

Investigating the effect of Toyocamycin on Single A549 cells using Scanning Ion Conductance Microscopy

Toyocamycin induces apoptosis in A549 cells Summary Adenocarcinoma is a common cancer of the lung, and the identification of Toyocamycin leads to an Toyocamycin new anticancer drugs effective against lung cancer will open new abundance of unfolded therapeutic opportunities such as combination therapy. Toyocamycin is an protein within a cell and Cytosol RNA coding for antibiotic that has shown effect on cancer cells such as multiple myeloma high levels of caspase 3 — Spliced RNA transcription factors and pancreatic cancer cells. By using scanning ion conductance microscopy to signal apoptosis XBP1 RNA (SICM), toyocamycin is found effective against adenocarcinoma cells such Chaperones as A549. The drug induced membrane blebbing, cell shrinkage, and **Unspliced RNA** apoptotic volume decrease. The technique is suitable in continuous mapping of the topography of live single cells before and after treatment with anticancer drugs, due to its label free and non-invasive nature. Herein, we IRE1 have shown that toyocamycin is effective against A549 cells, and other biochemical assays could be used to further confirm the effect of the drug. SICM as a technique for 3D live cell imaging **Toyocamycin alters the native morphology of A549 cells as** shown using optical microscopy -Toyocamycin, after **Characterization of SICM** -Toyocamycin, after - Toyocamycin -lovocamycin, after **Fabrication of SICM imaging** imaging probe in 1 M KCl probe using a laser puller using cyclic voltammetry Laser beam Tip diameter = 80.0 nm +Toyocam **ට -**20.0 0.0 Potential (V vs. Ag/AgCl) Equation used for calculating Nanopipettes are fabricated from quartz **Toyocamycin alters the native morphology and volume of** nanopipette size capillary tube with I.D: 0.5 or 0.7mm **A549 cells observed using SICM** and O.D: 1 mm $V = IR_{\rm p}$ $R_{\rm p}$ $\sigma \pi r_{\rm i} \tan \alpha$ **Treated with toyocamycin after 12 h** Without toyocamycin after 12 h **Instrumentation in SICM** 30 x 30 μm 30 x 30 μm 40 x 40 μm 30 x 30 μm 30 x 30 μm 30 x 30 μm 0.5 V QRCE→ **Advantage of SICM** Non-invasive Cell topograph Label free Nanoscale resolution **Continuous volume measurement of A549 cells using SICM** Cell topography 0 hour Limitations 6 hours Nanopipette 🛶 QRCE \rightarrow captured as Low throughput (imaging probe) triangular prism pixels enables current drift Human cell volume calculation Realtime studies with X and y Piezo SICM is challenging x and y piezo controller





- Susceptible to

$$I(A) = \frac{V}{R_{\rm p} + R_{\rm AC} + R_{\rm s}}$$
$$R_{\rm T} = R_{\rm P} + R_{\rm AC} + R_{\rm s}$$



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X _{Pixel}

 $z(x,y) \times dy \times dx$

 $V_{cell} =$









Membrane blebbing induced by toyocamycin

-Toyocamycin



We have demonstrated SICM as a powerful tool for the studies of drug-induced apoptosis. Cells were treated with toyocamycin, and it was determined that there was a drastic change in the morphology at the higher molarities (30-50 μ M). However, lower concentrations (10 and 20 μ M) had a minor affect in the overall morphology yet did decrease the cell growth rate. Using SICM, the continuous measurement of the topography of live single cells can be followed where information about cell morphology, apoptotic volume decrease, and membrane blebbing can be obtained.

Future research includes fabricating pH sensors using a double nanopipette, where one of the barrels will be carbon pyrolyzed, and then functionalized with $IrO_2 pH$ sensitive material, while the other barrel will be filled with 0.1 M KCl for topography mapping. This multifunctional nanoscale electrode can be further used to understand the morphology and pH changes due to toyocamycin.

References and Group Information

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Toyocamycin induces membrane blebbing in A549 cells Membrane blebbing in this study (a hallmark of apoptosis) is a result of apoptosis

induced through toyocamycin. This protrusion of the cellular membrane increases throughout the final stages of apoptosis to produce smaller apoptotic bodies.



Conclusion

Future direction

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