

DTCs in Ovarian Cancer

Although ovarian cancer (OC) has a characteristic property of rapid cancer progression along with formation of ascites and metastasis within the peritoneal cavity, the presence of hematogenous tumor cell dissemination is also a common phenomenon in OC. DTCs are detected in **20% to 60%** of cases **before** the onset of **platinum-based chemotherapy**, depending on the method used, and were significantly associated with a **reduced PFS** and **OS** (Figure 1; Fehm, Kasimir-Bauer et al., 2013; Romero-Laorden et al., 2014; Cui et al., 2015).

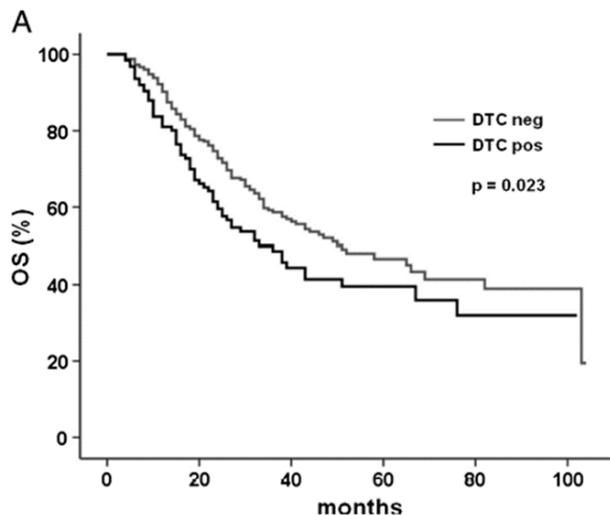


Figure 1: Prognostic significance of DTCs. Pooled analysis of 495 primary ovarian cancer patients (Fehm, Kasimir-Bauer et al., 2013).

We further demonstrated that DTCs, still present **after chemotherapy**, were **EpCAM-positive**, **non-apoptotic** and their **marked increase** was associated with a significantly **reduced PFS** (Figure 2; Wimberger et al., 2007). Interestingly, also in the context of current immunotherapeutic approaches, an additive EpCAM-specific **immunotherapy** in a palliative setting resulted in a reduction or **elimination of DTCs** as well as circulating tumor cells (CTCs) (Wimberger et al., 2009).

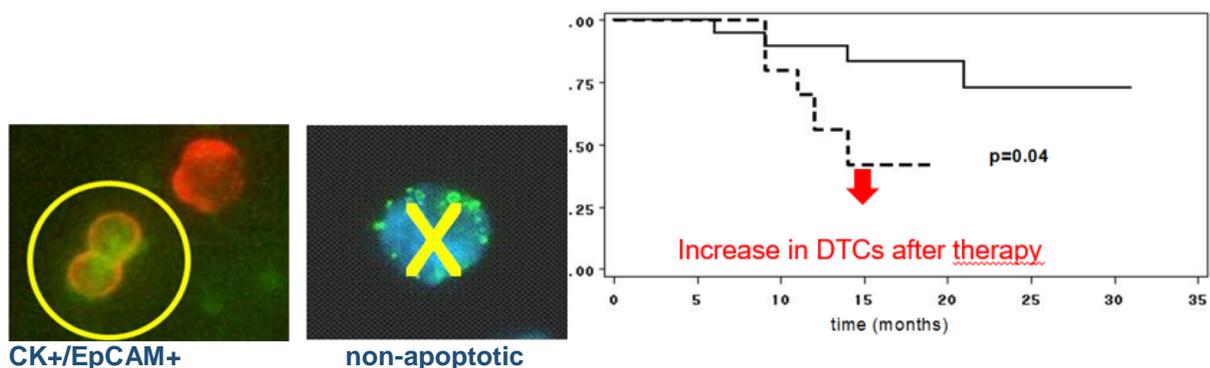


Figure 2: Characteristics and prognostic relevance of DTCs in ovarian cancer (Wimberger et al., 2007).

In the following years, we were able to show that the **negative prognostic impact of DTCs** was related to their persistence after platinum-based chemotherapy and to a **stem cell character** (Figure 3; Chebouti et al., 2016). DTCs, present and persistent after therapy, also expressed the stem cell markers **Lin-28** and/or **SOX-2** and were even present **before the onset of therapy** which explained the significantly **shorter PFS** of patients who changed from being DTC-negative before to DTC-positive after therapy. Besides the detection of

CKpos/SOX-2pos (LIN-28pos) DTCs, we also identified **CKneg/SOX-2pos (LIN-28pos) cells** in all patients and assumed that these DTCs might be related to tumor cells that had undergone phenotypic changes, known mesenchymal transition (**EMT**) ([Chebouti et al., 2016](#)). In this context, *in vitro* and mouse model studies revealed a role of chemotherapy-induced Jagged1 (a driver of cancer progression) in osteoblasts in promoting chemoresistance of bone metastasis which was confirmed in a collaborative project, where we demonstrated a significant increase of Jagged1 staining on osteoblasts of our patients' bone marrow samples after therapy ([Zheng et al., 2017](#)).

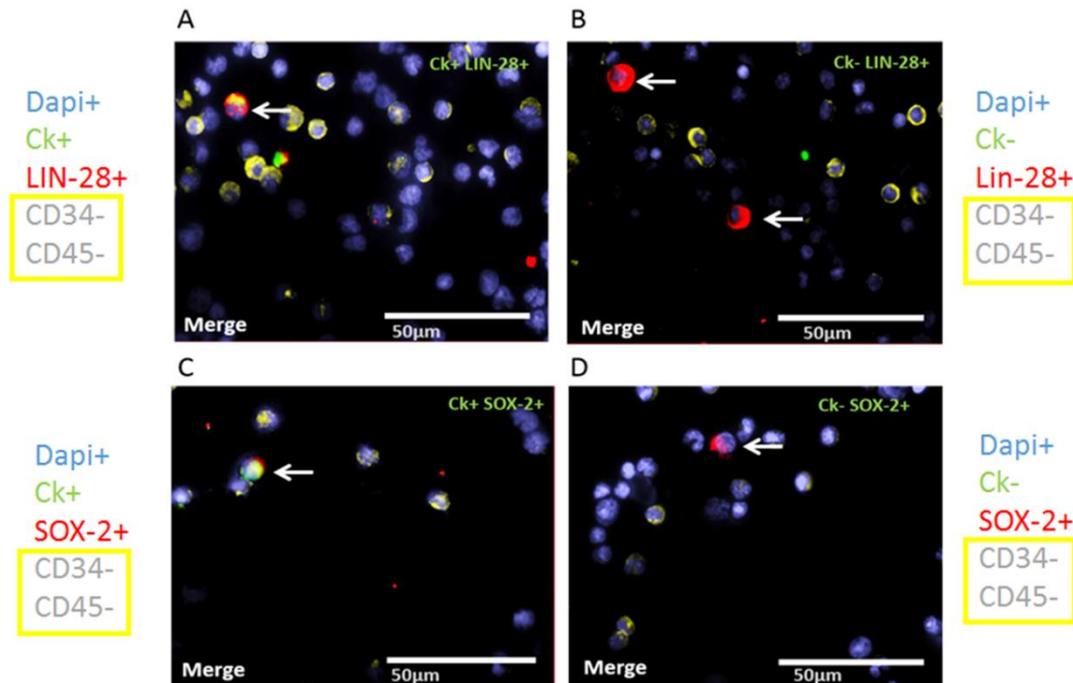


Figure 3: Representative four-fold immunofluorescence staining for DTCs with stem cell character. CKpos/LIN-28pos cells (A), CKneg/LIN28pos cell. (B), CKpos/SOX2pos cells (C) and CKneg/SOX2pos cell. (D), all CD45neg and CD34neg, magnification at 63x ([Chebouti et al., 2016](#)).

References

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