

**Expression of tyrosine kinase receptors PDGFR $\alpha$ , PDGFR $\beta$ , VEGFR-2 and CD117 in canine mammary tumours**

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Abstract:	Canine mammary tumours (CMTs) are one of the most common malignancies in bitches. Platelet-derived growth factor receptors (PDGFR)-Alpha and Beta, vascular endothelial growth factor receptor-2 (VEGFR-2) and CD117 are tyrosine kinase receptors (TKRs) involved in several tumours and represent suitable targets for specific therapy with toceranib phosphate. The purpose of this study was to evaluate the expression of these receptors in the pathogenesis and progression of CMTs. PDGFR $\alpha$ , PDGFR $\beta$ , VEGFR-2 and CD117 were expressed in 46/83 (55.4%), 33/83 (39.8%), 46/83 (55.4%) and 32/83 (38.5%) of CMTs, respectively. Immunohistochemical results showed a statistically significant loss of PDGFR $\alpha$ and PDGFR $\beta$ expression in simple carcinomas compared to complex/mixed carcinomas. Protein expression by western blot revealed specific bands corresponding to PDGFR $\alpha$ and VEGFR-2 in 3/7 and in 1/7 cell

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	lines. Moreover in vitro treatment showed that toceranib phosphate weakly reduced cell proliferation in one canine mammary cell line. These data should be considered for possible therapeutical approaches with specific tyrosine kinase inhibithors (TKI) in this tumor.

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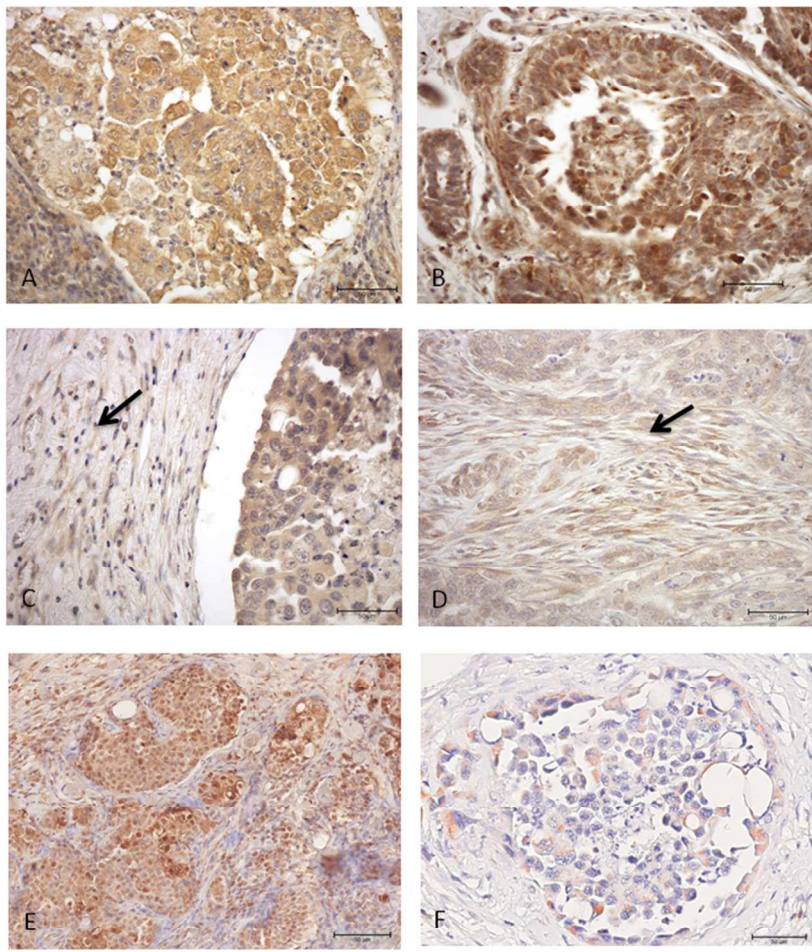


Figure 1  
immunohistochemistry  
190x275mm (96 x 96 DPI)

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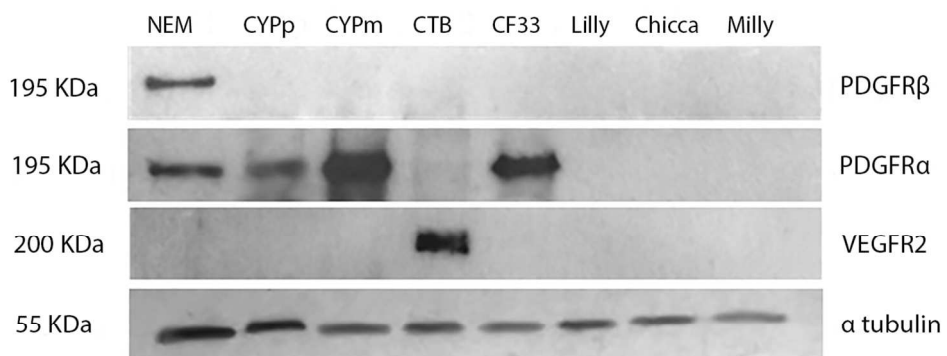


Figure 2  
Western blot  
119x52mm (300 x 300 DPI)

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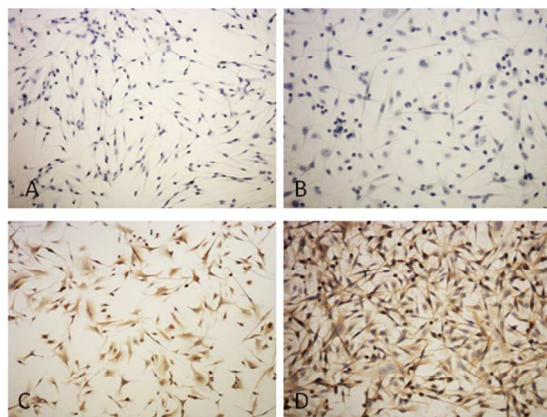


Figure 3  
immunocytochemistry  
254x190mm (96 x 96 DPI)

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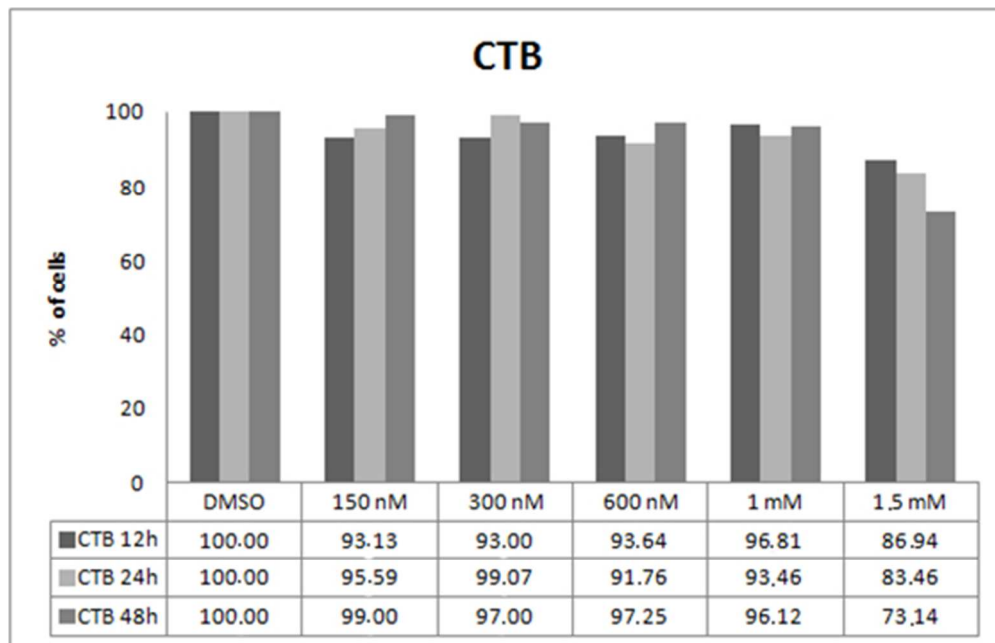


Figure 4A  
proliferating assay  
50x32mm (300 x 300 DPI)

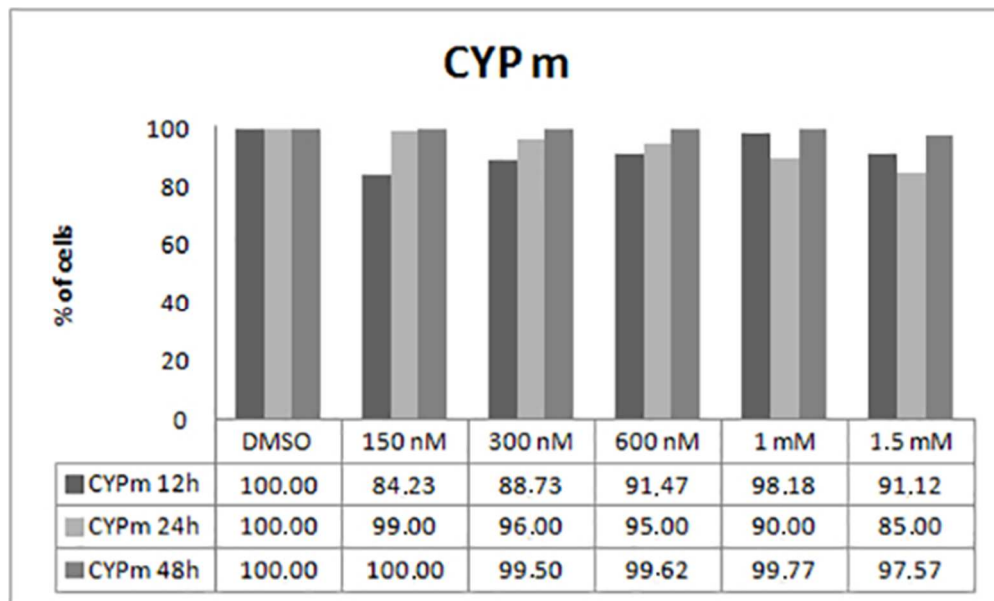


Figure 4B  
 proliferating assay  
 50x30mm (300 x 300 DPI)

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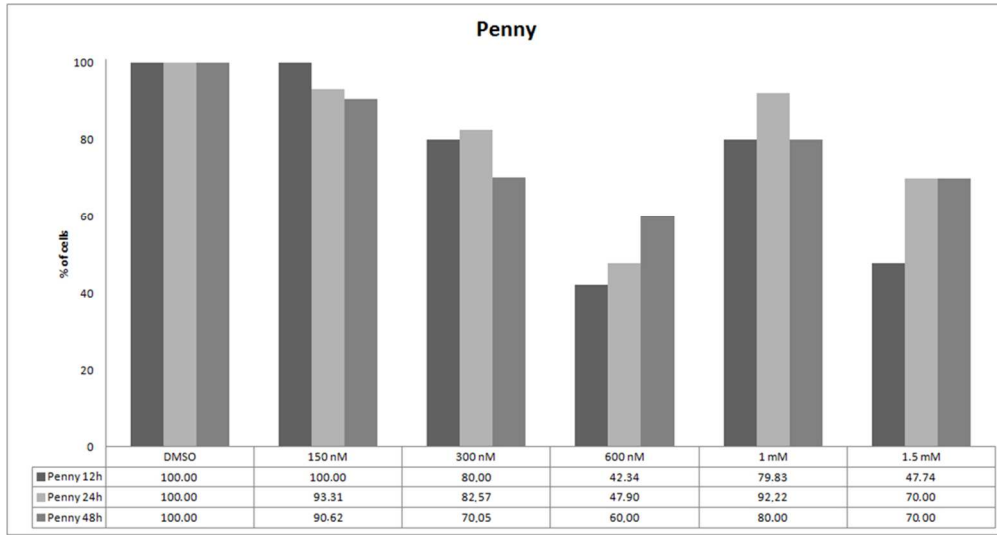


Figure 4C  
proliferating assay  
99x53mm (300 x 300 DPI)

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3 1 **Expression of tyrosine kinase receptors PDGFR $\alpha$ , PDGFR $\beta$ , VEGFR-2 and CD117 in canine**  
4 2 **mammary tumours**  
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7 4 Gattino F<sup>a\*</sup>, Maniscalco L<sup>a</sup>, Iussich S<sup>a</sup>, Biasato I<sup>a</sup>, Martano M<sup>a</sup>, Morello E<sup>a</sup>, Gola C<sup>a</sup>, Millan Y<sup>b</sup>,  
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9 5 Saeki K<sup>c</sup>, Buracco P<sup>a</sup>, De Las Mulas J<sup>b</sup> and De Maria R<sup>a</sup>  
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3 19 **Summary**

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5 20 Canine mammary tumours (CMTs) are one of the most common malignancies in bitches. Platelet-  
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7 21 derived growth factor receptors (PDGFR)-Alpha and Beta, vascular endothelial growth factor  
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9 22 receptor-2 (VEGFR-2) and CD117 are tyrosine kinase receptors (TKRs) involved in several  
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11 23 tumours and represent suitable targets for specific therapy with toceranib phosphate. The purpose of  
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13 24 this study was to evaluate the expression of these receptors in the pathogenesis and progression of  
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15 25 CMTs. PDGFR $\alpha$ , PDGFR $\beta$ , VEGFR-2 and CD117 were expressed in 46/83 (55.4%), 33/83  
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17 26 (39.8%), 46/83 (55.4%) and 32/83 (38.5%) of CMTs, respectively. Immunohistochemical results  
18  
19 27 showed a statistically significant loss of PDGFR $\alpha$  and PDGFR $\beta$  expression in simple carcinomas  
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21 28 compared to complex/mixed carcinomas. Protein expression by western blot revealed specific bands  
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23 29 corresponding to PDGFR $\alpha$  and VEGFR-2 in 3/7 and in 1/7 cell lines. Moreover in vitro treatment  
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25 30 showed that toceranib phosphate weakly reduced cell proliferation in one canine mammary cell line.  
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27 31 These data should be considered for possible therapeutical approaches with specific tyrosine kinase  
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29 32 inhibithors (TKI) in this tumor.  
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### 33 Introduction

34 Canine mammary tumours (CMTs) are one of the most common tumours that occur in bitches (Vail  
35 and others 2000, Camacho and others 2014). According to the literature, the percentage of the  
36 malignant form varies from 40% to 70%, and simple carcinoma represents the most common  
37 histotype, followed by mixed and complex tumours (Dobson and others 2002, Salas and others  
38 2015, Vascellari and others 2016). The epithelial component of CMTs has been recognised as a  
39 potential model for human breast cancer due to their similar histological and clinical features  
40 (Ranieri and others 2013, Liu and others 2014).

41 Platelet-derived growth factor receptors (PDGFR)-Alpha and Beta, vascular endothelial growth  
42 factor receptor-2 (VEGFR-2) and CD117 are tyrosine kinase receptors (TKRs) that are able to  
43 activate many of the major cellular signal transduction pathways (Lemmon MA and others 2010)  
44 and are involved in both physiological processes and tumoural diseases (Alvarez and others 2006,  
45 Demoulin and others 2014).

46 Numerous studies have demonstrated the over-expression or activation of PDGFRs, VEGFR-2 and  
47 CD117 in several canine tumours (Maniscalco and others 2013, Abou Asa and others 2015, Iussich  
48 and others 2016). To the author's knowledge, there are still no data regarding the expression of  
49 PDGFRs in CMTs, although VEGFR-2 is expressed in 58% of CMTs and is statistically associated  
50 with VEGF immunoreactivity in cancer cells (Millanta and others 2006, Santos and others 2014).

51 Further, CD117 is reported to be expressed in 70% of malignant CMTs, which suggests that it plays  
52 a role in inflammatory and high-grade canine mammary carcinomas (Brunetti and others 2014).

53 In human breast cancer, PDGFRs and CD117 are involved in cellular differentiation and invasion  
54 and in the tumoural microenvironment (Pinto and others 2014); thus, the potential use of targeted  
55 therapy has been suggested for this tumour (Zhu and others 2014). The use of TKR inhibitors  
56 (TKIs) in human and veterinary medicine depends on the receptor expression, activation and/or  
57 mutation, which are usually evaluated in tissues before treatment (Downing and others 2002,  
58 Amagai and others 2013). The TKRs evaluated in this study represent an attractive target for

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3 59 toceranib phosphate (Zoetis), which is a veterinary TKI that selectively inhibits VEGFR-2,  
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5 60 PDGFRs and CD117 and is currently used for the treatment of mast cell tumours and various other  
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7 61 neoplasms, including anal sac carcinomas, head and neck, thyroid carcinomas (London and others  
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9 62 2003 and 2012, Gardner and others 2015). The aims of the present study are to characterise the  
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11 63 expression of PDGFR $\alpha$ , PDGFR $\beta$ , VEGFR-2 and CD117 in spontaneous CMTs, to evaluate the in  
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13 64 vitro effect of toceranib phosphate on canine carcinoma mammary cell lines and to provide  
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15 65 information regarding TKRs as molecular targets in this tumour.  
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## 21 **Materials and Methods**

### 22 *Sample collection*

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25 69 Eighty-three spontaneous malignant CMTs, 16 benign CMTs, seven hyperplastic mammary glands,  
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27 70 and four normal mammary glands were retrieved from a retrospective study at the Hospital of the  
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29 71 Department of Veterinary Sciences of the University of Turin; the normal/hyperplastic glands were  
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31 72 obtained from healthy dogs during necropsy. Retrospective collection and analysis on CMTs  
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33 73 samples was approved by the Ethical Review Committee of the Department of Veterinary Science.  
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### 38 *Histological diagnosis*

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40 76 Samples were fixed in 10.0% buffered neutral formalin solution for at least 24 h, embedded in  
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42 77 paraffin wax blocks, cut into 4- $\mu$ m-thickslices and stained with haematoxylin and eosin (HE).  
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44 78 CMTs were histologically classified according to Goldschmidt and others (2011).  
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### 49 *Immunohistochemical analysis*

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51 81 Immunohistochemical (IHC) analysis was carried out on two sections of 4- $\mu$ m formalin-fixed  
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53 82 paraffin blocks. Primary antibodies (Table 1) were detected using the avidin-biotin peroxidase  
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55 83 complex technique with the Vectastain Elite ABC Kit (Vector Laboratories). Canine skin, prostatic  
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57 84 carcinoma, normal spleen and mast cell tumour were used as external positive controls for  
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3 85 PDGFR $\alpha$ , PDGFR $\beta$ , VEGFR-2 and CD117, respectively. For the negative controls, the previous  
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5 86 external positive controls were incubated with normal rabbit IgG (sc-2027, St. Cruz  
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7 87 Biotechnology). Immunolabelled slides were randomised and masked for blind examination, which  
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9 88 was independently performed by three observers (L.M., S.I., Y.M). When there was a disagreement  
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11 89 (<5% of the slides), a consensus among the three observers was reached using a multihead  
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13 90 microscope. Cytoplasmic immunolabelling of PDGFRs and VEGFR-2 was evaluated in neoplastic  
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15 91 and stromal cells (fibroconnective tissue within and surrounding the tumour) separately using the  
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17 92 scoring system adopted by Donnem and others 2008 and 2010.  
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20 93 CD117 immunoreactivity was evaluated applying the method adopted by Brunetti and others (2014)  
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22 94 as follows: score 0 (absence of positive cells), score 1 (1-19.0% of labelled cells), score 2 (20-  
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24 95 49.0% of labelled cells), and score 3 (>50.0% of labelled cells); samples with scores of 1, 2 or 3  
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26 96 were considered positive.  
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#### 32 98 *Canine mammary carcinoma (CMC) cell lines*

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34 99 Two canine primary (CYPp, CTB) and one metastatic (CYPm) mammary carcinoma cell lines were  
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36 100 provided by the University of Veterinary Medicine of Tokyo, and CF33 cell line was obtained by  
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38 101 the American Type Culture Collection (ATCC). All cell lines were cultured as previously reported  
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40 102 (Murai and others 2012).  
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#### 45 104 *Establishment of Chicca, Lilly, Milly and NEM cell lines*

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47 105 Tissue samples from three dogs with spontaneous grade III simple carcinomas that were surgically  
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49 106 treated (Chicca, Lilly, Milly) and from normal mammary tissue (NEM) were collected. After  
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51 107 manual disaggregation, tissue fragments from Chicca, Lilly and Milly were digested at 37 °C for  
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53 108 30-60 min in sterile phosphate buffered saline (PBS) containing 0.25 mg/mL collagenase type IA  
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55 109 (Sigma-Aldrich) and were then centrifuged and suspended in Dulbecco's modified Eagle medium.  
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58 110 For the "Lilly" cell line, 10  $\mu$ g/mL insulin (Sigma-Aldrich) was added. The NEM cell line was  
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3 111 established according to the method presented in the literature (Sánchez-Céspedes and others 2013),  
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5 112 and monodispersed cells were grown in Dulbecco's modified Eagle's Medium/Nutrient Mixture  
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7 113 F12 Ham (DMEM/F12; Sigma–Aldrich) supplemented with 5% foetal calf serum (FCS), 5000  
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9 114 IU/mL penicillin, 5 mg/mL streptomycin, 10 µg/mL insulin, 0.5 µg/mL hydrocortisone and 10  
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11 115 ng/mL cholera toxin. To confirm the epithelial cells of origin, monoclonal mouse anti-cytokeratin  
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13 116 (CK) 5 antibody (clone PCK103; isotype IgG<sub>1</sub>; Euro-Diagnostica; diluted 1:10) and polyclonal  
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15 117 rabbit anti-CK14 antibody (Covance Research; diluted 1:500) were used (data available from the  
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17 118 authors).  
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#### 22 120 *Western blot analysis*

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24 121 Western blot (WB) analysis was carried out on the protein lysate obtained from previous normal  
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26 122 and CMCs (canine mammary carcinoma) cell lines as previously described (Maniscalco and others  
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28 123 2015). After transferring into Hybond-C Extra membranes (American Biosciences), they were  
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30 124 incubated with primary antibodies (Table 1). The membranes were then incubated with a secondary  
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32 125 horseradish peroxidase (HRP)-linked antibody and subsequently with enhanced chemiluminescence  
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34 126 reagent (Super Signal West Pico Mouse IgG Detection Kit, Thermo Scientific).  
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#### 39 128 *Immunocytochemistry*

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41 129 CMCc cell lines were grown into wells of eight well chamber slides (Nalgene) at a confluence of  
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43 130 50%. After adhesion and medium removing, the cells were fixed in methanol for 10 minutes at  
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45 131 room temperature and washed three times in PBS (phosphate buffer solution) for a total of 15  
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47 132 minutes. After washing, the cells were incubated with primary antibodies (Table 1) according to the  
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49 133 previous procedure.  
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#### 54 135 *Proliferation assay after in vitro inhibition with toceranib phosphate*

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3 136 The CYPm and CTB cell lines overexpressing the highest level of PDGFRA and VEGFR-2 were  
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5 137 selected for an in vitro test. A canine osteosarcoma cell line (Penny), expressing high levels of  
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7 138 PDGFRs, was used as positive control (Maniscalco and others 2013). First, 10000 cells from each  
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10 139 cell line were seeded in 96-well plates, allowed to attach overnight and treated with different  
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12 140 concentrations of toceranib (150 nM, 300 nM, 600 nM, 1  $\mu$ M, 1.5  $\mu$ M) diluted in Dimethyl  
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14 141 sulfoxide for 12, 24 and 48 h. To measure cell proliferation and cytotoxicity, the Cell Counting Kit-  
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16 142 8 (Enzo Life Sciences), a colorimetric semi-quantitative assay kit, was used. The experiment was  
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18 143 performed in triplicate and repeated three times.  
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#### 22 145 *Statistical analysis*

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25 146 IHC results were grouped into contingency tables and analysed using Fisher's exact test or  
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27 147  $\chi^2$  test. Proliferating data were analysed using Student's t test. Data were analysed using MedCalc  
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29 148 Statistical Software version 13.3 (MedCalc Software bvba).  $P < 0.05$  was considered statistically  
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31 149 significant.  
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#### 35 36 151 **Results**

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38 152 According to the histological classification of Goldschmidt and others (2011), 50.6% of the cases  
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40 153 were classified as simple carcinoma, 30.1% as complex carcinoma and 19.3% as mixed carcinoma.  
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42 154 Among them, 28.9% (24/83) were grade I, 41.0% (34/83) were grade II and 30.1% (25/83) were  
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44 155 grade III. Immunohistochemical results revealed that none of the four normal mammary samples  
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46 156 expressed PDGFRs and only one hyperplastic mammary tissue sample expressed PDGFRs in both  
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48 157 stromal and epithelial cells; VEGFR-2 and CD117 positivity was present in 63.6% (7/11) and  
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50 158 18.18% (2/11) of normal and hyperplastic samples both in epithelial and stromal cells, respectively.  
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53 159 Benign tumours expressed PDGFR $\alpha$ , PDGFR $\beta$  and VEGFR-2 in 54.5%, 54.5% and 62.5% of the  
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55 160 epithelial compartment, respectively, and in 18.0%, 18.0% and 37.5% of the stromal compartment,  
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57 161 respectively. CD117 immunolabelling was negative in all benign tumours. Immunohistochemical  
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3 162 results regarding malignant CMTs are summarised in Tables 2 and 3, and immunohistochemistry  
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5 163 pictures are shown in Fig. 1. As shown in Table 2, we found that in malignant tumours, epithelial  
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7 164 cells showed significantly lower immunolabelling for PDGFR $\alpha$  and PDGFR $\beta$  ( $P < 0.05$ ) in simple  
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9 165 carcinomas (16/83 and 12/83) compared to complex and mixed tumours (30/83 and 21/83)  
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11 166 respectively.  
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13 167 Moreover, in the stromal compartment, PDGFR $\beta$  showed significantly lower immunolabelling in  
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15 168 simple carcinomas compared to complex and mixed carcinomas ( $P < 0.05$ ) (Table 3). In malignant  
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17 169 tumours, VEGFR-2 was expressed in 46/83 (55.4%) samples at the epithelial level, whereas in  
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19 170 stromal cells it was expressed in 18/83 (21.7%) samples. No statistically significant correlation was  
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21 171 found between VEGFR-2 and histological grade. CD117 was negative in 61.4% of the cases. The  
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23 172 positive samples were distributed as follows: 28.9% (score 1), 6.1%, (score 2) and 3.6% (score 3);  
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25 173 no statistically significant correlation was found among CD117 and histological grade. Protein  
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27 174 expression analysis revealed that the CF33, CYPp and CYPm cell lines expressed PDGFR $\alpha$  and that  
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29 175 the CTB cell line expressed VEGFR-2, whereas none of the established cell lines expressed  
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31 176 PDGFR $\beta$  or CD117 (Fig. 2). These data were confirmed by immunocytochemistry performed on  
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33 177 CMCc cell lines (Fig. 3). In the in vitro test toceranib phosphate was able to slightly inhibit cell  
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35 178 proliferation in the CTB cell line at 600 nM ( $P = 0.04$ ) after 24 h and at 1.5 mM after 24 and 48 h of  
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37 179 treatment (Fig. 4A). In the CYPm cell line, inhibition was found only at 1.5 mM after 48 h (Fig.  
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39 180 4B). As shown in Fig. 4C, the Penny cell line, which was used as a control, responded to toceranib  
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41 181 phosphate in a range of 150-600 nM corresponding to the IC<sub>50</sub> at 12, 24 and 48 h (Liao et al.,  
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43 182 2002).  
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## 52 184 **Discussion**

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54 185 CMTs are one of the most common neoplasias in dogs. Many recent efforts have been made to  
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56 186 increase the knowledge of the pathogenesis of CMTs and to identify new histological biomarkers  
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58 187 for prognosis and specific therapy. Toceranib phosphate is currently used to treat canine mast cell  
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3 188 tumours (London and others 2009, Amagai and others 2013, Patruno and others 2014, Gil da  
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5 189 Costa and others 2015), but only one study evaluated the efficacy of this drug in CMTs (London  
6  
7 190 and others 2003), where four of the five examined CMTs obtained a biological response to therapy  
8  
9 191 (two partial response and two stable disease); however, no data about TKRs expression in these  
10  
11 192 patients are available.

13 193 The present study evaluated the expression of PDGFR $\alpha$ , PDGFR $\beta$ , VEGFR-2 and CD117 in a large  
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15 194 cohort of CMTs to compare their expression to histological features and to identify suitable  
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17 195 biomarkers for specific therapy. Considering the importance of these TKRs in the  
18  
19 196 microenvironment of human breast cancer (Nakopoulou and others 2002, Gujam and others 2014,  
20  
21 197 Paulsson and others 2014, Pinto and others 2014, Dekker and others) their expression in epithelial  
22  
23 198 and stromal cells was evaluated separately. The results of this study demonstrated the tendency of  
24  
25 199 neoplastic cells to lose the expression of PDGFR $\alpha$  and PDGFR $\beta$  in simple carcinomas compared to  
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27 200 mixed/complex carcinomas. None of the normal mammary glands expressed PDGFRs, but 54.5%  
28  
29 201 of benign tumours were positive. On the basis of these results, it could be assumed that these  
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31 202 receptors play different roles in benign and malignant tumours; thus, their possible role in the  
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33 203 progression from the benign to malignant phenotype in CMTs needs to be investigated. In  
34  
35 204 particular, considering simple carcinomas, PDGFR $\alpha$  and  $\beta$  are not expressed at the epithelial level  
36  
37 205 in 26/42 and 30/42 (61.9% and 71.4%) of the cases, respectively. These results partially correspond  
38  
39 206 to human breast cancer, where PDGFR  $\beta$  is expressed exclusively in stromal cells in 35% of cases,  
40  
41 207 it represents a negative prognostic factor and is usually correlated with the triple negative phenotype  
42  
43 208 (Jechlinger and others 2006, Frings and others 2013, Plantamura and others 2014), whereas  
44  
45 209 PDGFR $\alpha$  is expressed in 39.2% of breast cancer cases in both epithelial and stromal cells  
46  
47 210 (Carvalho and others 2005). On the basis of the varying results obtained, it was hypothesized that  
48  
49 211 different hormonal responses and regulation in the two species should influence the expression of  
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51 212 PDGFRs in canine simple carcinoma but further investigations are needed (Peña and others 2014).  
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3 213 Similar to what is described in the veterinary literature, VEGFR-2 expression was slightly increased  
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5 214 in malignant forms, but no statistical correlation was found with histological grade ( $P>0.05$ ). Our  
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7 215 data are in contrast to those of Restucci and others (2004) and Diessler and others (2016), who  
8  
9 216 reported a correlation of VEGFR-2 with malignant forms and microvascular density. Nevertheless,  
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11 217 our data are similar to those obtained in humans, where the immunohistochemical expression of  
12  
13 218 VEGFR-2 ranged between 63.0% and 69.0% (Rydén and others 2005) and was generally related to  
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15 219 an aggressive phenotype and a poor prognosis (Johansson and others 2012). Finally, CD117  
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17 220 expression did not reveal a statistical association with tumour histotype; these data are not in  
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19 221 accordance with those of Brunetti and others (2014), who demonstrated a statistical association  
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21 222 between CD117 expression in malignant tumours with respect to benign tumours. However, our  
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23 223 data are in agreement with the human literature, where high-grade carcinomas do not express  
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25 224 CD117 (Tomasino and others 2009, Kondi-Pafiti and others 2010). Western blot analysis confirmed  
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27 225 the antibody specificity and showed that these receptors are poorly expressed in carcinoma cell  
28  
29 226 lines analyzed. Finally, the in vitro assay suggested that the response to drugs is strictly dependent  
30  
31 227 on the presence of specific TKRs on the cellular membrane surface. The results of the present study  
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33 228 show that PDGFR $\alpha$  and PDGFR $\beta$  tend to lose their expression in simple carcinomas and on the  
34  
35 229 basis of preliminary results we can assume that the biological effect of toceranib phosphate on  
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37 230 CMCs strictly depends on the cellular expression of specific TKRs. These data should be  
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39 231 considered before a specific medical treatment is initiated, although further clinical studies in this  
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41 232 direction are needed.  
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469 **Table 1**

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471 Sources, specificity and dilutions of the antibodies employed in immunohistochemistry (IHC) and  
472 Western Blot (WB).

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Antibody	Type	Source	Specificity <sup>a</sup>	IHC	WB
VEGFR-2	Rabbit polyclonal	Santa Cruz Biotechnology	m	1:150	1:1000
PDGFR $\alpha$	Rabbit polyclonal	Santa Cruz Biotechnology	h	1:100	1:1000
PDGFR $\beta$	Rabbit polyclonal	Santa Cruz Biotechnology	h, m, r	1:200	/
PDGFR $\beta$	Rabbit polyclonal	Cell Signaling Technology	h, m, r	/	1:1000
CD117	Rabbit polyclonal	DAKO	h	1:400	1:1000

474 <sup>a</sup>Human (h), mouse (m) and rat (r).

475



476 **Table 2**

477

478 Relationships between tumour characteristics and Tyrosine Kinase Receptors expressions in

479 neoplastic cells

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Clinicopathologic characteristics	PDGFR $\alpha$ positive	PDGFR $\alpha$ negative	<i>P</i> value	PDGFR $\beta$ positive	PDGFR $\beta$ negative	<i>P</i> value	VEGFR-2 positive	VEGFR-2 negative	<i>P</i> value	CD117 positive	CD117 negative	<i>P</i> value
	<i>n</i> (%)	<i>n</i> (%)		<i>n</i> (%)	<i>n</i> (%)		<i>n</i> (%)	<i>n</i> (%)		<i>n</i> (%)	<i>n</i> (%)	
Simple carcinomas	16/83 (9.6)	26/83 (24.1)	0.002	12/83 (14.4)	30/83 (36.2)	0.03	22/83 (26.5)	20/83 (24.1)	> 0.05	20/83 (24.1)	22/83 (26.5)	> 0.05
Complex and mixed carcinomas	30/83 (45.8)	11/83 (20.5)		21/83 (25.3)	20/83 (24.1)		24/83 (28.9)	17/83 (20.5)		12/83 (14.4)	29/83 (34.9)	
Total	46	37		33	50		46	37		32	51	
Grade I	11/83 (13.2)	13/83 (15.7)	> 0.05	11/83 (13.2)	13/83 (15.7)	> 0.05	14/83 (16.9)	10/83 (12.0)	> 0.05	10/83 (12.0)	14/83 (16.9)	> 0.05
Grade II	21/83 (25.3)	13/83 (15.7)		16/83 (19.3)	18/83 (21.7)		20/83 (24.1)	14/83 (16.9)		14/83 (16.9)	20/83 (24.1)	
Grade III	14/83 (16.9)	11/83 (13.2)		6/83 (7.2)	19/83 (22.9)		12/83 (14.4)	13/83 (15.7)		8/83 (9.6)	17/83 (20.5)	
Total	46	37		33	50		46	37		32	51	
Dimension <3cm	23/83 (27.8)	18/83 (21.7)	> 0.05	18/83 (21.7)	23/83 (27.8)	> 0.05	23/83 (27.8)	18/83 (21.5)	> 0.05	16/83 (19.3)	25/83 (30.1)	> 0.05
Dimension 3-5cm	14/83 (16.9)	11/83 (13.2)		8/83 (9.6)	17/83 (20.5)		15/83 (18.7)	10/83 (12.0)		10/83 (12.0)	15/83 (18.7)	
Dimension >5cm	9/83 (10.8)	8/83 (9.6)		7/83 (8.4)	10/83 (12.0)		8/83 (9.6)	9/83 (10.8)		6/83 (7.2)	11/83 (13.2)	
Total	46	37		33	50		46	37		32	51	

482 **Table 3**

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484 Relationships between tumour characteristics and Tyrosine Kinase Receptors expressions in stromal  
485 cells

486

	PDGFR $\alpha$		<i>P value</i>	PDGFR $\beta$		<i>P value</i>	VEGFR-2		<i>P value</i>
	positive	negative		positive	negative		positive	negative	
	<i>n (%)</i>	<i>n (%)</i>		<i>n (%)</i>	<i>n (%)</i>		<i>n (%)</i>	<i>n (%)</i>	
Simple carcinomas	8/83 (9.6)	34/83 (41.0)	> 0.05	5/83 (6.0)	37/83 (44.6)	0.01	9/83 (10.8)	33/83 (39.9)	> 0.05
Complex and mixed carcinomas	10/83 (12.0)	31/83 (37.4)		14/83 (16.9)	27/83 (32.5)		9/83 (10.8)	32/83 (38.5)	
Total	18	65		19	64		18	65	
Grade I	4/83 (4.8)	20/83 (24.1)	> 0.05	5/83 (6.0)	19/83 (22.9)	> 0.05	8/83 (9.6)	16/83 (19.3)	> 0.05
Grade II	7/83 (8.4)	27/83 (32.6)		11/83 (13.2)	23/83 (27.8)		4/83 (4.8)	30/83 (36.2)	
Grade III	7/83 (8.4)	18/83 (21.7)		3/83 (3.6)	22/83 (26.5)		6/83 (7.2)	19/83 (22.9)	
Total	18	65		19	64		18	65	
Dimension <3cm	7/83 (8.4)	34/83 (41.0)	> 0.05	11/83 (13.2)	30/83 (36.2)	> 0.05	10/83 (12.0)	31/83 (37.4)	> 0.05
Dimension 3-5cm	8/83 (9.6)	17/83 (20.5)		6/83 (7.2)	19/83 (22.9)		3/83 (3.6)	22/83 (26.5)	
Dimension >5cm	3/83 (3.6)	14/83 (16.9)		2/83 (2.2)	15/83 (18.7)		5/83 (6.0)	12/83 (14.4)	
Total	18	65		19	64		18	65	

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3 488 **Figure legends**  
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6 490 Fig. 1. Simple carcinomas. Picture A and B showed a strong cytoplasmic immunolabelling in the  
7  
8 491 neoplastic cells for platelet-derived growth factor receptors (PDGFR)- $\alpha$  and  $\beta$ , respectively. Pictures  
9  
10 492 C and D showed intermediate immunolabelling in the stromal cells for PDGFR $\alpha$  and  $\beta$ ,  
11  
12 493 respectively. Picture E showed a strong cytoplasmic immunolabelling in the neoplastic cells for  
13  
14 494 vascular endothelial growth factor receptor-2 (VEGFR-2) (E) and an intermediate cytoplasmic  
15  
16 495 immunolabelling for CD117 (picture F). Streptavidin-biotin-peroxidase method. Mayer's  
17  
18 496 haematoxylin counterstain. Scale bar 50  $\mu$ M.  
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22 497  
23  
24 498 Fig. 2. Western Blot analysis of Platelet-derived growth factor receptors (PDGFR)- $\alpha$  and  $\beta$  and  
25  
26 499 Vascular endothelial growth factor receptor-2 expression in normal epithelial mammary cell lines  
27  
28 500 NEM (lane1), and neoplastic cell lines CYPp (lane 2), CYPm (lane 3), CTB (lane 4), CF33 (lane 5),  
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30 501 Lilly (lane 6), Chicca (lane 7), Milly (lane 8) cell lines. Specific molecular weight of protein are  
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32 502 indicated as Kilodalton (KDa). Alpha Tubulin expression was used as the loading control.  
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35 503  
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37 504 Fig. 3: Immunocitochemistry against CD117, PDGFR $\alpha$ , PDGFR $\beta$  and VEGFR2 on canine  
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39 505 mammary carcinoma cell lines. (A) CTB cells stained with CD117 antibody ( 20X magnification),  
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41 506 (B) CypM cells stained with PDGFR  $\beta$  antibody ( 20X magnification), (C) CypP cells stained with  
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43 507 PDGFR  $\alpha$  antibody (20X magnification), (D) CTB cells stained with VEGFR2 antibody (20X  
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45 508 magnification)  
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51 510 Fig. 4. Evaluation of in vitro response to toceranib phosphate for CTB (Fig. 4A), CYPm (Fig. 4B)  
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53 511 and Penny (Fig. 4C) cell lines at different time (12 h, 24 h, 48 h) and concentration (150 nM, 300  
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55 512 nM, 600 nM, 1  $\mu$ M, 1,5  $\mu$ M).  
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