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The Anti-cancer Actions of Vitamin D

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Abstract: Vitamin D_3 is biologically inert. To become active, it requires two successive hydroxylation steps catalyzed by two cytochrome P450 enzymes, first to synthesize the pro-hormone 25-hydroxyvitamin D_3 [25(OH) D_3] and then the active hormone 1 α ,25-dihydroxyvitamin D_3 [1 α ,25(OH)₂ D_3]. 1 α ,25(OH)₂ D_3 has high affinity for the vitamin D receptor (VDR), a transcription factor and a member of the steroid receptor superfamily. Through VDR, 1 α ,25(OH)₂ D_3 regulates more than 200 genes in mammals, including those involved in the calcium and phosphorus homeostasis, immune function, reproduction, cardiovascular, central nerve system, inflammation, angiogenesis, and cellular proliferation, differentiation and apoptosis. Due to its versatile roles in maintaining and regulating normal cellular phenotypes and functions, 1 α ,25(OH)₂ D_3 has been implicated as an anti-cancer agent. In fact, ecological and epidemiologic data have linked vitamin D deficiency with the incidence and mortality of many types of cancer. More importantly, *in vitro* and *in vivo* animal model studies have clearly demonstrated the anti-tumor effects of vitamin D. In this review, we describe the anti-cancer actions of vitamin D, with special emphasis on different pathways underlying the VDR-mediated genomic as well as less-defined non-genomic actions of vitamin D.

Keywords: Cancer, Vitamin D, Cell cycle, Hedgehog, Growth factors, Apoptosis, Angiogenesis, Differentiation, Kinases, Transcription factors, Metastasis.

1. INTRODUCTION

Vitamin D was discovered because of its ability to cure the childhood bone disease, rickets. Up until 1960's, vitamin D, either vitamin D_2 or vitamin D_3 , was believed to be the active principle responsible for all the known vitamin D actions known during that period. Professor Hector F. DeLuca and his associates first challenged this concept and demonstrated that radioactive vitamin D₃ injected into vitamin D deficient rats was metabolized to more polar compounds, and one of them was shown to be more potent than the parent compound vitamin D_3 in stimulating intestinal calcium transport and mobilization of calcium from bone, implicating that vitamin D_3 might be further metabolized before becoming active [1-2]. Subsequently, the unknown compound was purified and identified as 25-hydroxyvitamin D₃ [25(OH)D₃] in 1968 [3]. Later, when radioactive 25(OH)D₃ was synthesized and injected into rats, several more polar metabolites were found and isolated. One of them was shown to act even faster and to a greater extent than 25(OH)D₃. The compound was then identified in 1971 as 1α ,25-dihydroxyvitamin D₃ [1α ,25(OH)₂D₃] [4-6].

Vitamin D is rare in food. The primary source of vitamin D for most humans is the exposure to sunlight, accounting for about 90% of vitamin D requirement [7]. However, due to the concern of UVinduced skin cancers, we increasingly depend on vitamin D supplementation to meet our vitamin D requirement, including vitamin D pills and vitamin D-fortified food and drink. In spite of many forms of vitamin D in nature with the same secosteroid ring structure but with different side chains, vitamin D₂ and vitamin D₃ are the two major types. Vitamin D₂ is synthesized from ergosterol found in plants and phytoplankton, whereas vitamin D₃ is produced from 7-dehydrocholesterol (7-DHC) in humans and some zooplankton species. When human skin is exposed to UV irradiation (wavelength 290-315 nm), 7-DHC, stored in the basal and suprabasal layers of skin, is photolyzed to form previtamin D₃, which is then thermoisomerized to vitamin D₃ [7]. Either endogenously produced vitamin D_3 or ingested vitamin D_2 or vitamin D_3 is then entering the blood circulation and bound to vitamin D binding protein (DBP). After vitamin D-DBP complex reaches liver, vitamin D is hydroxylated at carbon-25 mainly by CYP2R1 to form 25(OH)D [8-9]. Serum 25(OH)D, an index of vitamin D status in humans, has the highest affinity for DBP among all vitamin D related compounds [10-11]. 25(OH)D-DBP complex is then delivered to the kidneys to be hydroxylated at carbon-1 by CYP27B1 to form 1α ,25(OH)₂D, the biologically active form of vitamin D. Both 25(OH)D and 1a.25(OH)₂D can be hydroxylated by CYP24A1 at caron-24 in the kidneys to form their corresponding 24-hydroxylated metabolites. Hydroxylation at carbon-24 of the 1α ,25(OH)₂D molecule by CYP24A1 is the first step of catabolic process of the active hormone [12] and is responsible for terminating its cellular actions. In addition, when there is an excess of 25(OH)D, the renal CYP24A1 can convert it to $24,25(OH)_2D$ to prevent the over-production of $1\alpha,25(OH)_2D$ [12]. However, it is now established that CYP27B1 and CYP24A1 are expressed in many other tissues and cell types in addition to the kidneys [12-13], that clearly suggests that the production and degradation of 1a,25(OH)₂D can take place in an autocrine/ paracrine fashion. Given that no detectable ${}^{3}H-1\alpha,25(OH)_{2}D_{3}$ was found in the circulation of anephric animals after the injection of ³H-25(OH)D₃ [14-15], and very low concentrations of circulating 1α ,25(OH)₂D₃ were detected in some but not all anephric patients [16-18], it is believed that any 1α , 25(OH)₂D₃ generated in the extrarenal tissues acts and is degraded locally with very little (or under the detection limit) leaking into the circulation. Recently, Wagner et al. [19] determined 1α ,25(OH)₂D concentration in 30 human colon tissues and concluded that the 1a,25(OH)₂D detected was mainly synthesized within the tissue. Although it is widely believed that higher serum concentrations of 25(OH)D would lead to higher tissue concentrations of 25(OH)D and would produce more 1a,25(OH)₂D by CYP27B1, Wagner et al. however did not find a significant correlation between the colon 1a,25(OH)₂D levels and 25(OH)D concentrations from the matched serum samples. The results support the previous observation that this autocrine/ paracrine pathway is likely regulated in a tissue-specific manner, depending on the relative expression of CYP24A1 to CYP27B1 [12].

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The first evidence indicating that 1α ,25(OH)₂D₃ might have actions other than regulating calcium and phosphate homeostasis was obtained by an autoradiographic study [20]. In this study, ³Hlebeled 1α ,25(OH)₂D₃ was injected into vitamin D-deficient rats and was found localized in the nuclei of the cells in epidermis, stomach, pituitary and parathyroid in addition to the small intestine, renal tubules and glomeruli. The data therefore suggest that the target cells for 1α ,25(OH)₂D₃ could include those not known to be involved in calcium and bone metabolism [21].

2. VITAMIN D RECEPTOR (VDR)

2.1. Discovery of VDR

Following the identification of $1\alpha_2(OH)_2D_3$ as the active metabolite of vitamin D₃ in 1971 [4-6], ³H-labeled 1a,25(OH)₂D₃ became available and was used to study the subcellular localization of this active hormone in rat [22] and chick small intestine [23]. Both studies found that the radioactive 1α , 25(OH)₂D₃ was mostly localized in or associated with the nuclear fraction. Later, the specific binding of ${}^{3}\text{H}-1\alpha,25(\text{OH})_{2}\text{D}_{3}$ to nuclear components was demonstrated in chick intestine [24] and in chick parathyroid gland [25]. Using two VDR-specific monoclonal antibodies, McDonnell et al. were able to recover the cDNA for VDR from a chicken intestinal lambda gt11 cDNA expression library [26]. cDNA for rat VDR was soon cloned from a rat kidney lambda gt11 expression library [27], followed by the cloning of human VDR cDNA from the human intestine and T47D cell cDNA library by Baker et al. [28], who also demonstrated that transfection of the cloned cDNA into COS-1 cells resulted in the synthesis of a single peptide species indistinguishable from the native VDR. Further structural analysis revealed that the human cDNA has 4,605 nucleotides including a noncoding leader sequence of 115 bases, a 1,281-bases open reading frame and 3,209 bases of 3' noncoding sequence. The cDNA codes for a single mRNA species of about 4,600 nucleotides and a peptide of 427 amino acids [29]. When the VDR cDNA sequence and the translated peptide were compared with those from thyroid hormone receptor, estrogen receptor and androgen receptor, similar characteristic features were found among all four receptors, and therefore they are members of the steroid hormone receptor supergene family. These receptors are ligand-dependent transcription factors. The VDR gene is located on chromosome 12q13 with a promoter sequence proceeding the coding region [29].

2.2. The Structure and Actions of VDR

Human VDR consists of 427 amino acids with a molecular weight of 52 kDa. The molecule has four major functional domains, including the highly variable N-terminal A/B domain, highly conserved zinc finger-containing DNA-binding domain (DBD) or C domain, the hinge domain (D domain), and the ligand-binding domain (LBD) or E domain. The A/B domain is known to be involved in VDR transactivation. The LBD has a characteristic secondary domain structure which is common for all nuclear receptors. The crystal structure of human VDR Δ LBD (Δ means lacking D hindge domain) shows that it has canonical shape with 13 α -helices sandwiched in three layers and a three-stranded β sheet [30]. The ligand-binding pocket is rather large (697 $Å^3$) with 1a,25(OH)₂D₃ occupying only 56% of this volume [30]. The LBD is multifunctional and facilitate ligand binding, nuclear localization, dimerization and interaction with coactivator and co-repressor proteins. Upon binding to its ligand, such as 1a,25(OH)₂D₃, VDR is stabilized as a result of phosphorylation at serine 51 and serine 208 [31-34].

2.3. Genomic Actions of Vitamin D

All the genomic actions of 1α ,25(OH)₂D are mediated through its binding to VDR [33]. Although nuclear receptors can function as monomers, homodimers or heterodimers in complex with RXR, VDR functions as an obligate heterodimer with RXR and recognizes specific DNA elements known as vitamin D response elements (VDREs) [34] located in the promoter region of vitamin D responsive genes to exert its genomic actions. Furthermore, the VDR-mediated gene expression is modulated by a multiple of coactivators and co-repressors [29]. As 1α ,25(OH)₂D binds to VDR, phosphorylation occurs, carried out by protein kinase C and casein kinase II over serine 51 located in the DNA-binding domain and serine 208 located in the hinge region [31-32], and leads to subsequent conformational change of VDR, which, in turn, results in the release of co-repressors, including NCOR1 and NCoR2/SMRT and recruitment of co-activators, such as HAT and steroid receptor-coactivator 1 (SRC1) [35-37], to remodel chromatin and initiate gene transcription in a ligand-dependent manner [38].

A spectrum of naturally occurring VDRE sequences has been identified [39]. The most commonly found VDREs are direct repeat of two hexanucleotide half sites with a three nucleotides (DR3) spacer in between. Less common are everted repeats of two halfsites with a spacer of six nucleotides (ER6) motif. In the direct DR3 VDREs, VDR has been found to occupy the 3' half-site, whereas RXR resides on the 5' half-site [40]. The highest affinity 3' halfsite for VDR is PGTTCA, where P is a purine base, and the highest affinity 5' half-site for RXR is PGGTCA. The multiple sequences found in natural VDREs may offer a tissue-specific preferential binding to exert differential actions in different tissues. Although most VDR-regulated genes have a single copy of VDRE in their proximal promoter region, some genes do have more than one copy. For example, CYP24A1 promoter has at least two copies. Genes with multiple VDREs require all VDR/RXR docking sites for maximal induction by 1α , 25(OH)₂D₃ and individual VDREs appear to function synergistically in recruiting coactivators and basal regulators for transactivation [40]. A model proposing that VDREs may juxtapositioned via DNA looping in chromatin to create a single platform and support the transcription machinery has been advanced to explain the synergistic effect in the presence of multiple VDREs [41].

Recently, a hydrogen-deuterium exchange (HDX) technique has been employed to study the dynamics of the human RXRa/VDR heterodimerization and the influence of the VDR interaction with DNA (VDRE), and the coactivators, such as receptor-interacting domain of human SRC1 in an effort to understand the molecular mechanism of the VDR/RXR complexinduced transactivation [42]. In the absence of the crystal structure of the RXRa/VDR heterodimer, the authors created a model for it by docking the VDR LBD into the known PPARy/RXRa crystal structure. The docking was accomplished by using superimposition with Coot [43] and minimization with Chimera [44] and then remodel the DBD structure on the VDRE using the structure of the RXR-VDR DBD on the VDRE direct repeat with three intervening nucleotides DR3 [45]. Furthermore, the potential effect of different VDRE nucleotide sequences on the dynamics of RXRa/VDR heterodimer was studied. Briefly, the authors were able to demonstrate that (a) in the absence of either ligand for these two receptors, heterodimerization of VDR with RXRa increased the stability of the region responsible for a high affinity interaction between the two subunits of the heterodimer. (b) Upon binding of 1α ,25(OH)₂D₃ to the heterodimer, a 1α ,25(OH)₂D₃-dependent allosteric communication between co-receptors was observed, which favors co-receptor interaction to stabilize the heterodimer. (c) Similar enhanced allosteric modulation of the co-receptor interaction occurred when RXRa was bound to its ligand 9-cisretinoic acid. However, the binding of 9-cis-retinoic acid to its receptor induced a subtle but statistically significant increase in HDX within the VDR DBD, suggesting a destabilization of the DBD of VDR. (d) Binding of RXRa/VDR to DNA response elements differentially altered the conformational dynamics and stability of AF-2 of both co-receptors, depending on the specific

sequence of the response elements. This suggests that DNA binding could directly influence coactivator recognition and binding. (e) The RXRa/VDR heterodimer was activated in a synergistic manner in the presence of both 9-cis-retinoic acid and 1a,25(OH)₂D₃ by a concerted interaction between both co-receptors and one molecule of SRC1. In summary, the HDX data indicate that there is extensive allosteric communication throughout the heterodimer, leading to dynamic changes in the stability of the DBD of VDR. The results suggest that the ligand itself may alter the DNA-binding properties of this nuclear receptor heterodimer, and further imply that different classes of ligands may differentially affect the DBD stability and thus provide unique pharmacological profiles in terms of target gene activities. This study also renders direct structural evidence for DNA (VDRE)-dependent allosteric communication between the DBD and LBD of an intact nuclear receptor (e.g., VDR), as well as between two heterodimer partners.

It is now well-established that VDR regulates at least 229 genes through binding to at least 2,776 genomic DNA binding sites [46]. The genes include those involved in anti-proliferation, pro-differentiation, anti-inflammation, pro-apoptosis, immune regulation and many other functions in a tissue- and cell-specific manner [47-53].

3. VDR-DEPENDENT ANTI-CANCER ACTIONS

Several approaches have been used to demonstrate that VDR is required for the antiproliferative effect of 1α ,25(OH)₂D₃ in cancer cells. Using JCA-1 prostate carcinoma cells stably transfected with cDNA that encodes VDR to increase its concentration, Miller and colleagues [54] were able to demonstrate that the degrees of 1α ,25(OH)₂D₃-induced antiproliferative action and CYP24A1 upregulation were proportional to VDR concentrations within the transfected cells. Conversely, stable transfection of antisense VDR cDNA to ALVA-31 prostate cancer cells to knockdown VDR attenuated the ability of 1α ,25(OH)₂D to inhibit cell growth and induce CYP24A1 expression [54]. Using a different approach, Zinser *et al.* [55] studied cancer cells derived from VDR knock-out animals and showed that the cells were completely resistant to 1α ,25(OH)₂D₃-mediated growth arrest and apoptosis over the range of 0.01-100 nM 1α ,25(OH)₂D₃. Overall, these studies demonstrate that the 1α ,25(OH)₂D-dependent induction of cell cycle arrest, CYP24A1 up-regulation, and apoptosis in cancer cells are dependent on VDR.

3.1. Antiproliferative Effects of Vitamin D

A central part of the antiproliferative effects of vitamin D lies in its ability to interrupt cell cycle progression (Fig. 1). Cell cycle progression through four phases (G₁, S, G₂ and M) is regulated by multiple molecular pathways and checkpoints, including the expression of one family of evolutionarily conserved proteins, called cyclin-dependent kinases (CDKs), and their inhibitors (CKIs) in a coordinated fashion [56]. CDKs are serine/threonine-specific kinases that consist of a catalytic subunit (CDK) and a regulatory subunit (the cyclin). There are five CDKs-CDK1, CDK2, CDK3, CDK4 and CDK6, and several cyclins, which are directly involved in driving the cells through G_1 into S phase cycle [57]. The primary substrates of CDKs in G1 progression are the members of the retinoblastoma protein family (pRb). These proteins function as "docking" sites for a series of proteins that are tightly regulated through the cell cycle progression [58]. For example, pRb proteins bind to the E2F family of transcription factors to ensure that they remain inactive during M and G₀ phases. The activity of the pRb proteins is modulated by sequential phosphorylation by CDK4/6cyclin-D and CDK2-cyclin-E complexes that allow the release of molecules (e.g., E2Fs) which are bound to hypophosphorylated pRB isoforms.

Once they are released, these molecules will be able to carry out their specific tasks (e.g. as transcription factors) in cell cycle progression. Most adult mammalian cells are quiescent remaining in G_0 phase and do not express many cell cycle genes. Therefore, the first step to re-entry into the cell cycle is to activate the transcriptional and translational machinery essential for the specific expression of cell cycle genes following a mitogenic signal. This

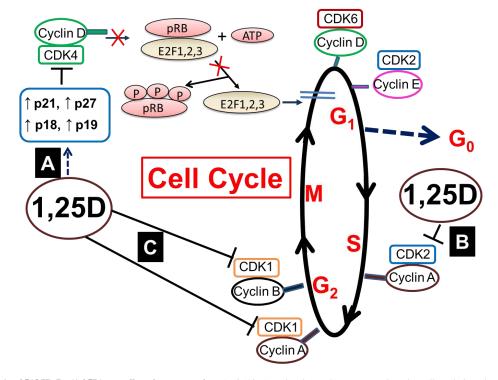


Fig. (1). Effects of 1α , 25(OH)₂D₃ (1,25D) on cell cycle progression. 1α ,25(OH)₂D₃ has been shown to regulate the cell cycle in eukaryotic cells at 3 different check points: (A) inducing the expression of CDKIs, including p21, p27, p18 and p19, which in turn block Cdk4 activation and arrest cells in G1 phase, (B) inhibiting CdK2 activity and leading to arrest in the S phase, and (C) down-regulating CDK1 leading to the arrest in the G2 phase.

machinery is active during early cell divisions in the embryo in order to generate new cells, but a repression mechanism, which is generally represented by the pRb, becomes crucial for those cells that are terminally differentiated during organogenesis. One of those genes which are turned on is D-type cyclins. The activation of cyclin D expression leads to direct phosphorylation of pRb which binds E2F transcription factors. In mid to late G1 phase, CDKs phosphorylate pRb, and the hyperphosphorylated pRb displaces the E2F transcriptional factors which in turn induces the expression of S phase genes required for DNA replication [56]. The activity of CDKs required for G₁/S transition is regulated by endogenous CDK inhibitors, including tumor repressors such as p21 and p27. In other words, p21 and p27 could interfere with cell cycle progression by triggering G₁ cell cycle arrest and withdrawal from the cell cycle. It is known that many of the genes involved in cell cycle progression are frequently mutated in human cancers leading to aberrant CDK activity and thereby uncontrolled cell division and tumor growth.

3.1.1. Cell Cycle Arrest

The cyclin-dependent kinase inhibitor p21^{waf1/cip1} was first suggested as a VDR target gene in the human promyelocytic HL-60 leukemia cells by Jiang *et al.* [59]. Later, multiple VDREs were identified within the $p21^{waf1/cip1}$ promoter at -770 in relation to the transcriptional start site in the human myelomonocytic cell line U937 [60] and in MCF7 human breast cancer cells [61]. Induction of p21^{waf1/cip1} mRNA occurred within 2 h of 1α , 25(OH)₂D₃ addition and is a direct effect of liganded VDR. The expression of other CDK inhibitors, such as p27^{kip1} and the Ink4 family member p15, p16, and p18, were also found to be induced by the ligand [60]. In pancreatic cancer cells, 1α , $25(OH)_2D_3$ inhibited their proliferation through cell cycle arrest at the G_0/G_1 phase [62], which in turn is mediated through the up-regulation of p21^{waf1/cip1} and p27^{kip1}, followed by the down-regulation of cyclins, CDKs and CDKI [63]. Interestingly, data from studies using LNCaP prostate cancer cells and HepG2 liver cancer cells indicate that the up-regulation of $p27^{kip1}$ proteins induced by $1\alpha, 25(OH)_2D_3$ or its analogs may not involve new p27kip1 mRNA synthesis [64-66]. Along this line, Flores *et al.* [67] infected LNCaP cells with a retrovirus containing a sh-p27 or sh-Luc (served as control) and found that while p27^{kip1} was depleted by 74% in sh-p27kip1 infected cells, compared to the cells infected with sh-Luc, the knockdown of p27kip1had no effect on $1\alpha_2(OH)_2D_3$ -induced cell growth inhibition. Thus, it was concluded that p27kip1 up-regulation in LNCaP prostate cancer cells was not essential for 1a,25(OH)2D3-mediated growth inhibition, and the up-regulation of p27kip1 protein expression is likely the consequence rather than the cause of 1α , 25(OH)₂D₃-induced growth inhibition. Thus, further investigation into the exact role p27^{kip1} plays in 1a,25(OH)₂D₃-meidated cell cycle arrest in other cell lines is warranted.

In addition to the direct effects of $1\alpha,25(OH)_2D_3$ on $p21^{waf1/cip1}$ and other cell cycle-related genes [68], the hormone may act indirectly through other mechanisms on these genes. For example, $1\alpha,25(OH)_2D_3$ has been shown to inhibit the Hedgehog (Hh)signaling pathway [69-71], up-regulate the insulin-like growth factor binding protein-3 (IGFBP3) and transforming growth factor- β (TGF- β) signaling pathways and down-regulate the EGFR signaling cascade [72-74]. In prostate cells, it has been proposed that the modulation of prostaglandin concentration by $1\alpha,25(OH)_2D_3$ may be one mechanism responsible for the growth inhibitory action of $1\alpha,25(OH)_2D_3$ [75].

3.1.2. Hedgehog Signaling Pathway

The hedgehog (Hh) gene was initially identified in fruit fly Drosophila [76] and subsequently three homologs, Sonic Hedgehog (Shh), Indian Hedgehog (Ihh), and Desert Hedgehog (Dhh), were identified in vertebrates [77-81]. In humans, the genes were found to be an essential developmental signaling pathway in maintaining tissue polarity and stem cell population [82]. Inactivation or hyperactivation of this pathway can cause serious health problems, including developmental defects such as holoprosencephaly [83], and different forms of cancer including basal cell carcinomas (BCCs), medulloblastomas, leukemia, gastrointestinal, prostate, ovarian, breast and lung cancers [82, 84]. The receptor for Hhs is a transmembrane protein called Patched (PTC). In the absence of Hh ligands, PTC is bound to another transmembrane protein, smoothened (SMO), and functions as an inhibitor of SMO (Fig. 2). The binding of Hh ligands to PTC releases SMO from the inhibitory effect of PTC and allows SMO to transduce signals leading to the activation of transcription factor, called glioma associated (Gli), and the expression of genes involved in regulating embryonic and postnatal development, and the transformation of cancer- and metastasis-initiating cells [85]. Recent studies indicate a cross-talk between vitamin D₃ and Hh signaling mediated by at least two mechanisms. First, PTC has been shown to stimulate the secretion of a vitamin D₃-related compound, which is likely responsible for the inhibitory action of PTC on SMO [86]. Second, 1α ,25(OH)₂D₃ can down regulate the expression of some members of the Hh pathway genes, including PTC, SMO and Gli in an epidermal explants culture system, suggesting a direct regulation by $1\alpha_2 25(OH)_2 D_3$ [70]. These results are in agreement with the increased expression of Shh in the keratinocytes of the VDR-null animal and hyperactivation of the Hh pathway, predisposing the skin to the development of both malignant and benign epidermal neoplasms [70]. More interestingly, Uhmann et al. [69] demonstrated that 1α ,25(OH)₂D₃ was capable of inhibiting Hh signaling at the level of SMO in the absence of VDR. Similar conclusion was obtained by Tang et al. [71] who studied murine basal cell carcinomas (BCC) in vitro and in vivo, and found that the effect of 1a,25(OH)₂D₃ on Gli expression is likely independent of VDR. The results provide strong evidence of the non-genomic action of 1a,25(OH)₂D₃ on cell growth and differentiation mediated by Hh/Gli signaling pathway.

3.1.3. Insulin-Like Growth Factor-Binding Protein 3 (IGFBP-3) Pathway

Several types of IGFBP have been identified as modulators of insulin-like growth factor (IGF) actions as well as other cellular functions unrelated to their ability to bind IGFs. Among the binding proteins, IGFBP-3 has generated more attention. The association between IGFBP-3 and vitamin D was first reported in 1992 in a study describing the 1a,25(OH)₂D₃-dependent IGFBP-3 secretion in cultured human osteosarcoma cells [87]. Later, it was shown that the effect was a consequence of increased IGFBP-3 mRNA expression [88] and was accompanied by growth arrest and the induction of differentiation in human osteosarcoma cell line [88], MCF-7 and Hs578T human breast cancer cell lines [89], PC-3 prostate cancer cell line [73], ventral prostate tissue [90], nontumorigenic cervical ECE16-1 cell line [91], LNCaP prostate cancer cell line [92], primary cultures of benign human prostate epithelial cells and non-tumorigenic prostate epithelial P153 cell line [93]. Thus, the results indicate a common role for IGFBP-3 in the growth inhibitory effects of vitamin D and its analogs in a variety of cell types. The presence of a functional VDRE in the distal region of the cloned human IGFBP-3 promoter [94] points to a strong likelihood that the induction of IGFBP-3 by 1a,25(OH)₂D₃ may be directly mediated via the genomic action of VDR. Based on the finding that IGFBP-3 can up-regulate the cyclin-dependent kinase inhibitor protein $p21^{WAF/CIP_1}$ and the addition of antibody against IGFBP-3 completely prevented the up-regulation of $p21^{WAF/CIP1}$ by $1\alpha, 25(OH)_2D_3$ in LNCaP cells, Boyle *et al.* [92] concluded that 1a,25(OH)₂D₃- induced growth inhibition in LNCaP prostate cancer cell line was mediated through its up-regulation of IGFBP-3 which in turn increased the expression of $p21^{WAF/CIP1}$. On the contrary, Murthy and Weigel [95] studied 1α , 25(OH)₂D₃induced growth inhibition of PC-3 prostate cancer cells and found that the blocking of TGF- β pathway substantially reduced the

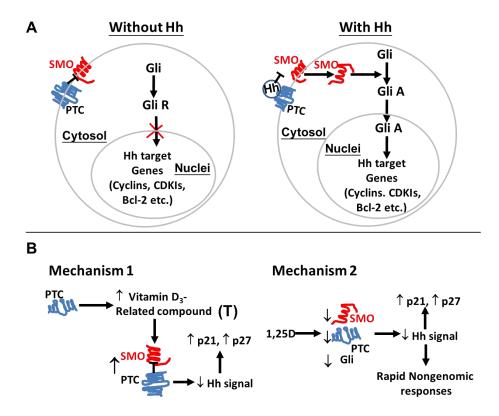


Fig. (2). Simplified Hedgehog (Hh) pathway and its potential effects on the anti-proliferative action of vitamin D. (A) A simplified model for Hh signaling in mammalian cells. Left panel: In the absence of the Hh ligands, Hh receptor (PTC) binds SMO, the key Hh signal transducer, *via* a vitamin D_3 -related compound (shown as T). Under this condition, Gli molecules are processed into repressor forms (Gli R), which turn off the expression of Hh-inducible genes. Right panel: In the presence of Hh, Hh binds to PTC. The binding causes the release of SMO from T. After SMO is freed from the PTC inhibition, it undergoes conformational changes to activate Gli to form active Gli (Gli A) in the cytosol. Cytosolic Gli A is then transported into the nuclei to act as a transcription factor to induce gene expression. (B) Vitamin D may affect Hh signaling pathway *via* two potential mechanisms. Left panel shows that PTC can stimulate the secretion of a vitamin D_3 -related compound (T), which is responsible for the inhibitory action of PTC on SMO in the absence of Hh. This results in a down-regulation of Hh signaling and increased expression of p21 and p27. Right panel depicts that the active form of vitamin D_3 , 1α , $25(OH)_2D_3$, can down-regulate the expression of PTC, SMO and Gli proteins, that in turn decreases Hh signaling, leading to enhanced p21 and p27 expression and other actions, including rapid nongenomic responses.

1a,25(OH)₂D₃- mediated growth without affecting IGFBP-3 expression in PC-3 prostate cells [86], suggesting an active TGF-β signaling pathway is required for the growth inhibition induced by 1a,25(OH)₂D₃ in PC-3 cells. Stewart and Weigel [96] further demonstrated that 1a,25(OH)2D3-induced up-regulation of IGFBP-3 was not required for the growth inhibitory effects of 1α , 25(OH)₂D₃ either in LNCaP or PC-3 cell line if serum was present in cultures. The apparent discrepancy between different cell lines and the effect of serum on $1\alpha.25(OH)_2D_3$ and IGFBP-3 interactions suggest a complicated cross-talk among these cell growth regulators in a cell specific manner. The complexity can be partially explained by the finding that ten functional VDREs, which are distributed within the promoter region of the IGFBP-3 gene, may be under the regulatory control of not only 1a,25(OH)₂D₃ [97-98] but also a putative androgen response element [99], as well as unknown factors present in the serum. In summary, 1a,25(OH)₂D₃ may up-regulate the expression of IGFBP-3 in certain cancer cell types, and the upregulation may play a critical role in inhibiting the cancer cells by increasing the expression of cyclin-dependent kinase inhibitor $p21^{WAF/CIP1}$.

3.1.4. Transforming Growth Factor-beta (TGF-β) Pathway

TGF- β is a 25 kDa peptide. Similar to vitamin D, TGF- β regulates diverse biological processes through modulation of the expression of target genes in a variety of cell types. For example, TGF- β is a potent growth inhibitor of many epithelial cell types *in vitro*. TGF- β transduces signals by simultaneously contacting two

transmembrane receptors, type I and type II. Upon binding to its type II receptor, the liganded type II receptor is recognized by type I receptor to form type I/type II heterotetramer, causing the phosphorylation of the type I receptor catalyzed by type II receptor serine/threonine kinase domain and the activation of certain members of the Smads protein family. Several studies have examined the molecular mechanism underlying the interplay between TGF- β and vitamin D, and suggested that the interplay between the two signaling pathways mainly is mediated by Smads, downstream components of the TGF- β signaling pathway [72,100]. The activation of Smad3 stimulates the ligand-induced transactivation of VDR [71], whereas Smad-7 inhibits formation of the VDR-Smad3 complex, and negatively regulates VDR transactivation function [100]. On the other hand, Wu et al. [101] reported two direct repeats of VDRE in the human TGF-B2 gene promoter, which can bind to VDR/RXR heterodimers. Furthermore, they demonstrated that 1α ,25(OH)₂D₃ up-regulated the expression of TGF-B type II receptor mRNA and protein in human breast cancer MCF-7 cells [102]. The later finding is in agreement with a previous report showing that $1\alpha_2(OH)_2D_3$ up-regulated the expression of TGF-B1 and its latent binding protein in cultured breast carcinoma BT-20 cells [103]. TGF-\u00b31-dependent pathway through up-regulation of Smad4 and phosphorylated-Smad3 levels was also shown to mediate the synergistic growth inhibition of MCF-7 breast cancer cells in the presence of melatonin and 1α ,25(OH)₂D₃ [104] and the up-regulation of VDR expression following butyrate treatment in CaCo-2 colon cancer cells [105].

Other potential interactions between TGF- β and vitamin D pathway may include the blockade by 1α ,25(OH)₂D₃ of the TGF β -1-induced up-regulation of mesenchymal cell markers and abnormal expression of epithelial cell markers, and therefore inhibits the pro-fibrotic phenotype of lung fibroblasts and epithelial cells [106]. The anti-fibrotic role of vitamin D was also reported in a study using human uterine leiomyoma cells [107]. It was shown that an attenuation of TGF- β induced phosphorylation of Smad2 as well as nuclear translocation of Smad2 and Smad3 by 1α ,25(OH)₂D₃ in human uterine leiomyoma cells led to the inhibition of uterine fibrosis caused by TGF- β 3-induced up-regulation of extracellular matrix proteins. Taken together, interactions between vitamin D and TGF- β signaling pathway may involve different Smad proteins and TGF- β receptors in different cell types and systems studied.

3.2. Apoptosis

Apoptosis or programmed cell-death is a regulated process, which is fundamental to the advantage of the organism. In tumor cells, activation of apoptosis pathways is a key mechanism by which chemotherapeutic or cytotoxic drugs eliminate those tumor cells [108]. Conversely, lack of apoptosis may contribute to the initiation and progression of cancer. During the past two decades, extensive research aimed at understanding the mechanisms involved in the complex signaling pathways that control apoptosis in normal as well as cancer cells has revealed that Bcl-2 proteins are the "master regulator" of the intrinsic apoptosis pathway that is crucial to the apoptotic response from DNA-damage and other carcinogenic challenges [109]. The Bcl-2 family of proteins has two subclasses that either promote (e.g., Bcl-X_s, Bax) or suppress (e.g., Bcl-2, Bcl-X_L, Mcl-1) apoptosis [110-111]. These proteins can form heterodimers and homodimers. The ratio of apoptotic promoters and suppressors is one determinant of cellular response. Increased Bcl-2 expression has been reported in many types of cancer, including breast, prostate and lung, and is often found in the advanced stages of cancers [112]. 1a,25(OH)₂D₃ induces apoptosis in a variety of cancer cells to exert anti-tumor effects by repressing the expression of the anti-apoptotic proteins Bcl-2 and Bcl-X_L, or inducing the expression of pro-apoptotic proteins, such as BAX, BAK and BAD [47,51,113,114]. Studying MCF-7 breast cancer cells, James et al. [115] and Simboki-Campbell et al. [116] reported 1a.25(OH)₂D₃-induced apoptosis by demonstrating reduced Bcl-2 protein, induction of TRPM-2 (clusterin) mRNA expression and increased DNA fragmentation after 1a,25(OH)2D3 treatment. In a study using LNCaP prostate cancer cells, Blutt et al. [112] found a down-regulation of Bcl-2 and Bcl-X_L proteins without affecting other proteins important in apoptotic control after 1α , 25(OH)₂D₃ treatment. In addition, 1α , $25(OH)_2D_3$ may directly activate caspase effector molecules to induce apoptosis. Activation of the caspase cascades, particularly caspase-3, -6, -7 and -9, is mainly induced by the release of cytochrome c from the mitochondrial membrane, into the cytosol. Among them, caspase-3 is the prime inducer of apoptosis [117-119]. In our studies with HepG2 cells, no expression of active caspase 3 protein was found either in the control or the group treated with 1α ,25(OH)₂D₃ as measured by western blot analysis [120]. Flow cytometry study with Annexin V-FITC and PI staining to analyze apoptotic and necrotic cell populations of HepG2 cells after 1a,25(OH)₂D₃ treatment also showed similar apoptotic and necrotic cell populations between the control and the treated groups, suggesting that the decrease in cell number after $1\alpha_2 (OH)_2 D_3$ treatment in HepG2 cells is apoptosis-independent. The 1a,25(OH)₂D₃-induced apoptotic response may also be mediated by the destabilization of telomerase reverse transcriptase mRNA, that will lead to the down-regulation of telomerase activity [121]. A recent report by Brosseau et al. [122] demonstrates that, by combining with immunomodulatory drug lenalidomide, 1α ,25(OH)₂D₃ was able to cause apoptosis of MDA-MB-231 cells,

a triple negative and vitamin D-resistant cell line, through the Bcl-2 inhibition mechanism, whereas the combination did not affect Bcl-2 in two other vitamin D resistant breast cancer cell lines MCF7VDR and HBL-100. Therefore, 1α ,25(OH)₂D₃ induces apoptosis in a cell-specific manner [123,124] and may involve different mechanisms in different cells.

3.3. Anti-angiogenesis

Angiogenesis is generally applied to the formation of thinwalled endothelium-lined new blood microvessels from preexisting vessels, a process that is regulated by a range of endogeneous angiogenic factors and inhibitors [125]. It plays an important role in reproduction, development and wound healing. It is usually focal and self-limited in time. On the contrary, pathological angiogenesis can last for years, and is necessary for tumors and their metastases to grow beyond a microscopic size [126]. It can also cause bleeding, vascular leakage and tissue destruction. There are several hypotheses regarding the onset of tumor-induced angiogenesis. The most important one is hypoxiainduced angiogenesis. Inefficient vascular supply and the resultant reduction in tissue oxygen tension often lead to neovascularization in order to satisfy the needs of the tissue [127-128], which in turn stimulates the expression of hypoxia-inducible factors (HIFs) [129]. Tumor cells induce angiogenesis through a multistep process, called the "angiogenic switch", which ultimately tips the balance toward pro-angiogenic factors [130]. HIFs can directly activate the expression of a number of pro-angiogenic factors, including vascular endothelial growth factor (VEGF), VEGF receptors FLT-1 and FLK-1, plasminogen activator inhibitor-1 (PAI-1), angiopoietins, platelet-derived growth factor β , and matrix metalloproteinases MMP-2 and -9 [131]. There is considerable evidence that VEGF is a major tumor angiogenesis factor [132]. Many tumor cell lines secrete VEGF in vitro. Several in situ hybridization studies have demonstrated that the VEGF mRNA is expressed in a vast majority of human tumors so far examined [133]. Anti-VEGF monoclonal antibodies exert a potent inhibitory effect on the growth of many tumor cell lines in nude mice. Several inhibitors of the VEGF pathway have been approved by FDA for cancer treatment, which is a significant advance in the therapy of cancer [134]. In addition, platelet derived growth factor (PDGF), fibroblast growth factors (FGFs) and Notch Delta-like ligand 4 (DLL4) have been reported to promote angiogenesis independent of VEGF [135]. Other than the hypoxia-induced pathological angiogenesis, it has been proposed that deficiency in MMP-19 may contribute to an earlier onset of tumoral angiogenesis, in contrast to most MMPs that promote tumor progression [136].

The evidence that vitamin D might exert anti-angiogenic action was first provided by Merke et al. [137], who demonstrated VDR expression in venular and capillary endothelial cells of human skin biopsies. They also demonstrated the conversion of 25(OH)D₃ to 1α ,25(OH)₂D₃, and the growth inhibitory effect of 25(OH)D₃ and $1\alpha_2 25(OH)_2 D_3$ in the bovine aortic endothelial cells, suggesting the existence of a vitamin D autocrine loop in endothelium that may play a role in the development and/or functions of blood vessels. Subsequently, numerous studies showed $1\alpha.25(OH)_2D_3$ inhibited the proliferation of cultured endothelial cells and anti-angiogenesis in animal models [138-140]. Furthermore, the expression of VEGFrelated protein has been shown to be down-regulated by EB1089, a less calcemic analog of 1α ,25(OH)₂D₃ [141], and 1α ,25(OH)₂D₃ inhibited HIF-1 transcriptional activity as well as its target genes, including VEGF, ET-1, and Glut-1 in wild type human cancer cells, but failed to suppress VEGF expression in HIF-1α knockout human colon cancer cells [142]. Taken together, the anti-angiogenesis effect of 1a,25(OH)₂D₃ in cancer cells is likely mediated by HIF-1/VEGF pathway [142]. 1α,25(OH)₂D₃ can also up-regulate mRNA levels of the potent anti-angiogenic factor thrombospondin 1 in human colon tumor cells [143]. The hormone can also interrupt the

angiogenic factor interleukin 8 signaling, leading to the inhibition of endothelial cell migration and tube formation [144]. It has been proposed that the inhibitory effect of 1α ,25(OH)₂D₃ on metastasis observed in the prostate and lung murine models may partially depend on its anti-angiogenic property [145-146]. It should be noted that in vascular smooth muscle cells, 1α ,25(OH)₂D₃ was shown to upregulate VEGF mRNA [147].

3.4. Pro-differentiation

The seminal observation by Abe *et al.* [148] that 1α ,25(OH)₂D₃ was capable of inducing mouse myeloid leukemia cells to differentiate into multinucleated macrophages provides the first evidence that $1\alpha_2(OH)_2D_3$ has functions other than regulating calcium and phosphate homeostasis and paved the way for a new era of vitamin D research. Subsequently, it was shown that 1α ,25(OH)₂D₃ was able to inhibit proliferation and increase the expression of a variety of differentiation markers, including involucrin, transglutaminase, loricrin and filaggrin, and enhance cornified envelope formation in cultured keratinocytes [49]. By maintaining the ordered cellular proliferation and differentiated epithelium, 1α ,25(OH)₂D₃ is able to contribute to skin cancer prevention [49]. Now, we know that in cultured cells, administration of 1a,25(OH)₂D₃ or its analogs can regulate the expression of numerous genes that are associated with the differentiated cell of origin [149-151], and thus inhibit the processes critical for tumor growth and metastases [143]. In VDRexpressing SW 480-ADH human colon carcinoma cell line, $1\alpha.25(OH)_2D_3$ induces differentiation by promoting the expression of proteins implicated in adherent junction formation, including differentiation marker E-cadherin, and other adhesion proteins, such as occludin and vinculin [152]. This process is mediated by the upregulation of Id1gene and down-regulation of Id2 gene in response to 1α ,25(OH)₂D₃ [141]. In breast cancer cell lines, the induction of differentiation markers, such as E-cadherin, casein, lipid droplets, was also observed following 1a,25(OH)₂D₃-induced growth arrest [153-154]. E-cadherin is a member of the cadherin family of cell membrane adhesion glycoproteins that play an important role during cell migration. E-cadherin is expressed on the epithelial cells and forms the cell-cell tight junction. Decreased expression of this protein will cause a decrease of homotypic cell adhesion and increased cell migration and invasion, suggesting that E-cadherin may act as a tumor suppressor. In MCF-7 and HEC-1B endometrial cancer cells, Icb-1, a human gene product involved in differentiation processes of cancer cells, has been shown to be a mediator of the 1a,25(OH)₂D₃-induced up-regulation of E-cadherin expression [155]. Hsu et al. [156] demonstrated that 1α,25(OH)₂D₃ promoted prostate cancer cell aggregation by up-regulating Ecadherin expression, and therefore interfering their adhesion to microvascular endothelial cells and reducing their metastatic potential. Thus, 1a,25(OH)₂D₃-induced differentiation may be one mechanism responsible for inhibiting tumor growth and metastases.

Recently, a time- and dose-dependent induction of E-cadherin by $1\alpha, 25(OH)_2D_3$ was observed in the triple-negative breast cancer cell line MDA-MB-231 [157], suggesting that metaplastic breast carcinomas may respond to 1α , $25(OH)_2D_3$ treatment. Other differentiation markers affected by 1a,25(OH)₂D₃ in breast cancer cells include claudin-7, occludin, actin filaments and microtubules, filopodia and lamellipodia. Therefore, the addition of 1a,25(OH)₂D₃ to breast cancer cells will result in increased cell and nuclear size and induce a change of nuclear shape and cell morphology from a rounded to a flattened shape [154]. In addition, 1a,25(OH)₂D₃ down-regulates SPROUTY-2 (SPRY2) expression in colon cancer cells through E-cadherin-dependent and -independent mechanisms [158]. In turn, SPRY2 suppresses both basal and 1a,25(OH)₂D₃-induced E-cadherin expression, and induces ZEB1 expression. For this reason, SPRY2 and E-cadherin protein levels were found inversely correlated in colon cancer cell lines, xenograft tumors and human colon tumor tissues.

Wnt/β-catenin is an evolutionarily conserved signaling pathway that plays an essential role in a diverse array of biologic processes, including organogenesis, tissue homeostasis and, in some instances, pathogenesis of diseases, including cancers [159]. Earlier studies indicate that 1α , 25(OH)₂D₃ and its analogs are able to promote the differentiation of colon cancer cells by inhibiting Wnt/β-catenin signaling pathway mediated by VDR competing with transcription factor TCF-4 for β -catenin binding [152,160-161]. The molecular mechanism of the induction by 1a,25(OH)₂D₃ was further studied in LS180 colon cancer cells using chromatin immunoprecipitationseq and gene expression analyses [162]. It was found that VDR and RXR co-localized to VDRE sites in a ligand-dependent manner near a set of genes that included c-FOS and c-MYC. The expression of both c-FOS and c-MYC was modulated by 1α , 25(OH)₂D₃. At the c-FOS gene, both VDR/RXR and TCF4/β-catenin bound to a single distal enhancer located 24kb upstream of the transcriptional start site. At the c-MYC locus, binding was at a cluster of sites between -139 and -165 kb and at a site located -335 kb upstream, where both VDR and β -catenin activation was interlinked to basal and 1α ,25(OH)₂D₃-inducible activities. In addition, 1α ,25(OH)₂D₃ is known to regulate two genes encoding two extracellular Wnt inhibitors, DICKKOPF-1(DKK-1) and DICKKOPF-4 (DKK-4), in opposite directions; 1α , $25(OH)_2D_3$ up-regulates DKK-1 which acts as a tumor suppressor in human colon cancer cells, whereas 1α,25(OH)₂D₃ down-regulates DKK-4, an oncogenic protein and a target of the Wnt/β-catenin pathway [159-160]. Taken together, these data reveal complex modes of action in the regulation of target genes by 1α , 25(OH)₂D₃.

3.5. Anti-inflammation

Animal studies have linked the anti-cancer effects of 1α ,25(OH)₂D₃ to its ability to regulate inflammation [163]. In colon cancer cells, 1α , $25(OH)_2D_3$ can interrupt the wnt-mediated crosstalk between tumor epithelial cells and macrophages in the tumor microenvironment by blocking the production of IL-1 β , an inflammatory cytokine produced by tumor-associated macrophages [164]. Conversely, any disruption of the 1α ,25(OH)₂D₃/VDR signaling pathway, such as up-regulation of the transcriptional repressor SNAIL, may enhance epithelial cell inflammation and exacerbate colon cancer progression. Feldman and colleagues performed cDNA-microarray analyses of normal and cancerderived primary prostate epithelial cells [165] and LNCaP cells [166] and revealed that 1a,25(OH)₂D₃ regulated a wide array of genes, including those involved in the synthesis and catabolism of prostaglandins, which are well-established inflammatory mediators. They showed that 1α ,25(OH)₂D₃ up-regulated the expression of NAD⁺-dependent 15-hydroxy-prostaglandin dehydrogenase (15-PGDH) gene and down-regulated cyclooxygenase-2 (COX-2) expression. Since prostaglandins are known to play a role in the development and progression of many cancers [167], the ability of $1\alpha_2 25(OH)_2 D_3$ to decrease prostaglandin concentration strongly suggests that one mechanism of anti-cancer effect of vitamin D may be mediated through its anti-inflammatory action.

3.6. DNA Repair and the Prevention of Tumor Initiation and Progression

Gene array profiling studies have demonstrated that $1\alpha,25(OH)_2D_3$ up-regulates the expression of DNA repair genes [166,168], suggesting that $1\alpha,25(OH)_2D_3$ may be involved in DNA repair pathways. To investigate the mechanism of $1\alpha,25(OH)_2D_3$ -induced DNA repair, Ting *et al.* [169] utilized a well-established *in vitro* model of chemical carcinogenesis. In this model, they found that $1\alpha,25(OH)_2D_3$ promoted the expression of the DNA repair genes RAD50 and ataxia telangiectasia mutated (ATM), both of them are known to be critical for mediating the signaling responses to DNA damage. They also found that $1\alpha,25(OH)_2D_3$ protected cells from genotoxic stress and growth inhibition by promoting double-strand break DNA repair. They noted that depletion of VDR

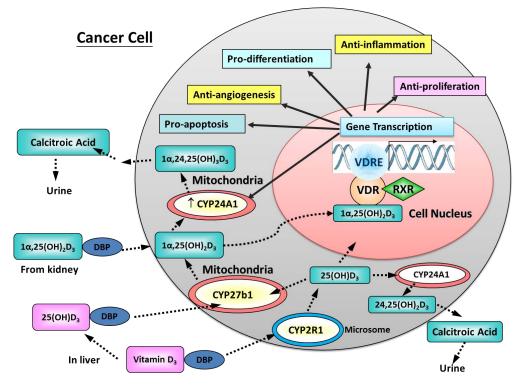


Fig. (3). The genomic anti-cancer actions of 1α ,25(OH)₂D₃. The genomic actions of 1α ,25(OH)₂D are mediated through its binding to vitamin D receptor (VDR), a member of the nuclear receptor superfamily, to modulate the expression of various genes. The liganded VDR forms a heterodimer with retinoid X receptor (RXR) and binds to vitamin D response element (VDRE) to modulate the gene expression. Since VDR is expressed in almost all tissues, 1α ,25(OH)₂D₃ has been found to exert various anti-cancer actions, including anti-proliferation, anti-inflammation, pro-differentiation, pro-apoptosis and anti-angiogenesis in a tissue- and cell-specific manner. Recent evidence indicates that 25(OH)D₃ is a natural ligand for VDR, and is capable for causing biological effects without converting to 1α ,25(OH)₂D₃.

reduced the observed genoprotective effects and caused malignant transformation that could not be prevented by 1α ,25(OH)₂D₃ in a xenograft mouse model, indicating an essential role for VDR in mediating the anticancer effects of 1α ,25(OH)₂D₃. Since genotoxic stress can activate ATM and VDR through phosphorylation of VDR, mutations in VDR at putative ATM phosphorylation sites impaired the ability of ATM to enhance VDR transactivation activity, leading to decreased induction of ATM and RAD50 expression by 1α ,25(OH)₂D₃. Taken together, the authors propose a positive feedback signaling loop between ATM and VDR to enhance the up-regulation of DNA repair proteins and thereby prevent tumor initiation and progression resulting from DNA damages.

4. NON-GENOMIC ANTI-CANCER ACTIONS OF VITAMIN D

 $1\alpha.25(OH)_2D_3$ and many of its analogs are structurally flexible, and are capable of facile rotation about its 6,7 single carbon bond to permit generation of a continuum of potential ligand shapes extending from the 6-s-cis (6C) to the 6-s-trans (6T) [170]. This structural flexibility has been proposed as a base of rapid and nongenomic biological responses induced by $1\alpha, 25(OH)_2D_3$ and some of its analogs. The non-genomic rapid response has been shown in several biological systems [39], that may be mediated through a functional VDR in some systems [171] or may be independent of VDR in other systems [172]. To support the involvement of VDR in the rapid non-genomic actions of vitamin D, it has been reported that VDR is present in caveolae-enriched plasma membranes and binds 1a,25(OH)₂D₃ with high affinity in vivo and in vitro [173]. Furthermore, an alternative ligand-binding pocket in the VDR has been identified by molecular docking using a receptor conformational ensemble model generated from x-ray crystal structure of the VDR ligand binding domain [174]. The existence of non-classical membrane VDR has been found to be related to the rapid actions, including activation of protein kinase C and protein phosphatase PPIc [114]. The actions have been shown to result in subsequent ion channel activity modulation [171]. Furthermore, it has been known for some time that 1α ,25(OH)₂D₃ reduces UV-induced DNA damage [175] in the form of cyclobutane pyrimidine dimers (CPD) in human keratinocytes in culture, and in mouse and human skin [176-177]. The photoprotection by 1α ,25(OH)₂D₃ against oxidative insults [175,177-178] is thought to be mediated by a non-genomic signaling mechanism, because 1α ,25(OH)₂ lumisterol₃, which has almost no transactivating activity, reduces UV-induced DNA damage, apoptosis and immunosuppression with similar potency as 1α ,25(OH)₂D₃ [179].

In the earlier section under Hedgehog Hh/Gli signaling pathway, we have mentioned the work by Uhmann *et al.* [69] who demonstrated that $1\alpha,25(OH)_2D_3$ was capable of inhibiting Hh signaling at the level of SMO in the absence of VDR, and by Tang *et al.* [71] who also found that $1\alpha,25(OH)_2D_3$ -induced Gli expression in murine BCC cells was independent of VDR. Thus, in addition to the report by Wali *et al* [172], these two studies provide strong evidence of the non-genomic and rapid non-VDR action of $1\alpha,25(OH)_2D_3$ on cell growth and differentiation.

5. CONCLUSIONS AND FUTURE DIRECTIONS

Vitamin D is a pleiotropic hormone. 1α ,25(OH)₂D₃, the most active metabolite of vitamin D₃, is a natural ligand for the vitamin D receptor VDR. Upon binding of the hormone to VDR, the liganded receptor heterodimerizes with RXR and binds to VDRE to either induce or repress the expression of affected genes. The spectrum of genes regulated by vitamin D is vast, essentially including every aspect of human physiology.

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This brief overview clearly indicates that 1α ,25(OH)₂D₃ is a potent anti-cancer agent, affecting cancer cells in cultures and tumor progression in animal models by a variety of mechanisms, including but not limited to anti-proliferation, anti-angiogenesis, pro-apoptosis, pro-differentiation and anti-inflammation (Fig. 3). The underlying mechanisms for its anti-proliferative action, mediated through the VDR-dependent transactivation of genomes, may include cell cycle arrest, and pathways related to hedgehog, IGFBP-3, TGF- β -signaling and etc.

Emerging evidence indicates that 1α ,25(OH)₂D₃ can have rapid actions with or without involving VDR. This will be an area of focus in the coming years. Certainly, we need to continue exploring the VDR-mediated actions in new areas, such as central nervous system, stem cell biology and new ways of diagnosing diseases, including cancers.

Despite the progress in basic laboratory research, the clinical application of vitamin D compounds for cancer treatment is still lacking. The major hurdle is the hypercalcemic side effect induced by administering a high dose of 1α ,25(OH)₂D₃, that is necessary to exert the anti-tumor effects of vitamin D in humans. The potential of using less calcemic analogs of vitamin D with much higher potency than 1α ,25(OH)₂D₃ for treating cancers still exists, especially in combination with other anti-cancer agents or immunomodulatory drugs. The association between decreased sun exposure/vitamin D deficiency and the risk of chronic diseases, including many types of cancer, indicates that maintaining adequate vitamin D nutrition should be a paramount priority for men and women of all ages.

CONFLICT OF INTEREST

The author(s) confirm that this article content has no conflict of interest.

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ABBREVIATIONS

25(OH)D ₃	=	25-hydroxyvitamin D_3
1α,25(OH) ₂ D	=	1α ,25-dihydroxyvitamin D
7-DHC	=	7-dehydrocholesterol
DBP	=	vitamin D binding protein
DBD	=	DNA-binding domain
LBD	=	ligand-binding domain
VDRE	=	vitamin D response element
VDR	=	vitamin D receptor
RXR	=	retinoid X receptor
HDX	=	hydrogen-deuterium exchange
CDKs	=	cyclin-dependent kinases
CDKIs	=	cyclin-dependent kinase inhibtors
pRB	=	retinoblastoma protein
IGFBP3	=	insulin-like growth factor binding protein-3
TGF-β	=	transforming growth factor-beta
EGFR	=	epidermal growth factor receptor
E2F1	=	transcription factor 1
Hh	=	Hedgehog
Shh	=	Sonic Hedgehog
Ihh	=	Indian Hedgehog
Dhh	=	Desert Hedgehog
Gli	=	glioma associated
PTC	=	Patched or Hh receptor

SMO	=	smoothened
SPTHIFs	=	hypoxia-inducible factors
VEGF	=	vascular endothelial growth factor
MMPs	=	matrix metalloproteinases
PDGF	=	platelet derived growth factor
FGFs	=	fibroblast growth factors
DLL4	=	Notch Delta-like ligand 4
15-PGDH	=	15-hydroxy-prostaglandin dehydrogenase
COX-2	=	cyclooxygenase-2
ATM	=	ataxia telangiectasia mutated
CPD	=	cyclobutane pyrimidine dimmers

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