

## **ANTIPROLIFERATIVE EFFECTS OF HMG-COA REDUCTASE INHIBITORS (STATINS) ARE** SIGNIFICANTLY ENHANCED WHEN USED IN COMBINATION WITH Y-TOCOTRIENOL IN NEOPLASTIC MAMMARY EPITHELIAL CELLS IN CULTURE Vikram B. Wali and Paul W. Sylvester

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## Abstract

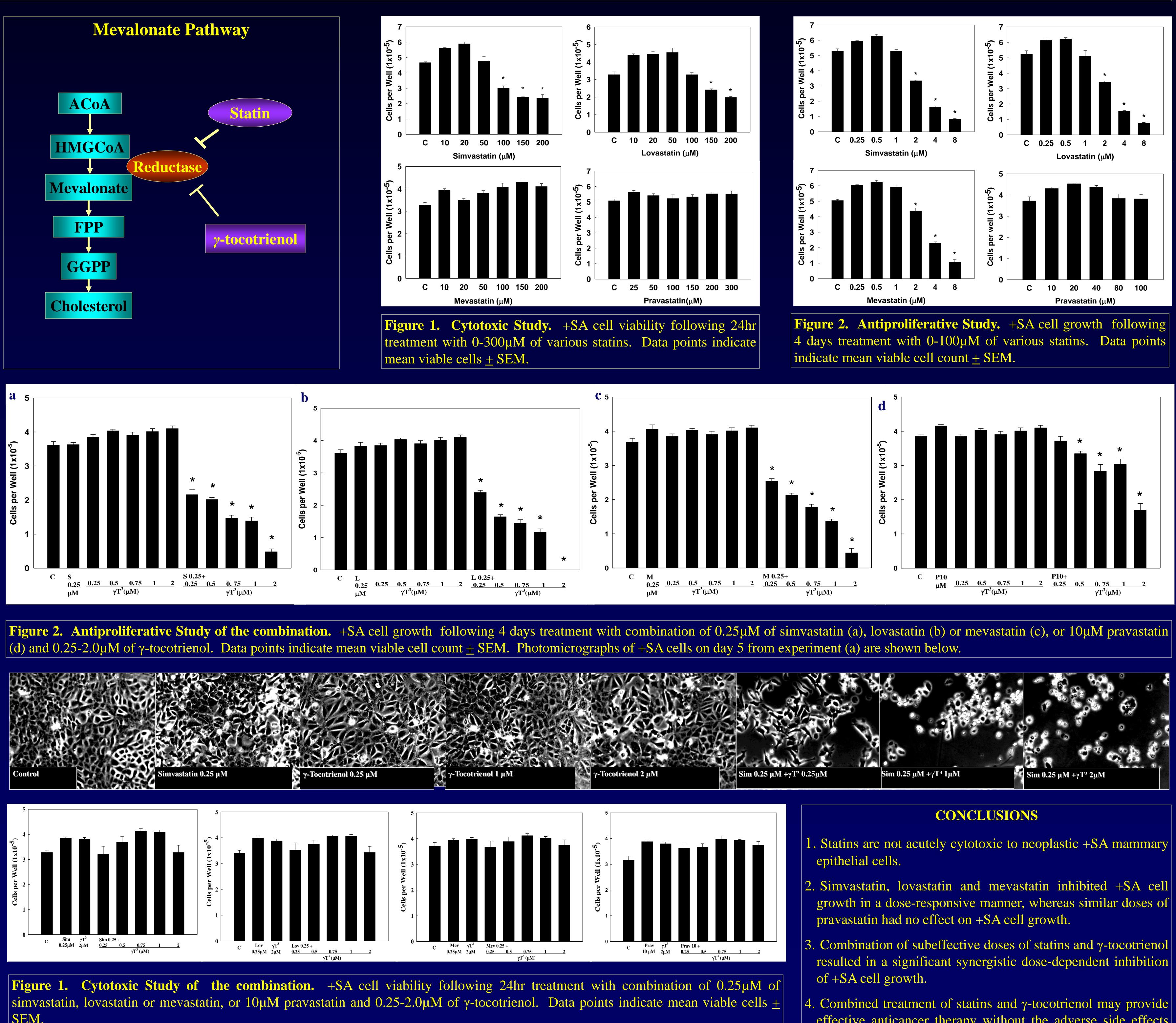
Statins, potent inhibitors of 3-hydroxy-3-methylglutaryl-coenzyme A (HMG CoA) reductase, represent a class of antihyperlipidemic drugs. However, previous reports have demonstrated that statins also display antiproliferative and cytotoxic activity against various types of cancers. It is well established that  $\gamma$ -tocotrienol, a member of the vitamin E family of compounds, also displays potent anticancer activity. Studies were conducted to determine if combination therapy of simvastatin, lovastatin, mevastatin, and pravastatin with  $\gamma$ -tocotrienol resulted in enhanced antiproliferative effects in the highly malignant +SA mammary epithelial cells grown in culture. Cells were maintained in serum-free defined media containing EGF (10 ng/mL) and insulin (10  $\mu$ g/mL) as co-mitogens. In cytotoxicity studies, cells were treated with 0-300µM of individual statins, and cell viability was assessed 24 hr later using the MTT assay. Results showed that none of the stating decrease +SA viability 24 hr after treatment exposure. In antiproliferative studies, +SA cells were treated with 0-100µM of individual statins for 4 days. Results showed that treatment with 2-8µM simvastatin, lovastatin, and mevastatin significantly inhibited +SA cell growth in a dose-responsive manner, while pravastatin had no effect on +SA cell growth at any dose tested. In order to achieve plasma concentrations of 2-8µM of these statins in humans, a treatment dose of 25 mg/kg or higher would be required, and treatment with these dose levels are associated with severe myotoxicity. However, additional studies showed that combination treatment with 0.25µM simvastatin, lovastatin or mevastatin, or 10 $\mu$ M pravastatin with sub-effective doses (0.25-2.0 $\mu$ M) of  $\gamma$ -tocotrienol resulted in significant dose-dependent inhibition in +SA cell proliferation during the 4 day culture period. In addition, none of the various combinations of individual statins and  $\gamma$ -tocotrienol were found to be cytotoxic. These findings suggest that combined treatment with  $\gamma$ -tocotrienol can significantly enhance the antiproliferative activity of various statins in malignant +SA mammary epithelial cells. Furthermore, the doses of statins used in these combination studies are not cytotoxic. These findings suggest that low-dose treatment of statins used in combination with low-dose  $\gamma$ -tocotrienol therapy may provide significant health benefits in the prevention and/or treatment of breast cancer in women, while avoiding myotoxicity associated with high dose statin treatment. Supported by NIH Grant CA 86833.

## **Materials and Methods**

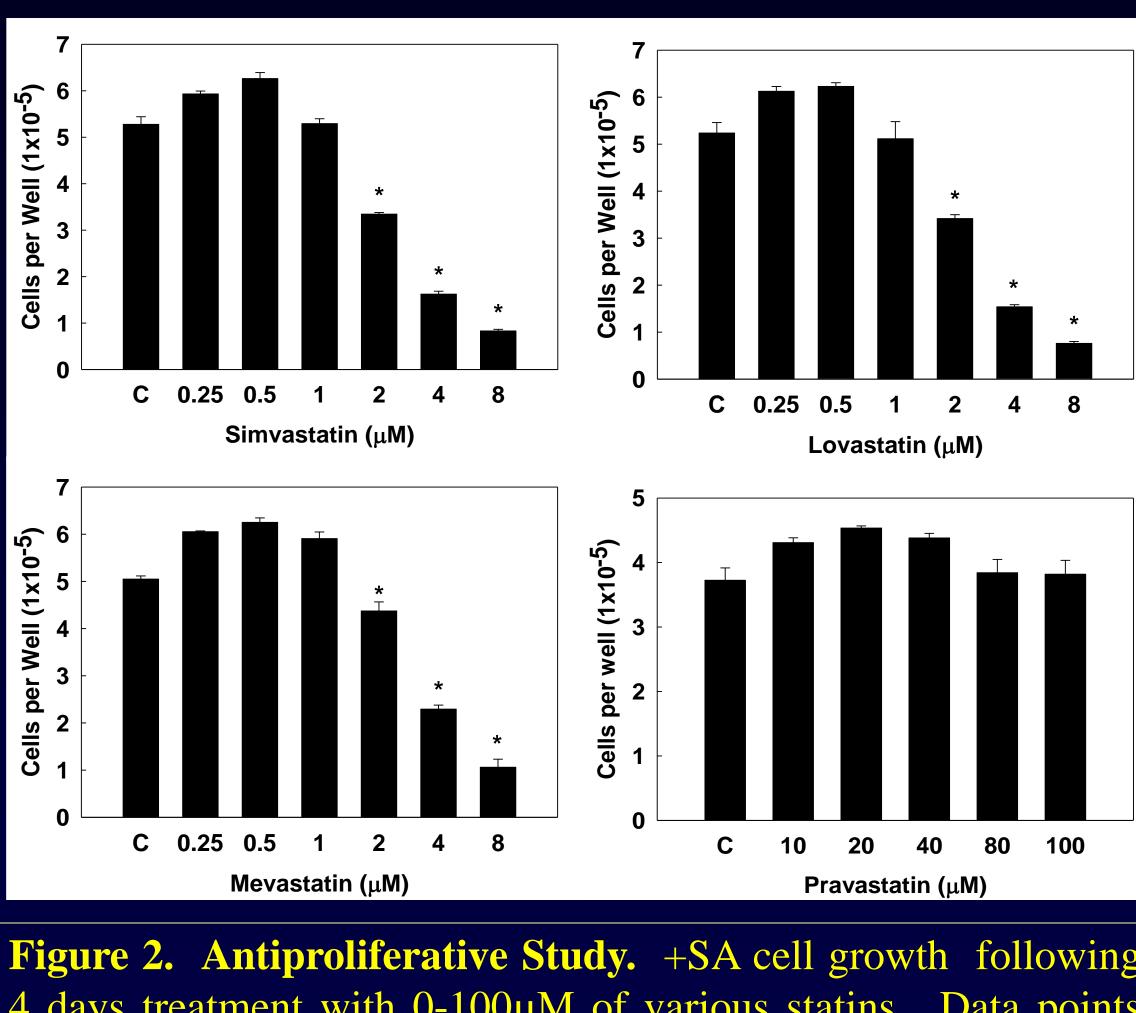
Cell Culture: +SA, a highly malignant cell line was derived from an adenocarcinoma that had developed spontaneously in a female BALB/c mouse. +SA cells were maintained in serum-free defined media consisting of DMEM/F12 containing 5mg/ml BSA, 10µg/ml transferrin, 100U/ml soybean trypsin inhibitor, 100U/ml penicillin, 0.1mg/ml streptomycin, 10ng/ml EGF, and 10µg/ml insulin.

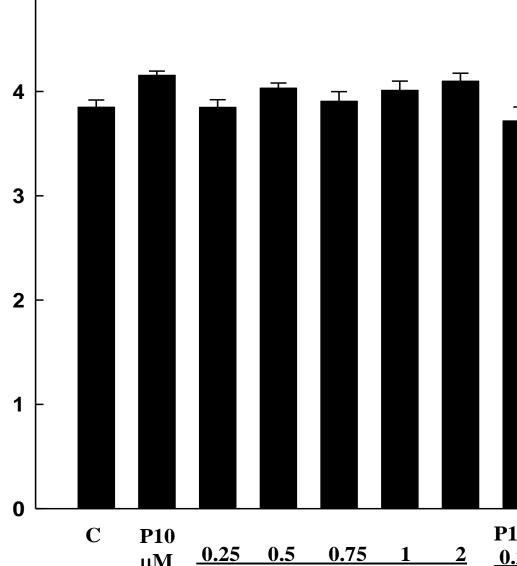
Measurement of Viable Cell Number: +SA cell count was determined by MTT assay. Briefly, cells were incubated at 37°C for 4hr with media containing 0.416mg/ml MTT. Then, media was removed and MTT crystals were dissolved in 1ml isopropanol. The optical density was measured at 570nm and the number of viable cells per well was calculated against a standard curve prepared by plating various cell concentrations, as determined by hemocytometer, at the start of each experiment.

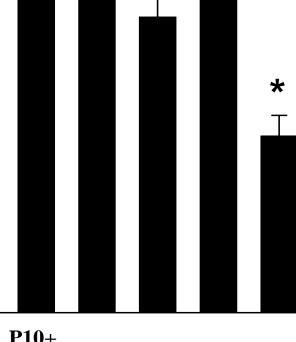
**Statistical Analysis:** Differences between various treatment groups were determined by analysis of variance followed by Dunnett's t-test. Differences were considered statistically significant at a value of P < 0.05.



SEM.







effective anticancer therapy without the adverse side effects associated with administration of high statin doses.