaminoglycan at the cell rface and the fact that few systems have en fully investigated (Nigam and Cantero,

Since the incidence of oral cancer is rather gh in India, and no detailed investigation has far been done in this particular kind of neer, this study was carried out to find the anges in GAG content of oral cancer tissue.

MATERIALS AND METHODS

Oral cancer tissues were obtained fre from the operation room in sterile conditic The normal tissue surrounding the tumour ma was used as normal counterparts for comparisc Histological examination of the tissue sampl



Fig. 1 Microphotograph of a well-differentiated squa ous cell carcinoma of the oral cavity, showi groups of large squamous cells with keratinization the centre to form the pearls that are characteris of this tumour. (X 150)

Glycosaminoglycan in Oral Can



 2 Microphotograph of the normal mucosal layer of oral cavity, surrounding the tumour mass showing no characteristics of malignancy. (X 150)

is carried out to assertain the normalcy of the atrol tissues used. Sections from frankly dignant areas showed anaplastic cells with ithelial pearls (Fig. I), whereas control normal sue did not show any characteristic malignant anges (Fig. II). Tissues were washed seatedly in sterile saline before defatting.

fatting of Tissues:

The minced tissues were defatted twice with nanol; diethyl ether (3:1v/v) at 60°C. for o hrs. followed by chloroform: methanol:1v/v) for one hr. The defatted tissues were led in a vacuum desiccator till constant light.

Estimation of GAG:

The dry, defatted tissue was subjected digestion with papain according to the procedu of Laurent (1960) and the digest was pass through a column of cellulose (Merck, microc stelline) previously washed with 1 per ce cetyl pyridenium chloride (CPC). The differe GAG fractions were eluted according to the p cedure of Svejcar and Robertson (1967). T individual GAG fractions were quantitated the modified carbazole reaction of Bitter a Muir (1962). Complete resolution of the GA fractions is not achieved by any of the method available at present. 'In this procedure al heparan sulphate (HS), chondroitin-4-sulpha (Ch-4-S), chondroitin-6-sulphate (Ch-6-S) a dermatan sulphate (DS) fractions were fou to contain traces of Ch-4-S, Ch-6-S, DS a heparin (H) respectively when analysed by t enzymatic method of Murata et al (197 Hyaluronic acid (HA) and heparin (H) we mostly uncontaminated as seen by cellule acetate electrophoresis. Since a large number samples had to be analysed, the procedure w restricted to the chromatography of GAG-CI complex over cellulose.

DNA was estimated by the diphenyl ami method (Schneider, 1957).

RESULTS

(a) Recovery of GAG from the Cellule Column:

Normal and tumour tissue GAGs shr comparable recoveries from the cellulose colur (Normal -92 ± 2.8%; Oral Cancer -83 3.9%). About 10-15 per cent of the total GF applied on the column remain unrecover during fractionation.

TABLE I CONCENTRATION OF GLYCOSAMINOGLYCAN FRACTIONS EXPRESSED AS μ_g URONIC ACID PER GRAM DRY DEFATTED TISSUE

sye	GAG concentration									
	HA	HS	Ch-4-S	, Ch-6-S	DS	E				
rmal	89 ± 3.8	128 ± 4.5	145 ± 7.8	119 ± 4.9	186 ± 6.1	69 ± 3.2				
al Cancer Value	206 ± 13.6 < 0.01	142 ± 5.9 < 0.01	186 ± 16.4 < 0.01	296 ± 13.1 < 0.01	466 ± 15.1 < 0.01	106 ± 8.4 < 0.01				

dues given are the average of 6 different experiments - SEM.