Evaluation of Effects of Quercetin (3, 3', 4', 5, 7-pentohidroxyflavon) on Apoptosis and Telomerase Enzyme Activity in MCF-7 and NIH-3T3 Cell Lines Compared with Tamoxifen

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ABSTRACT

Objective: Quercetin has been shown to inhibit the proliferation of cancer cells. Tamoxifen is used for breast cancer. In this study, we have aimed to investigate the effects of quercetin and tamoxifen on telomerase enzyme activity and apoptosis in two cell lines.

Methods: In this study, 10, 50 and 100 µM of quercetin and tamoxifen were used to treat MCF-7 and NIH-3T3. Apoptosis was determined by the TUNEL method (Terminal Deoxynucleotide Transferase dUTP Nick End Label) and telomerase enzyme activity was determined by ELISA (Enzyme-Linked Immunosorbent Assay).

Results: In the NIH3T3 cell line, only 100 μM quercetin and tamoxifen induced significant apoptosis. In the MCF-7 cell line 10 μM and 100 μM quercetin in the 24th hour and 100 µM guercetin in the 72nd hour induce apoptosis. In 24th and 48th hours, 50 µM tamoxifen and 100 µM tamoxifen in the 24th and 48th hours induce apoptosis in the MCF-7 cell line. In MCF-7 and NIH-3T3 cell lines, all doses of quercetin and tamoxifen reduced telomerase enzyme activity compared to the control group.

Conclusion: In this study, it was shown that quercetin has similar effects to tamoxifen. However quercetin induces apoptosis more than decreasing telomerase enzyme activities, being different from tamoxifen. We hope that the findings will assist in developing new therapeutic pathways for preventing breast cancer. However, there should be many more studies in order to discover quercetin and other potential drugs.

Key Words: MCF-7, NIH-3T3, quercetin, tamoxifen, telomerase activity, apoptosis

Received: 19.12.2009 Accepted: 27.05.2010

Introduction

Breast cancer is the most frequent cancer and the second leading cause of cancer mortality in women (1, 2).

The balance between proliferation and apoptosis is crucial in determining the overall growth or regression of the tumour in response to chemotherapy, radiotherapy, and more recently, hormonal treatments (3).

Apoptosis occurs in two pathways termed the mitochondrial pathways and death receptor mediated pathway. However, the mitochondrial pathway seems to dominate in breast cancer (3). In fact, defects in apoptotic pathways are now thought to contribute to a number of human disease, ranging from neurodegenerative disorders to malignancy (4).

Telomere dysfunction may also play a role in the genomic instability seen during carcinogenesis (5). In the majority of human cancers, telomerase activity is up-regulated or reactivated and a correlation between cancer and telomerase expression has been demonstrated (6).

Telomerase activity is suppressed during embriyonic differentiation in most somatic cells but remains active in some tissues, such as male germ cells, activated lymphocytes, and certain types of stem cell populations (7).

Quercetin is a member of a group of polyphenolic compounds known as flavonoids. Flavonoids, including quercetin, occur naturally in fruits, vegetables, nuts, seeds, flowers and bark (8).

Quercetin appears to have many benefical effects on human health, including cardiovascular protection, anti-cancer activity, anti-ulcer effects, anti-allergy activity, cataract prevention, anti-viral activity and anti- inflammatory effects (6, 9, 10).

Although the mechanisms by which quercetin exerts its activity remain unknown, there is evidence suggesting that the action of quercetin is probably mediated by interaction with the type II estrogen binding sites. Quercetin is a potent inhibitor of enzymes involved in signal transduction pathways including protein kinase C (PKC), tyrosine kinase, cdc25 phosphatase, PI-3 kinase, DNA topoisomerase II (11).

It has been shown that quercetin treatment causes cell cycle arrest of such as G1/S or G₂/M control points in different cell types. Moreover, quercetin-mediated apoptosis may result from the induction of stress proteins, distruption of microtubules and mitochondrial release of cytochrome c, and activation of caspases (10).

Tamoxifen is a non-steroidal anti-estrogen drug widely used in the treatment of patients with estrogen receptor (ER)-positive breast cancer (12).

By binding to ER, tamoxifen decreases the expression of estrogen-dependent gene stimulated by estrogen (12, 13).

Tamoxifen is known to arrest MCF-7 cell proliferation in the $\rm G_0$ or $\rm G_1$ phase of the cell cycle (14). It has been shown that tamoxifen induces apoptosis in both ER-positive and ER-negative human breast cancer cells by activating the caspase pathway (15). The dose response and time dependent apoptotic effect of tamoxifen was demonstrated in ER-positive MCF-7 and ER-negative MDA-MB-468 cells, but ER-positive MCF-7 cells were much more sensitive than ER-negative MDA-MB-468 cells (16).

The treatment of breast carcinoma cell lines MCF-7 and MDA-MB-231 with the anti-estrogen drug tamoxifen reduces telomerase enzyme activity in comparison with untreated cells (17). However the effect was longer lasting in the ER-positive cell line (MCF-7) (18).

It has been demostrated that the inhibition of telomerase by tamoxifen is due to an action of the hormone on the breast carcinoma cells (14).

We have aimed to investigate the effects of quercetin, which has not been used as a drug, on apoptosis and telomerase enzyme activity in MCF-7 and NIH-3T3 cell lines compared with tamoxifen, which is used in breast cancer.

Materials and Methods

Mouse fibroblast cell line (NIH-3T3) and human breast cancer cell line (MCF-7) were grown and cultured in the Department of Medical Biology, Eskişehir Osmangazi University, Eskişehir, Turkey in 2004.

NIH-3T3 cell line were cultured in Dulbecco's Modified Eagle Medium (DMEM) (Sigma) supplemented with 10% foetal calf serum, 100 U/ml penicilin plus 100 μ g/ml streptomycin, 4% sodium bicarbonate (9.2gr/ml) at 37°C and 5% CO₂ in a

humidified incubator. MCF-7 cell line were cultured in Miniumum Essential Medium (MEM) (Sigma) supplemented with 10% foetal calf serum, 100 mM sodium pyruvate, 2% sodium bicarbonate (7.5 gr/ml) and 1mg/ml Bovine insulin at 37°C and 5% CO₂ in a humidified incubator.

Tested groups were identified as Dimethyl sulfoxide (DMSO) control, 10, 50, 100 μ M doses of quercetin and tamoxifen. Quercetin and tamoxifen were dissolved in DMSO. Measurements were made at the24th, 48th, 72nd hours for apoptosis assay and at 48th, 72nd hours for telomerase enzyme activity in both cell lines.

The experiments were repeated three times in all doses. Apoptag Plus Peroxidase In Situ Apoptosis Detection Kit (Chemicon) was used for apoptosis assay. To determine apoptotic index, apoptotic nuclei were counted at each chamber slide of cell lines culture. 500 cells of in the different 10 areas were evaluated in each slide.

Apoptotic index (APOi) was determined by formulation as below.

Apoptotic index (APOi): Number of apoptotic nuclei/ total cell number x 100.

To determine telomerase enzyme activity, TeloTAGGG $^{\mbox{\scriptsize PLUS}}\mbox{-}$ PCR ELISA (6) kit was used.

Data were analyzed using One Way ANOVA test for percentage apoptotic nuclei. For telomerase enzyme activity, data were analyzed using Students t test. A p value of <0.0.5 was considered to be statistically significant in the experiments. Changes according to dose and time were determined by regression and correlation analysis.

Results

In NIH-3T3 cell line as control, it was determined that 100 μ M dose of quercetin induced significant apoptosis at the24th and 72nd hours according to 48th hour (p<0.05). However, no significant changes in other doses were detected. 100 μ M dose of tamoxifen at the 72nd hour induced apoptosis as same as quercetin's effects in NIH-3T3 cell line (p<0.05) (Table 1, Figure 1).

All doses of quercetin induced apoptosis when compared to controls in MCF-7 cell line (p<0.05). It was detected that a 10 μ M dose of quercetin induced apoptosis significantly at the 24th

Table 1. Apoptotic index (APOi) in NIH-3T3 at 24th, 48th, 72nd hours

Groups	Doses (µM)	Apoptotic index (APOi) (%)					Statistically analysis (in hours)			
	_	24 th hour		48 th hour			72 nd hour			
Quercetin	10 μΜ	0.26±0.16	3**	0.14±0.13	4	24	0.27±0.19	**8	43	p>0.05
	50 μM	uM 0.26±0.16	0.17±0.16		-0.024	0.20±0.21	.378	0.1	p>0.05	
	100 μΜ	0.42±0.25	آ چ	0.21±0.17	<u> </u>	\mathbb{R}^2	0.46±0.34	Ī	R^2	$p{<}0.05$ 24. $^{th}\text{-}48^{th}$ and 48^{th} - 72^{nd}
Control (DMSO)	0	0.18±0.10		0.16±0.15			0.15±0.17			p>0.05
Tamoxifen	10 μΜ	0.24±0.15	* @	0.22±0.19	9	Ģ	0.40±0.23	*	2	p>0.05
	50 μM	0.22±0.14	-=0.328* R ² =0.108	0.29±0.20 77 0.29±0.20 77 0.27±0.19	0.046	0.38±0.17	⊸. ⊂	0.202	p>0.05	
	100 μΜ	0.27±0.17	r=0 R²=(0.27±0.19	r=0	$\mathbb{R}^2 = 0$	0.50±0.19	r=0	$\mathbb{R}^2 = 0$	p<0.05 24 th -72 th and 48 th -72 nd
Statistical analysi (Between groups		p>0.05		p>0.05			p>0.05			
C: DMSO Control, Q: Quercetin, T: Tamoxifen, r: Correlation Coefficient, R ² : Coefficient of Determination, *p <0.05, **p <0.01										

hour when compared to other hours (p<0.05). 100 µM dose of quercetin induced apoptosis at the 24th and 72nd hours (p<0.05). 50 µM and 100 µM doses of tamoxifen induced apoptosis at the 24th and 48th hours when compared to the 72nd hours and control at the 24th hour (p<0.05) (Table 2, Figure 2).

In NIH-3T3 cell line, it was found that when compared with controls, quercetin and tamoxifen inhibit telomerase activity at the 48^{th} and 72^{nd} hours (p<0.001) (Table 3).

In MCF-7 cell line, telomerase enzyme activity was decreased by all doses of tamoxifen at the 48th and 72nd hours. The 100 µM dose of tamoxifen was more effective at the 48th and 72ndhours in MCF cell line (p<0.001). All doses of tamoxifen were significantly decreased when compared to the same doses of guercetin at both hours (p<0.001). However, only 10 μM tamoxifen was the same as 10 μM quercetin at the 72nd hour in MCF cell line. The telomerase enzyme activity was decreased by all doses of quercetin at the 48th and 72nd hours when compared to controls in MCF-7 cell line (p<0.001). However,100 µM tamoxifen was more effective at the 72nd hour. Additionally in this study, it was determined that quercetin and tamoxifen inhibit telomerase activity in a dose and timedependent manner in MCF-7 cell line when compared with controls (p<0.001) (Table 4).

Discussion

Flavonoids have been found to inhibit the activity of protein tyrosine kinases, with the same potency as they inhibit growth of human gliosarcoma and squamous cell carcinoma, ovarian and NIH-3T3 cells (19).

In parallel with our findings, the activity of guercetin on the proliferation of endothelial cells, A549, BEL-7402, MKN-45 tumour cells and NIH-3T3 fibroblast cells is determined in a dose-dependent manner (20).

It was also known that guercetin has a wide range of biological activities, including inhibition of mutant p53 expression, the Na⁺K⁺ATPase, and androgen receptor expression and function in LNCap cells. It has antiproliferative activity in vitro against several types of cancer cells of human origin including ovarian, breast, leukaemic, v-H-ras NIH-3T3 transformed cells, and intestinal cells. It blocks the cell cycle at the G1/S transition in colon and gastric cancer as well as in leukaemic cells, but causes a G2/M block in breast and laryngeal cancer cells lines or in non-oncogenic fibroblasts (11).

These findings and our findings showed that quercetin and tamoxifen do not cause important side effects in NIH-3T3 cell line which is used as a control.

It has been suggested that the breast cancer antiproliferative effect of tamoxifen may be via a receptor-mediated cytostatic activity, non-specific activity, or a receptor-mediated cytotoxic activity. Previous reports have suggested that tamoxifen induced characteristic morphological changes consistent with apoptosis, including condensation of cytoplasm and convolution of nuclear and internucleosomal DNA fragmentation in breast cancer cells. This suggests that tamoxifen inhibits the growth of breast cancer by inducing apoptosis (21).

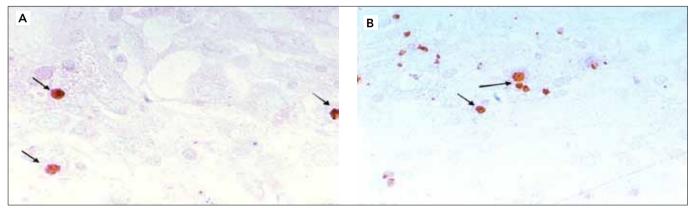


Figure 1. View of apoptotic nucleus in NIH-3T3 cell line to which are applied 100 μM quercetin (A) and 100 μM tamoxifen (B) at 72nd hour (counterstain in Methyl Green, x 400)

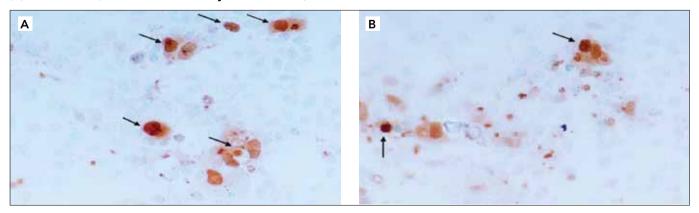


Figure 2. View of apoptotic nucleus in MCF-7 cell line to which are applied 100 μM quercetin at 72nd hour (A) and 100 μM tamoxifen at 24th hour (B) (counterstain in Methyl Green, x 400)

Table 2. Apoptotic index (APOi) in MCF-7 at 24th, 48th, 72nd hours

Groups	Doses (µM)	Apoptotic index (APOi) (%)				Statistically analysis (in hours)		
	_	24 th hour		48 th hour		72 nd hour		
Quercetin	10 μΜ	0.58±0.23	3**	0.36±0.32	24	0.22±0.14 *	43	p<0.05 24.th-48th and 24th -72nd
	50 μM	0.52±0.19	-=0.473** R²=0.223	0.36±0.17 🖰	0.024	0.40±0.18 🛱	0.143	p>0.05
	100 μΜ	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	0.71±0.31 L	$\mathbb{R}^2 =$	p<0.05 24. th -48 th and 48 -72 nd			
Control (DMSO)	0	0.10±0.10		0.16±0.12		0.15±0.14		p>0.05
Tamoxifen	10 μΜ	0.22±0.14	*8	0.20±0.13 _m		0.15±0.14 *	$R^2 = 0.202$	p>0.05
	50 µM	0.40±0.18	0.328*	0.42±0.19 \(\frac{5}{2}\)		0.20±0.13 $\frac{4}{5}$		p<0.05 24 th -72 th and 48 th -72 nd
	100 µM	0.71±0.31	r=0 R ² =	0.52±0.28 ¹		0.22±0.17 📙		
Statistical analysi	S	p<0.05						p<0.05
(Between groups	;)	Q10-C						Q10-C
		Q50-C		p<0.05		p<0.05		Q50-C
		Q100-C		T100-C		Q100-C		Q100-C
		T50-C				Q100-T100		T50-C
		T100-C						T100-C
C: DMSO Control, Q: Quercetin, T: Tamoxifen, r: Correlation Coefficient, R ² : Coefficient of Determination) (*p <0.05, **p <0.001								

Table 3. Telomerase enzyme activities in NIH-3T3 cell line at 48^{th} and 72^{nd} hours

Groups	Doses (µM)	Telomerase enzyme activities							
		48 th hour	72 nd hour						
Quercetin	10	0.674±0.043	*4 C 0.469±0.003						
	50	0.544±0.076	0.516±0.054						
	100	0.673±0.041	0.521±0.018						
Control (DMSO)	0	5.765±1.035	4.433±1.293						
Tamoxifen	10	0.653±0.03	*გ დ 0.510±0.017 *გ ჯ						
	50	0.633±0.025	* 9 0.510±0.017 * 6.23 9 0.65±0.017 * 6.23 9 0.65±0.017 * 6.23 9 0.65±0.017 * 6.23						
	100	0.557±0.021	0.402±0.046						
Statistical analysis		C-Q ₁₀ (p<0.001	I) C-Q ₁₀ (p<0.001)						
(Between Groups)		C-Q ₅₀ (p<0.001	I) C-Q ₅₀ (p<0.001)						
		C-Q ₁₀₀ (p<0.00	1) C-Q ₁₀₀ (p<0.001)						
		C-T ₁₀ (p<0.001) C-T ₁₀ (p<0.001)						
		C-T ₅₀ (p<0.001) C-T ₅₀ (p<0.001)						
		C-T ₁₀₀ (p<0.001	1) C-T ₁₀₀ (p<0.001)						
		$Q_{10}^{}$ - $T_{10}^{}$ n.s	$Q_{10}^{-}T_{10}^{-}$ n.s						
		Q_{50} - T_{50} n.s	O_{50} - T_{50} n.s						
		O ₁₀₀ -T ₁₀₀ n.s	O ₁₀₀ -T ₁₀₀ n.s						

C: DMSO Control, Q: Quercetin, T: Tamoxifen, r: Correlation Coefficient, R^2 : Coefficient of Determination, *p<0.05, **p<0.01, n.s: not significant

In one study, it was revealed that MCF-7 cells were somewhat more sensitive to stimulation at a low tamoxifen dose (1 μ M), and cytotoxicity at higher tamoxifen doses (\geq 5 μ M) compared with MDA-231 cells. 10 μ M tamoxifen also induced

Table 4. Telomerase enzyme activities in MCF-7 cell line at 48^{th} and 72^{nd} hours

Groups Doses (μM)			Telomerase enzyme activities						
		48 th hour	72 nd hour						
Quercetin	10	20.534±0.967	* ₅ ∞ 1.854±0.755 * ₅ ⊱						
	50	16.580±1.280	5.6.707±0.563 (5.6.707)						
	100	12.712±1.073							
Control (DMSO)	0	194.476±5.917	381.36±11.561						
Tamoxifen	10	5.267±0.591	* = 1.268±0.287 * \$						
	50	4.724±0.688	65.0.830±0.142 85.0						
	100	3.512±0.456	*55.0 1.268±0.287 *85.0 9.351 0.830±0.142 *0.0 9.2 0.251 0.251±0.090 ±2.2						
Statistical analysi	S	C-Q ₁₀ p<0.001	C-Q ₁₀ p<0.001						
		C-Q ₅₀ p<0.001	C-Q ₅₀ p<0.001						
		C-Q ₁₀₀ p<0.001	C-Q ₁₀₀ p<0.001						
		C-T ₁₀ p<0.001	C-T ₁₀ p<0.001						
		C-T ₅₀ p<0.001	C-T ₅₀ p<0.001						
		C-T ₁₀₀ p<0.001	C-T ₁₀₀ p<0.001						
	•	O ₁₀ -T ₁₀ p<0.001	$Q_{10}^{-}T_{10}^{-}$ n.s						
	•	O ₅₀ -T ₅₀ p<0.001	Q_{50} - T_{50} p<0.001						
		Q ₁₀₀ -T ₁₀₀ p<0.05	Q ₁₀₀ -T ₁₀₀ p<0.001						

C: DMSO Control, Q: Quercetin, T: Tamoxifen, r: Correlation Coefficient, R^2 : Coefficient of Determination, *p<0.05, ***p<0.001, n.s: not significant

time-dependent cytotoxicity in both cell lines, and MCF-7 cells were slightly more sensitive to tamoxifen. Morphologic changes in MCF-7 and MDA-231 cells induced by 10 μ M tamoxifen at 24 hours were shown (22).

In parallel with our findings about quercetin, it is shown that 25 μ M quercetin caused morphological changes which induce apoptosis in MCF-7 cells after 24 hour treatment (23).

It has been demonstrated that quercetin induces growth inhibition in the human breast carcinoma cell line MCF-7 through at least two different mechanisms; by inhibiting cell cycle progression and by inducing apoptosis (24).

It is shown that 20-80 μ M doses of quercetin have cytotoxic effects and induce apoptosis in a dose-dependent manner in A549 and H1299 human lung cancer cell lines. It is also reported that higher doses of quercetin (60 and 80 μ M) almost completely inhibited the cell proliferation (10).

It has been shown that quercetin and genistein have opposite effects on proliferation of human breast cancer cells at different concentration. Phytoestrogens stimulate the proliferation of MCF-7wt and MCF7SH cells at low and intermediate concentrations and are cytotoxic at high concentrations even for HeLa cells (25).

It has been shown that quercetin increases DNA fragmentation in a dose-dependent manner and induces apoptosis by caspase activation and arrests the G2/M phase in U937 cells (26).

We observed that, in MCF-7 cells, quercetin and tamoxifen significantly decrease telomerase enzyme activity in a doseand time-dependent manner. However, quercetin was not as effective as tamoxifen.

In nasopharyngeal carcinoma cells, Ong et al. have showed that expression of p53 and the phosphorylated form of p53 were not increased by quercetin treatment. However, expression of the hypophosphorylated form of Rb was upregulated in a dose-dependent manner when cells were treated with 59.2 μ M quercetin for 24 hour (27).

In another study, it has been demonstrated that quercetin inhibits the growth of A431 cells in a dose-dependent (10-50 μ M) and a time dependent manner (12-72 hour). They also indicated that, among the flavonoids investigated, quercetin and luteolin were the most potent inhibitors of the proliferation of A431 and other cell lines, such as MiaPaCa-2, MCF-7 and Hep G2 (19).

The effects of quercetin on the proliferation of endometrial cancer cell line is shown by Kaneuchi et al. 10, 50,100 μ M quercetin suppressed the cell growth to 49, 10 and 13% respectively (28).

Rodgers et al. have showed that in the MCF-7 cell line, $50 \mu M$ quercetin treatment decreased DNA synthesis. RNA synthesis was significantly inhibited by $10 \mu M$ quercetin (23).

It has been shown that the most potent quercetin effect was found to be dose-dependent and chromatin condensation, an indication of apoptosis, was noticed on human colon cancer cells. Quercetin was found to distribute throughout the cell with higher amounts in the perinuclear and nucleoli areas (29).

Our results in MCF-7 cells were not consistent with several reports which showed that quercetin, H-89 or herbimycin A did not significantly inhibit telomerase enzyme activity (30).

Kudo et al. showed that, although $100 \, \mu M$ quercetin could not influence the HSP90 expression, which is essential for telomerase enzyme activity, quercetin might affect the interaction between HSP90 and actin filaments without influencing HSP90 expression itself. Thus quercetin delayed the reorganization of F-actin (31).

A study showed that 100 μ M quercetin could not inhibit hTERT (human telomerase reverse transcriptase) mRNA in malignant melanoma cell line (32).

As is seen from the results of these studies, quercetin prevents cancer by decreasing telomerase activity more than by upregulating tumor suppressor genes (p53, Rb), suppressing DNA synthesis, decreasing cell proliferation and showing cytotoxic action.

Aldous et al. have found that telomerase activity in MCF-7 and MDA-MB 231 appears to be relatively unaffected by tamoxifen concentrations of 10⁻⁶, 10⁻⁷ and 10⁻⁹ M.,but 10⁻⁸ M treated cells showed significantly lower activities than untreated control cells, although both cell lines demonstrated a rise in activity at 144 hours. The effects of the 10⁻⁸M concentration on telomerase activity in both cell lines were significantly different from the other concentrations used (14).

Brandt et al. have shown that telomerase enzyme activities were significantly reduced following treatment with tamoxifen at 20 µM for 24 hour, showing a further reduction when the incubation was continued for 48 hours in the human hepatoblastoma cell line HepG2. In addition, while the rate of apoptotic nuclei was still low (about 5%) following 24 hour incubation of the cells, it increased up to 63% when the incubation time was prolonged to 72 hours (33). In another study which was carried out by the same researchers, it has shown that tamoxifen does not affect the transcription level olf hRT, hTERT, and TP1 in HepG2 cells. In contrast, the tamoxifen-induced down-regulation of telomerase activity in the breast cancer cell line MCF-7 was related to a decrease in HTERT mRNA expression. They also observed that protein kinase C activity was suppressed by tamoxifen. In conclusion, the tamoxifen induced down-regulation of telomerase activity in HepG2 cells may be due to the suppression of protein kinase C activity (34).

It has been shown that hTERT expression in cell lines showed the highest inhibition with tamoxifen (10 μ M), but tamoxifen+quercetin (20 μ M), showed agonistic effects and tamoxifen expression was recovered by the teatments (35).

In a study, researchers have found that type II EBS are expressed in non-small- cell lung cancer cell lines and primary tumors, and that both tamoxifen and quercetin have an anti-proliferative effect on these tumor cells (36).

These findings together with our findings show that quercetin, like tamoxifen, does not affect the NIH-3T3 cell line with side effects. However, they positively affect with the MCF-7 cell line by decreasing telomerase enzmye activity and inducing apoptosis.

As expected in the MCF-7 cell line, tamoxifen has apoptotic effects. Tamoxifen prevents cancer by decreasing telomerase enzyme activity and increasing apoptosis in a time- and dose-dependent manner.

Quercetin's antiproliferative effects are shown by inducing apoptosis more than by decreasing telomerase enzyme activity in a time- and dose-dependent manner.

In conclusion, flavonoids such as quercetin which are being studied have benefical effects on cancer therapy. These effects, such as decreasing telomerase enzyme activity and inducing apoptosis, must be studied more extensively to help develop new therapeutic pathways. There should be many more studies in order to discover guercetin and other poten-

tial medicines. We hope that these findings may be helpful cancer prevention and therapy.

Acknowledgements

This study was supported by a Grant of the Research Foundation of University of Eskişehir Osmangazi, Turkey (Grant No: 200411016).

Conflict of Interest

No conflict of interest was declared by the authors.

References

- Bentrem DJ, Gaiha P, Jordan VC. Oestrogens, Oestrogen Receptors and Breast Cancer. EJC 2003;1:1-12. [CrossRef]
- Imyanitov EN, Hanson KP. Mechanism of Breast Cancer. Drug discovery today: disease mechanism 2004;1:235-45. [CrossRef]
- Parton M, Dowsett M, Smith L. Studies of Apoptosis in Breast Cancer. BMJ 2001;322:1528-32. [CrossRef]
- Lowe SW, Lin AW. Apoptosis in Cancer. Carcinogenesis 2000;21:485-95. [CrossRef]
- Gilley D, Tanaka H, Herbert BS. Telomere Dysfunciton in Aging and Cancer. Int J Biochem Cell Biol 2005;37:1000-13. [CrossRef]
- Falchetti A, Becherini L, Martineti V, Morelli A, Benvenuti S, Picariello L, et al. Telomerase Repeat Amplification Protocol (TRAP):
 A New Molecular Marker for Parathyroid Carcinoma. Biochem Biophys Res Commun 1999;265:252-5. [CrossRef]
- Başaran A. Hücresel Yaşlanma ve Hücre Ölümsüzlüğünde Telomeraz Enzim Kompleksi. Sendrom 2002;14:90-5.
- Conquer JA, Maiani G, Azzini E, Raguzzini A, Holub BJ. Supplementation with Quercetin Markedly Increases Plasma Quercetin Concentration without Effect on Selected Risk Factors for Heart Disease in Healthy Subjects. J Nutr 1998;128:593-7.
- Adebamowo CA, Cho E, Sampson L, Katan MB, Spiegelman D, Willett WC et al. Dietary Flavonos and Flavonol-Rich Foods Intake and Risk of Breast Cancer. International Journal of Cancer 2005;114:628-33. [CrossRef]
- Kuo PC, Liu HF, Chao JI. Survivin and p53 modulate quercetin-induced cell growthinhibition and apoptosis in human lung carcinoma cells. The Journal of Biological Chemistry 2004;279:55875-85.
 [CrossRef]
- Huynh H, Nguyen TTT, Chan E, Tran E. Inhibition of ErbB2 and ErbB-3 Expression by Quercetin Prevents Transforming Growth Factor Alpha (TGF-α) and Epidermal Growth Factor (EGF)-Induced Human PC-3 Prostate Cancer Cell Proliferation. International Journal of Oncology 2003;23:821-9.
- Petinaria L, Kohn LK, Carvalhob JE, Genari SC. Cytotoxicity of Tamoxifen In Normal And Tumoral Cell Lines And its Ability to Induce Cellular Transformation in Vitro. Cell Biol Int 2004;28:531-9.
- Barron-Gonzalez A, Arias-Martinez J, Castro-Romero I. Antiestrogens: Mechanism of Action and Clinical Applications. Salud Publica Mex 2001;43:577-84.
- Aldous WK, Marean AJ, Dehart MJ, Matej LA, Moore KH. Effects of Tamoxifen on Telomerase Activity in Breast Carcinoma Cell Lines. Cancer 1999;85:1523-9. [CrossRef]
- Mandlekar S, Hebbar V, Christov K, Kong AN. Pharmacodynamics of Tamoxifen and Its 4-Hydroxy and N.Desmethl Metabolites: Activation of Caspases and Induction of Apoptosis in Rat Mammary Tumors and in Human Breast Cancer Cell Lines. Cancer Research 2000;60:6601-6.
- Salami S, Karami-Tehrani F. Biochemical Studies of Apoptosis Induced by Tamoxifen in Estrogen Receptor Positive and Negative Breast Cancer Cell Line. Clin Biochem 2003;36:247-53. [CrossRef]

- Seeger H, Diesing D, Guckel B, Wallwiener D, Mueck AO, Huober J. Effect of Tamoxifen and 2-Methoxyestradiol Alone and in Combination on Human Breast Cancer Cell Proliferation. J Steroid Biochem Mol Biol 2003;84:255-7. [CrossRef]
- Mokbel K. The Role of Telomerase in Breast Cancer. Eur J Surg Oncol 2000;26:509-14. [CrossRef]
- Huang YT, Hwang JJ, Lee PP, Ke FC, Huang JH, Huang CJ, et al. Effects of Luteolin and Quercetin, Inhibitors of Tyrosine Kinase, on Cell Gorwth and Metastasis-associated Properties in A431 Cells Overexpressing Epidermal Growth Factor Receptor. Br J Pharmacol 1999;128:999-1010.
- Tan WF, Lin LP, Li MH, Zhang YX, Tong YG, Xiao D, et al. Quercetin, a dietary-derived flavonoid, possesses antiangiogenic potential. Eur J Pharmacol 2003:459:255-62. [CrossRef]
- Zhang GJ, Kimijima I, Onda M, Kanno M, Sato H, Watanabe T, et al. Tamoxifen-induced Apoptosis in Breast Cancer Cells Relates to Down-regulation of bcl-2, but not bax and bcl-X(L), without Alteration of p53 Protein Levels. Clin Cancer Res 1999;5:2971-7.
- Perry RR, Kang Y. Greaves B. Effects of Tamoxifen on Growth and Apoptosis of Estrogen-Dependent and -Independent Human Breast Cancer Cells. Annals of surgical Oncology 1995;2:238-45.

 [CrossRef]
- Rodgers EH, Grant MH. The effect of the flavonoids, quercetin, myricetin and epicatechin on the growth and enzyme activities of MCF-7 human breast cancer cells. Chem Biol Interact 1998;116:213-28. [CrossRef]
- Choi JA, Kim JY, Lee JY, Kang CM, Kwon HJ, Yoo YD, et al. Induction of Cell Cycle Arrest and Apoptosis in Human Breast Cancer Cells by Quercetin. Int J Oncol 2001;19:837-44. [CrossRef]
- 25. Maggiolini M, Bonofiglio D, Marsico S, Panno ML, Cenni B, Picard D, et al. Estrogen Receptor α Mediates the Proliferative but not Cytotoxic Dose-Dependent Effects of Two Major Phytoestrogens on Human Breast Cancer Cells. Molecular Pharmacology 2001;60:595-602. [CrossRef]
- 26. Lee TJ, Kim OH, Kim YH, Kim S, Park JW, Kwon TK. Quercetin arrests G2/M phase and induces caspase-dependent cell death in U937 cells. Cancer Lett 2006;240:234-42. [CrossRef]
- Ong CS, Tran E, Nguyen TT, Ong CK, Lee SK, Lee JJ, et al. Quercetin-induced Growth Inhibition and Cell Death in Nasopharyngeal Carcinoma Cells Associated with Increase in Bad and Hypohosphorylated Retinoblastoma Expression. Oncol Rep 2004;11:727-33.
- 28. Kaneuchi M, Sasaki M, Tanaka Y, Sakuragi N, Fijimoto S, Dahiya R. Quercetin Regulates Growth of Ishikawa Cells Through the Suppression of EGF and Cyclin D1. Int J Oncol 2003;22:159-64.
- Kou SM. Antiproliferative Potency of Structurally Distinct Dietary Flavonoids on Human Colon Cancer Cells. Cancer Lett 1996;110:41-8.
- Biroccio A, Leonetti C. Telomerase as a New Target for the Treatment of Hormone-Refractory Prostate Cancer. Endocr Relat Cancer 2004;11:407-21. [CrossRef]
- 31. Kudo M, Naito Z, Yokoyama M, Asano G. Effects of Quercetin and Sunphenon on Responses of Cancer Cells to Heat Shock Damage. Exp Mol Pathol 1999;66:66-75. [CrossRef]
- 32. Hu S, Liao SK, Pang JH, Chen MC, Chen CH, Hong HS. Screening of Inhibitors of Human Telomerase Reverse Transcriptase in a Cultured Malignant Melanoma Cell Lines. Br J Dermatol 2004;150:367-99. [CrossRef]
- 33. Brandt S, Heller H, Schuster KD, Grote J. The Tamoxifen Induces Suppression of Cell Viability and Apoptosis in the Human Hepa-

- toblastoma Cell Line HepG2 via Down-regulation of Telomerase Activity. Liver Int 2004;24:46-54. [CrossRef]
- Brandt S, Heller H, Schuster K-D, Grote J. The Tamoxifen-induced Suppression of Telomerase Activity in the Human Hepatoblastoma Cell Line HepG2: A Result of Post-Translationel Regulation. J Cancer Res Clin Oncol 2005;131:120-8. [CrossRef]
- 35. Nakayama Y, Sakamoto H, Satoh K, Yamamoto T. Tamoxifen and Gonadal Steroids Inhibit Colon Cancer Growth in Association
- with Inhibition of Thymidylate Synthase, Survivin and Telomerase Expression Through Estrogen Receptor Beta Mediated System. Cancer Lett 2000;161:63-71. [CrossRef]
- Caltagirone S, Ranelletti FO, Rinelli A, Maggiano N, Colasante A, Musiani P, et. al. Interaction with Type II Estrogen Binding Sites and Antiproliferative Activity of Tamoxifen and Quercetin in Human Non-Small-Cell Lung Cancer. Am J Respir Cell Mol Biol 1997;17:51-9.

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