



Review

Super-enhancers: A new frontier for glioma treatment

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ABSTRACT

Glioma is the most common primary malignant tumor in the human brain. Although there are a variety of treatments, such as surgery, radiation and chemotherapy, glioma is still an incurable disease. Super-enhancers (SEs) are implicated in the control of tumor cell identity, and they promote oncogenic transcription, which supports tumor cells. Inhibition of the SE complex, which is required for the assembly and maintenance of SEs, may repress oncogenic transcription and impede tumor growth. In this review, we discuss the unique characteristics of SEs compared to typical enhancers, and we summarize the recent advances in the understanding of their properties and biological role in gene regulation. Additionally, we highlight that SE-driven lncRNAs, miRNAs and genes are involved in the malignant phenotype of glioma. Most importantly, the application of SE inhibitors in different cancer subtypes has introduced new directions in glioma treatment.

1. Introduction

Glioma is one of the most common types of primary malignant tumors and accounts for more than 30% of all primary brain tumors [1]. Over the past several decades, glioma has been characterized by necrosis, aggressive growth, and angiogenesis [2]. The World Health Organization (WHO) has divided glioma into four types based on morphological characteristics and prognosis [3]. Low-grade gliomas (Grades I and II) mainly contain astrocytomas, oligodendroglomas, pleomorphic xanthoastrocytomas, and certain ependymomas that are well-differentiated and have low malignancy [4]. High-grade gliomas (Grades III and IV) include anaplastic astrocytomas, anaplastic oligodendroglomas, glioblastoma multiforme, and anaplastic oligodendroglomas that are poorly differentiated and highly malignant [5]. High-grade gliomas account for the majority of all gliomas, and they are heterogeneous and consist of tumor cells, glioma-like stem cells, a wide range of blood vessels and immune cells [6–8]. Currently, the main therapies for glioma include surgical resection, oral alkylating agents and radiation [9]. Despite great advances in therapeutic interventions against glioma, the prognosis of patients with glioma remains poor [10]. Therefore, there is an urgent need to identify the underlying molecular mechanisms of glioma development.

Super-enhancers (SEs) are ultra-long cis-acting elements with enhanced transcriptional activity [11]. SEs are a type of hyperactive

regulatory domain that comprises many complex regulatory elements [12]. These regulatory elements work together to regulate key gene networks involved in cellular identity [13]. Recently, SEs have been found to play a central role in gene transcription activation in different types of cells and to be involved in the pathological processes of numerous tumors including glioma [14,15]. Although the effect of SEs has been verified in many tumor cells, their specific regulatory mechanisms have not been thoroughly studied. Increasing evidence has suggested that transcriptional dysregulation caused by SEs has potential effects on the biological function of glioma [16–18]. Previous studies have shown that abnormal transcription of protein-encoded genes, including the inactivation of tumor suppressor genes and the activation of proto-oncogenes, plays a necessary role in the development of glioma [19,20]. Interestingly, an increasing number of studies has focused on the transcriptional dysregulation of non-coding RNA (lncRNA and miRNA) in the pathology of glioma [21–23]. In this review, we will explore the structure and function of SEs, and we illustrate their relationship with protein-coding genes and non-coding genes (lncRNA and miRNA) in glioma.

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2. Overview of super enhancers

2.1. What are SEs?

Enhancers are a class of cis-acting DNA elements that typically form long chromatin rings with target genes [24]. Enhancers can precisely regulate the expression of target genes even when they are far away from target genes, and enhancers play a regulatory role in cell differentiation and development [25]. There are several transcription factor (TF)-binding sites on enhancers, which are implicated in regulating the activity of enhancers [26]. The regulatory mechanism of enhancers has been well studied in many tumors, including glioma [25,27,28]. In 2013, Whyte et al. proposed the concept of SEs for the first time based on the study of enhancers [29]. Despite the widespread belief that SEs are unique and regulate the expression of key identity genes in cells, there is an alternative view held by some researchers that SEs are just clusters of enhancers [30,31]. These kinds of enhancers cluster together and work similarly to typical enhancers, contributing an additive effect on their target genes. Given this controversy, it is necessary to explore the structural composition of SEs and their functional patterns. In certain regions of SEs, there are hotspots occupied by multiple genealogy-specific TFs, which generally span tens of bases of extended histone modification markers covered with active enhancers [32]. In addition, SEs are heavily loaded with chromatin remodelers, transcription co-activators, and Pol II holoenzyme by at least one order of magnitude greater than typical enhancers [29], which creates super strong transcriptional activity and specific biochemical characteristics (Fig. 1). SEs were first identified in mouse embryonic stem cells (ESCs) by strongly enriching ESC-specific TFs, such as OCT4, NANOG and SOX2 [29]. Subsequently, based on the enrichment of master TFs in cell type-specific genes that determine the biological function of cells, more SEs have been identified in different cell types [13]. However, the current definition and understanding of SEs in cells are not clear.

2.2. Characteristics of SEs

Increasing evidence shows that SEs are occupied by components, including TFs, chromatin regulators, coactivators, and RNA polymerase II complex, which are associated with enhancer activity [11]. In addition, SEs are unique in that the average density of these components at the SE locus is 10 times that of typical enhancers [33]. As important cis-acting regulatory elements in the cellular identity and development of multicellular organisms, enhancers regulate gene expression by acting on nearby promoters [34]. For example, the enhancers that encode upstream of the β -globulin gene in HeLa cells increase the expression of

the β -globulin gene by 200-fold [35]. In the model defined by Whyte et al., SEs are an ultralong cis-acting element 8–20 kb in length with transcription-enhancing activity that gathers key TFs and their cofactors in high density. Compared to typical enhancers, SEs have stronger transcriptional activation ability, and their associated genes show higher expression levels [15,36]. As a result, we suggest that SEs may strongly promote the transcription of their target genes. In addition, SEs not only affect gene expression with their component enhancers but also have an effect on the functional levels within the constitutive enhancers [31,37]. The further distinction between SEs and typical enhancers highlights the interaction of their components and their ability to function as a unit. Increasing evidence suggests that SEs have some unique characteristics compared with typical enhancers [15,38]. The following aspects are the unique characteristics of SEs that distinguish them from typical enhancers: (i) SEs enrich a large number of TFs, cofactors and histone markers (H3K27ac and H3K4me1) associated with transcription activity [39,40]; (ii) SEs span a larger genomic region with the median size of SEs ranging from 10 kb to over 60 kb [15,29]; (iii) SEs can define a cell identity and drive the expression of oncogenes [36,41,42]; (iv) SE-driven genes have high abundance and can be defined in any cell type [24,43]; (v) SEs have a higher correlation with tumor-specific cell signaling pathways, such as the TGF- β and Wnt signaling pathways [44,45]; and (vi) SEs are more sensitive to external intervention, and the expression levels of SE-associated genes are more susceptible to transcriptional interference [46–48]. These observations indicate that SEs can be used as biomarkers to categorize cell types by comparing to typical enhancers. In summary, SEs and typical enhancers are similar in terms of structural composition, but their internal arrangement of TFs and cofactors as well as their binding density are different [13,36]. As a result, SEs perform a different function than typical enhancers. However, to understand whether SEs are fundamentally different from typical enhancers still requires further study. However, no set of rules can fully define all the characteristics of SEs because they are present in different cell types with different composition and properties. At present, it is feasible to identify SE regulatory regions of core genes that determine cell fate. More studies are required to explore these regulatory areas to better understand the characteristics of SEs. Although our studies on SEs have made some progress, they have also discovered new problems that need to be addressed. Due to the exceptional transcriptional activity of SEs, it is necessary for SEs to precisely bind to their target genes to prevent them from mistakenly driving adjacent genes unrelated to tumor function.

2.3. Identification of SEs

In previous studies, Richard A. Young and colleagues compared the

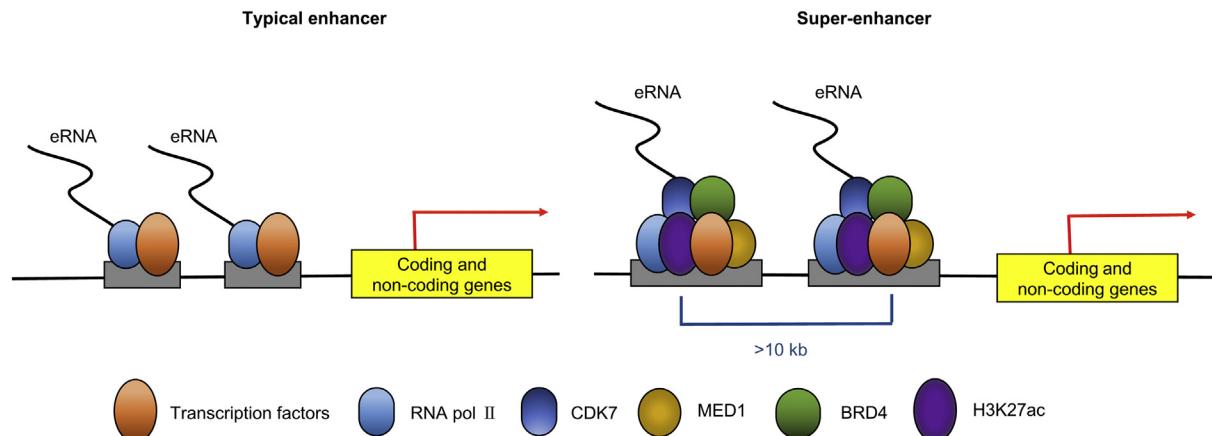


Fig. 1. Comparison of Super-enhancers and typical enhancers. In contrast to typical enhancers, Super-enhancers comprise large clusters of enhancer that are densely occupied with H3K27ac, CDK7, BRD4, MED1, and lineage-specific or master transcription factors.

relative ability of chromatin-immunoprecipitation sequencing (ChIP-Seq) data to H3K27ac, H3K4me1, mediator, and DNase I hypersensitivity data to distinguish SEs from typical enhancers. In this identification process, the enrichment of these enhancer transcription activity marker molecules on the genome was first analyzed by ChIP-Seq to determine the activity enhancer site. Within the genome, if these single enhancer entities were within the 12.5 kb range, they were merged into a single entity, the stitched enhancer. The stitched enhancer and the remaining individual enhancers were sorted according to the signal strength of the labeled molecules measured by ChIP-seq and plotted into a graph. The signal value of the marker molecule at the tangent point of the tangent line with a slope of 1 on this curve was the dividing line, in which molecules higher than this value were considered as SEs with the remaining considered as typical enhancers. Finally, these authors found that mediator was the most effective sign in distinguishing SEs from typical enhancers [29]. Previous studies have also confirmed that the domains of SEs are occupied by various histone modifiers, chromatin regulators, RNA Pol II, TFs and cofactors [41]. Khan et al. found that H3K27ac, p300, cyclin-dependent kinase 7 (CDK7), cyclin-dependent kinase 9 (CDK9), and mediator complex subunit 1 (MED1) as the six most important factors by ranking chromatin features [49]. Of note, H3K27ac and bromodomain-containing protein 4 (BRD4) perform optimally and each could be used to some degree to distinguish SEs from typical enhancers. However, the use of ChIP-seq data to distinguish the occupancy of different factors in SEs has not yet been well characterized. Previous studies have only shown that these highly ranked factors mediate gene transcription.

H3K27ac is a modification on the DNA-packaging protein, histone H3 [50]. Currently, H3K27ac is the most frequently used marker for identifying SEs [51]. Due to the high reliability of H3K27ac ChIP-seq data in SEs, the combination of Rank Ordering of Super-Enhancer (ROSE) with the activity of molecular H3K27ac has been widely used to distinguish SEs from typical enhancers [13].

BRD4, a member of the bromodomain and extraterminal domain (BET) protein family, is the second strongest marker for SEs in various cell types. BRD4 is a transcriptional regulator and epigenetic reader in cells that can bind to acetylated lysine in histones [52]. BRD4 induces the expression of cell type-specific genes by preferentially binding active enhancers. The main mechanism of BRD4 is to promote phosphorylation of RNA Pol II and then mediate transcriptional elongation of target genes [53,54]. Furthermore, BRD4 is also related to anti-suspension enhancers that regulate the proximal suspension release of RNA Pol II promoters [55].

Recently, increasing studies on SEs have highlighted the other two key factors, namely, CDK7 and MED1. CDK7, identified as a member of the cyclin-dependent kinase family, regulates transcription initiation by promoting phosphorylation of RNA Pol II. Thus, CDK7 is considered a key component of the transcription apparatus [56].

MED1, which is one of the critical components of the large multi-protein complex, acts as a key player in the transcription of RNA Pol II by binding DNA to the regulatory signals of gene-specific TFs [57]. Moreover, MED1 contributes to the formation of enhancer-promoter looping and three-dimensional (3D) genome organization [58]. Additionally, MED1 plays a major coordinating role in cell lineage and development [59].

To summarize, the combination of ROSE with the activity of molecular H3K27ac as analyzed by ChIP-Seq can identify SEs. In addition, several cofactors (MED1), chromatin regulators (BRD4), and signaling factors (CDK7) can also be used for SE identification [60,61]. However, the other master TFs that form the SE domain are still unclear. Previous studies have only indicated the possibility that multiple cofactors play a pivotal role in SE formation. To the best of our knowledge, there are three SE databases, including dbSUPER [62], SEA [60], and SEdb [63], which gather published SEs and implement the ROSE algorithm to mine available ChIP-seq data.

2.4. Biological function of SEs

SEs are enhancer clusters with cell type specificity that define identity and biological function by driving the expression of key cell identity genes [64]. SEs not only determine the identity of cells but also have the ability to maintain the characteristic of cancer cells and distinguish cancer subtypes [65]. Multiple SEs can promote gene regulation via several methods through specific loci with differences in activation during the developmental stage or synergistic gene expression. Additionally, somatic mutations frequently related to cancer often occur in SE-enriched genomes and are directed by SEs [66,67]. A phenomenon called "enhancer hijacking" has been reported by several studies on the mechanism of tumorigenesis. This phenomenon describes SEs as multi-component regulatory elements that can drive the expression of oncogenes in different cellular environments [68]. For example, a study on adenoid cystic carcinoma found that SE translocation drives the overexpression of oncogenic TFs in cancer cells [69]. Translocated SE elements shelter TF-binding sites, rendering TFs active, resulting in a positive feedback loop, further strengthening TF expression [70]. Another example of enhancer hijackings has been reported in acute myeloid leukemia (AML) with the translocation of SEs in the locus leading to the reorientation of the original tumor suppressor genes into oncogenes, ultimately promoting the occurrence of tumors [71,72]. Previous research has shown that SEs have a pivotal role in cell development and determine cellular identity [73]. A recent study has found that SEs play a general role in the genome of cells in addition to playing a regulatory role in different cell types [12]. However, the role of SEs in genome regulation is not fully elucidated.

Previous classical transcriptional control models have provided important insights into SE regulatory principles. Recently, a phase separation model has been proposed in the study of SEs [37]. High-density aggregates of polyvalent molecules and nucleic acids as well as their synergistic interactions result in the formation of phase separation [74]. In cell biology, phase separation refers to a specific state of intracellular aggregation of biological macromolecules [37,75], and it is similar to the process by which the liquid and solid of a substance change into each other in physical chemistry. The phase separation process plays an important role in 3D genomic tissue and participates in the identification of tissue cell identity [76]. Richard Young's group reported that the transcriptional coactivators, BRD4 and MED1, promote the phase separation process by forming a liquid-liquid phase separation (LLPS) around the SE domain. This process gathers the transcription machinery near the SEs to achieve the compartmentalization response of the transcription process. Intrinsically disordered regions (IDRs) play a key role in the phase separation process [77]. This kind of regulation mechanism is particularly suited to assembly and activation of SEs. Compared to typical enhancers, the formation of phase-separated multimolecular assemblies may occur more frequently during SE formation. Therefore, SEs contribute more to transcriptional regulation than the additive effect of their multiple components. As described above, SEs are considered a collaborative assembly of high-density TFs, chromatin regulators, transcription cofactors, and RNA Pol II [40] (Fig. 2). Thus, SEs can drive higher levels of transcription than typical enhancers and are particularly sensitive to interference with enhancer-related components. This model provides a profound insight into the formation, disturbance resistance and co-activation of multiple genes of SEs. Additionally, a similar study has proposed that SEs have potential functions in remote chromatin communication and the establishment of 3D chromatin rings [78]. The biological functions of SEs have been studied by many researchers, which has also provided insights into the understanding of SEs. However, little is known about the potential mechanism of SEs in specific cells. Therefore, focusing on the regulatory mechanism of SEs is still a future research direction.

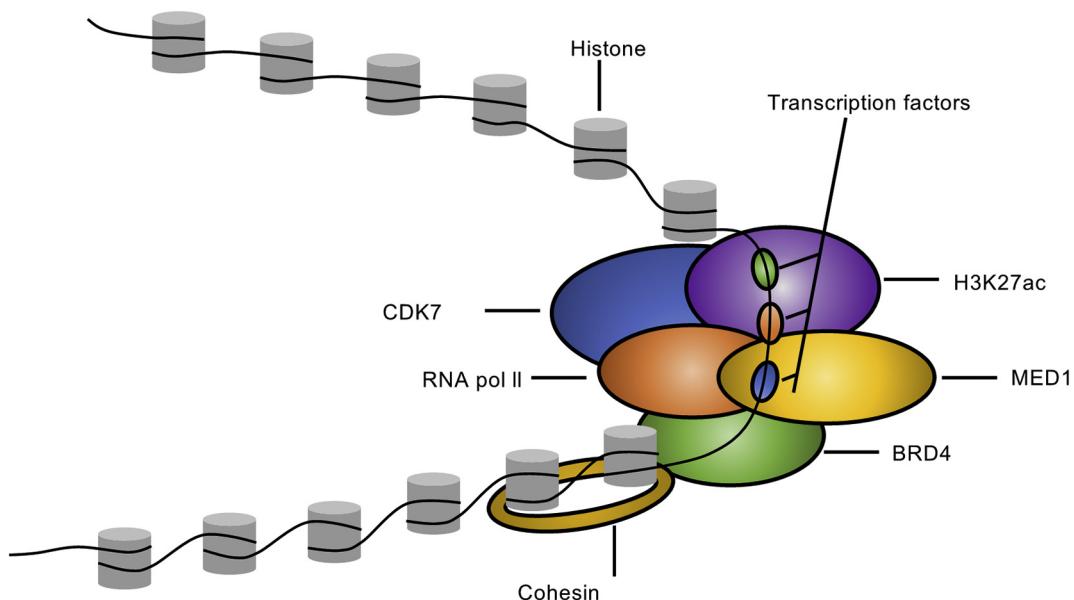


Fig. 2. Super-enhancer region combines multiple transcription factors to regulate gene transcription status.

2.5. SEs in tumors

As is well-known, gene transcription regulation governs the type of cell differentiation and the fate of organ development. Cancer is driven by transcriptional dysregulation of proto-oncogene and tumor-suppressive pathways. Thus, transcriptional dysregulation mediated by epigenetic or genetic alterations often results in the formation of cancer. Abnormal transcription of genes driven by SEs is essential for maintaining the characteristics of tumor cells. By assembling their own SEs, tumor cells can significantly promote the expression of a variety of oncogenes, thereby enhancing the biological function of tumor cells [79]. Compared to promoters and typical enhancers, a larger spectrum of cancer-associated mutations is found in SEs. In some tumors, small mutations and indels can randomly generate new SEs that can drive oncogenes of tumor pathogens [80]. Increasing evidence suggests that SEs are involved in the development of several tumors and maintain the characteristics of tumor cells. Therefore, SEs may be a potential biomarker in tumor cells [19,24,26,52,53]. Compared to their normal counterparts, tumor cells have altered SE usage and expression patterns [81]. Accordingly, SEs are enriched in genes and non-coding RNAs, known as oncogenic function, in tumor cells. Although SEs are specific to different tumor types, they could regulate the expression of the same genes in different tumors [34]. For example, Loven et al. reported that SEs are highly enriched in the MYC locus and overlap in different types of tumors [15]. Furthermore, MYC acquires large SEs that are tumour type-specific and absent from the normal cells [13]. In squamous cell carcinoma (SCC), CCAT1 has been identified as a new SE-associated oncogenic lncRNA [82]. As newly developed regulators, numerous studies have identified SEs in diverse tumors and shown that SEs promote the malignant phenotype of tumor cells. In summary, these results indicate that SEs contribute to tumor development by strongly enriching and driving tumor-specific genes and non-coding RNAs.

2.6. SEs in glioma

Transcription dysregulation is regulated by epigenetic and genetic alterations targeting non-coding regulatory elements. These effects can lead to the occurrence and development of tumors. SE involvement in the occurrence and development of glioma has been reported [16,17,83,84]. By using the CHIP-seq analysis of H3K27ac and MED1, many SE-associated genes, including WNT7B, FOSL1, FOXL2, and

ZMIZ1, have been identified in glioma cells. Individual silencing of these genes significantly impairs the proliferation of glioma cells [16]. A separate study on diffuse intrinsic pontine glioma (DIPG) has shown that numerous genes related to SEs are markers of the state of undifferentiated nerve cells. Furthermore, a set of SE-associated genes mediates the identity and malignant state of DIPG cells [17]. In another similar study, the researchers found that SE-related genes have important roles for glioblastoma (GBM) growth. In addition, SE inhibitors lead to considerable disruption of global gene transcription in GBM cells, preferentially targeting genes associated with SEs [84]. These results emphasize the essential role of SEs in glioma development. Thus, targeting SE-associated transcription addiction may be an effective therapeutic strategy against glioma. In this review, we will explore the role of SEs in driving protein-coding genes and non-coding genes, such as miRNA and lncRNA, in glioma as well as their mechanism for regulating the biological functions of glioma cells.

3. Protein-coding genes associated with SEs in glioma

Protein-coding genes involved in tumorigenesis have been well studied. Dysregulated gene expression mediated by transcriptional regulation promotes malignant cell proliferation and eventually leads to tumors, suggesting that the dysregulation of transcription is an important oncogenic mechanism [85,86]. Studies have reported genes that play a pivotal role in glioma, and some of these genes are regulated by SEs in the progression of glioma (Table 1). Therefore, identification of novel SE-associated molecular markers targeting glioma and understanding their molecular mechanisms are critical for the treatment of glioma.

3.1. Cluster of differentiation 47 (CD47)

CD47, which is a cell surface glycoprotein, inhibits phagocytosis by binding to the extracellular region of SIRPa on macrophages [87]. In addition, CD47 is overexpressed in all types of human tumors [88]. Betancur et al. analyzed the CD47 regulatory genome to locate CD47 distal cis-regulatory regions (enhancers or SEs), and they also analyzed H3K27ac ChIP-Seq data and found that CD47 is regulated by different sets of SEs in different tumor cell types, such as T-cell acute lymphoblastic leukemia and diffuse large B-cell lymphoma [89]. Betancur et al. also discovered that CD47-associated SEs link TNF-NFKB1 signaling to

Table 1
Protein-coding genes regulated by SEs in glioma

| Gene family | Relative expression in glioma | Cell biology | Tumors | Diseases in SEs | Identification of SEs | Ref |
|-------------|-------------------------------|------------------------------------|---|-------------------------------------|--|-----------|
| CD47 | Up-regulation | Proliferation | Glioma, pancreatic cancer, lung cancer, hepatocellular carcinoma | Pro-inflammatory in breast cancer | ChIP-seq (H3K27ac, H3K4me1) | [87–92] |
| MYC | Up-regulation | Proliferation, migration, invasion | Glioma, small lung cancer, neuroblastoma tumour, breast cancer, colorectal cancer | Osteosarcoma | ChIP-seq (H3k27ac, MYC) | [93–99] |
| EGFR | Up-regulation | Invasion, angiogenesis | Glioma, breast cancer, lung cancer, bladder cancer, prostaticancer, cervical cancer | Human, Papillomaviruses(HPV) cancer | ChIP-seq (H3K23ac, H3K4me3, H3K4me1, KDM5G), RNA-seq | [102–107] |
| c-MET | Up-regulation | Aggressiveness, invasion | Glioma, cervical cancer, breast cancer, liver cancer | Human papillomaviruses(HPV) cancer | ChIP-seq (H3K23ac, H3K4me3, H3K4me1, KDM5G) RNA-seq | [109–113] |
| GATA2 | Up-regulation | Proliferation, migration, invasion | Glioma, leukemia, prostatic cancer, non-small cell lung cancer | Huntington's disease (HD) | ChIP-seq (H3K23ac, RNAPII) RNA-seq | [114–117] |
| LDLR | Up-regulation | Proliferation | Glioblastoma, nasopharyngeal cancer, gastric cancer, small cell lung cancer | Nasopharyngeal cancer | ChIP-seq | [119–122] |
| PAK4 | Up-regulation | Proliferation, migration, invasion | Oesophageal squamous cell carcinoma, breast cancer, colon cancer, prostatic cancer | Oesophageal squamous cell carcinoma | ChIP-seq (H3K23ac) | [124–129] |

CD47 upregulation in breast cancer [89]. These results suggest that SEs affect the malignancy of tumors by upregulating the expression of CDK7 in different tumor types. It has been demonstrated that high expression of CD47 is associated with a high degree of malignancy and invasiveness in glioma [90]. Additionally, glioma cells highly enriched with CD47 have stem progenitor cell-like characteristics, and silencing CD47 in glioma results in a decrease in these characteristics [91]. A similar study has shown that knockdown of CD47 inhibits tumor growth in pediatric brain tumor models [92]. These results indicate that SEs may enhance the malignancy of glioma cells by driving the expression of CD47. Therefore, the blockade of CD47 associated with SEs may be a novel therapeutic option to target glioma stem cells.

3.2. Oncogene *c-MYC* (*MYC*)

MYC, known as a transcription factor of the helix-loop-helix-leucine zipper (HLH-LZ) family, binds DNA as part of several protein complexes [93]. A broad body of evidence has established that dysregulated MYC expression promotes the development of a variety of tumors and creates a favorable environment for the survival of tumor cells *in vivo* [94,95]. It has been demonstrated that most SE genes associated with osteosarcoma bind to MYC. In addition, the treatment of osteosarcoma cells with SE inhibitors effectively inhibits the malignant phenotype of osteosarcoma cells [96]. These results demonstrate that SE signaling driven by MYC is critical for the biological function of osteosarcoma cells. Another study has shown that MYC regulates transcriptional amplification by SEs, which is a main hallmark of cancer [97]. Recent studies have shown that MYC overexpression is positively correlated with glioma grade and that increased MYC level is observed in approximately 60-80% gliomas [98]. Inhibition of MYC represses the proliferation of tumor cells, damages cell activity, and promotes apoptosis [99]. Additionally, several studies have proposed that MYC overexpression plays a central role in glioma progression driven by a variety of different mutations [100,101]. Therefore, these studies suggest that the inhibition of MYC associated with SEs may be an effective treatment strategy for glioma.

3.3. Epidermal growth factor receptor (*EGFR*)

EGFR is a member of the ERBB transmembrane tyrosine kinase receptor family [102]. EGFR overexpression promotes tumor cell proliferation, invasion, and angiogenesis but impedes apoptosis [103,104]. Chen et al. showed that SEs promote the proliferation, migration, and invasion of tumor cells by driving EGFR overexpression [105]. It has been demonstrated that the high expression of EGFR is related to a variety of human tumors including GBM [106]. The upregulation of EGFR is associated with poor prognosis in patients with glioma [107]. Furthermore, upregulated EGFR promotes the malignant phenotype of tumors via receptor phosphorylation and downstream signaling pathway activation [108]. As the new research field of glioma is rapidly expanding, SE-driven EGFR may become a major focus for targeted cancer therapy for glioma.

3.4. Mesenchymal-epithelial transition factor (*c-MET*)

c-Met, known as a transmembrane receptor tyrosine kinase, consists of α - and β -chains linked by disulfide bonds. c-Met is activated by hepatocyte growth factor (HGF) and promotes tumor cell progression and metastasis [109]. Overexpression of c-Met is correlated with poor prognosis of patients with tumors [110]. A recent study from Chen et al. showed that epigenetic activation of SEs in the genome drives the expression of key oncogenes such as c-Met [105]. A recent study has reported that c-Met overexpression occurs in GBM and that c-Met gene amplification promotes malignancy [111]. A similar study has shown that c-Met amplification is partially associated with the aggressiveness of glioma [112]. More importantly, the upregulation of c-Met is related

| Table 2 MiRNAs regulated by SEs in glioma | | | | | |
|--|-------------------------------|------------------------------------|--|--------------------------------------|---|
| MiRNA family | Relative expression in glioma | Cell biology | Tumors | Target genes | Identification of SEs |
| miR-155 | Up-regulation | Proliferation, migration, invasion | Glioma, colorectal cancer, diffuse large B-cell lymphoma | CDX1 | ChIP-seq (BRD4, P65, RNA pol II) [137-141] |
| miR-21 | Up-regulation | Proliferation | Glioma, breast cancer, colon cancer, pancreatic cancer | SPRY1, PS3, AKT, IGFBP3 [144-148] | ChIP-seq (H4K27ac) [149-152] |
| miR-17 | Up-regulation | Proliferation | Glioma, neuroblastoma, lung cancer, colon cancer | MYC, E2F1-3, Rb12, Pten [149-152] | ChIP-seq (H3K4 me3) |

to shorter survival and poor therapeutic response for glioma [113]. Therefore, these studies suggest that c-Met driven by SEs may promote malignancy and be associated with poor clinical outcome in glioma.

3.5. GATA binding protein 2 (GATA2)

GATA proteins are TFs with central roles in early embryonic development and lineage specification [114]. GATA2, a member of the GATA protein family, is a major regulator of hematopoietic function, which involves the initial formation and maintenance of hematopoietic stem cells (HSCs) [115]. After translocation, the GATA2 enhancer region acquires the characteristics of SEs in the MOLM-1 genome [15]. A present study revealed that striatal SEs display extensive H3K27 acetylation within gene bodies and are enriched in binding motifs for GATA2 TFs [116]. Wang et al. demonstrated that high expression of GATA2 is positively related to the malignant degree of glioma. GATA2 overexpression promotes the malignant phenotype of glioma [117]. Another study has shown that GATA2 controls the expression of tumor-related blood vessels in glioblastoma and promotes angiogenesis [118]. Therefore, these results indicate that SEs may mediate the malignant phenotype of glioma cells via GATA2.

3.6. Low-density lipoprotein receptor (LDLR)

LDLR is an integral membrane protein that is abundantly expressed in the liver [119]. The characterization of SE-mediated networks in nasopharyngeal cancer has identified many novel SE-associated oncogenic transcripts, such as LDLR [120]. LDLR is highly upregulated in a variety of tumors. LDLR is also expressed in normal brain tissue and has a dual-targeting effect on the blood-brain barrier and glioma cells, making it a potential target receptor for the brain tumor drug delivery system [121,122]. Another study has shown that targeting LDLR in GBM inhibits the growth of tumor cells, thereby playing an anti-tumor role [123]. These results suggest that LDLR associated with SEs can affect the progress of glioma.

3.7. p21-activated kinases 4 (PAK4)

PAK4 is a Cdc42 effector protein that is involved in key functions in embryos, neurons, and immune defense [124]. PAK4 regulates the biological function of tumor cells dependent on actin cytoskeleton [125]. Recently, a comprehensive analysis of both SE-associated and THZ1-sensitive transcripts identified several novel esophageal squamous cell carcinoma (OSCC) oncogenes, including PAK4 [126]. A broad body of evidence has established that PAK4 is overexpressed in several types of tumors and promotes the growth of tumor cells [127,128]. Kesankurti et al. demonstrated that PAK4 is aberrantly expressed in glioma and that PAK4 knockdown decreases migration and invasion of glioma cells [129,130]. In addition, overexpression of PAK4 promotes mesenchymal transformation by upregulating Epithelial-mesenchymal transition(EMT)markers in glioma cells [131]. Therefore, these results suggest that PAK4 associated with SEs may regulate the invasion and EMT of glioma cells.

4. miRNAs associated with SEs in glioma

MiRNAs are a class of endogenous small (19-25 nucleotides) non-coding single-stranded RNAs that are involved in post-transcriptional regulation either by degrading specific RNAs or inhibiting translation [132]. The role of miRNAs in gene transcriptional regulation and cell biological function has been elucidated in many different types of tumors. As a key regulatory factor of gene expression, miRNAs play a role in proliferation, differentiation, and apoptosis. Increasing evidence suggests that dysregulated miRNAs are related to the development of tumors [133]. MiRNAs can serve as tumor suppressors or oncogenes to influence tumor progression by regulating the malignant phenotype of

Table 3
LncRNAs regulated by SEs in glioma

| LncRNA family | Relative expression in glioma | Cell biology | Tumors | Target gene | Identification of SEs | Refs |
|---------------|-------------------------------|------------------------------------|---|---|---|--------------|
| CCAT1 | Up-regulation | Proliferation, migration, invasion | Glioma, colon cancer, gastric cancer, gallbladder cancer | miR-410, miR-18b | ChIP-seq (H3K27ac), RNA-seq | [82,162-164] |
| Linc0152 | Up-regulation | Proliferation, migration, invasion | Glioma, hepatocellular carcinoma, gallbladder cancer, lung adenocarcinoma | miR-16, miR-103a-3p | ChIP-seq (TF), CRISPR/Cas9 target sites, Rank Ordering of Super-enhancer (ROSE) | [60,166-170] |
| NEAT1 | Up-regulation | Proliferation | Glioma, kidney cancer, lung cancer, ovarian cancer | miR-449-5p, miR-181b-5p, miR-132, miR-410 | ChIP-seq (H3K27ac, H3K4me1, H3K4me3) | [172-175] |

glioma cells [134–136]. Recently, several studies have found that miRNAs associated with SEs play a central role in glioma (Table 2).

4.1. miR-155

MiR-155, located on chromosome 21, is an oncogenic miRNA [137]. As a multifunctional miRNA, miR-155 plays a crucial role in a variety of physiological and pathological processes of cells. Increasing evidence suggests that miR-155 is highly expressed in many different types of tumors [138–140]. Duan et al. revealed that SEs at miR-155 target genes regulated by NF-κB and BET drive miR-155 transcription-mediated self-regulation of inflammation [141]. Sun et al. showed that upregulated miR-155 is positively correlated with the pathological grade of gliomas and that high miR-155 expression indicates a low survival rate of patients [142]. In addition, miR-155 promotes glioma progression and increases malignancy by enhancing the Wnt signaling pathway [143]. Therefore, these findings indicate that miR-155 driven by SEs may promote malignant phenotype of glioma.

4.2. miR-21

MiR-21, one of the most studied miRNAs, has been shown to be highly expressed in various types of tumors, promoting tumor progression and serving as a biomarker for tumor prognosis [144]. A previous study has reported that SEs contribute to the progression of certain tumor types by enhancing the expression of miRNAs, such as miR-21 [145]. Yang et al. reported that the upregulation of miR-21 is inversely associated with patient survival [146]. In addition, miR-21 affects molecular pathways, including RECK, insulin-like growth factor binding protein-3, and TIMP3 in glioma cells [147]. Recent studies have also demonstrated that miR-21 overexpression inhibits apoptosis and senescence of glioma cells by inhibiting the expression of PTEN, caspase-3, and caspase-9 as well as by promoting the expression of AKT, PI3K, P-AKT, and P53 [148]. These data indicate that miR-21 associated with SEs may promote the malignant phenotype of glioma by multiple signaling pathways.

4.3. miR-17

MiR-17 belongs to the miR-17/92 cluster, which is abundantly expressed during neuronal and embryonic development [149]. The oncogenic activity potential of miR-17 gene clusters was initially identified in mouse viral tumors [150]. The activating mutations of miR-17 have been observed in different types of tumors [151]. A recent ChIP-seq data analysis found that the locus of miR-17 is enriched with SEs. Moreover, SEs promote the progression of tumors by enhancing miR-17 expression [145]. MiR-17 is upregulated in glioma, and inhibition of miR-17 significantly reduces the cell viability of glioma cells and stimulates cell apoptosis [152]. Another study has demonstrated that miR-17 is highly expressed in human glioma samples and is correlated with the malignancy degree and prognosis [153]. Therefore, these studies suggest that miR-17 associated with SEs may be a potential therapeutic target of glioma.

5. LncRNAs associated with SEs in glioma

LncRNAs are RNAs longer than 200 nucleotides, and they do not have protein-coding ability [154]. LncRNAs may play a regulatory role in gene expression by serving as signal molecules, decoy molecules, guiding molecules and scaffold molecules [155]. Increasing evidence has shown that the dysregulation of lncRNAs is involved in the biological function of cells, leading to the development of tumors [156]. Additionally, lncRNAs have been correlated with invasion and metastasis in human cancers [157–159]. Several studies have shown that lncRNAs act as oncogenes, tumor suppressors or both, depending on the environment in which tumor cells are located. Recently, we found that

Table 4
Therapeutic targeting of SE-driven transcription in cancer

| Transcriptional regulators | Inhibitors | The application in cancer | Effect on SE-driven transcription | Effects of SE inhibition on tumor biology | Refs |
|----------------------------|-----------------------------------|--|---|---|--------------|
| BRD4 | JQ1, IBET, SF1126, MK-8628 | AML, breast cancer, multiple myeloma | Inhibited binding of BET bromodomains to acetylysines | Inhibited transcription of genes that sustain the aberrant growth and self-renewal properties | [181-188] |
| CDK7 | THZ11, THZ22, LDC4297, BS-181 | DIPG, multiple myeloma, melanoma, NPC, OCSS, cervical cancer | Abrogated phosphorylation of RNA pol II CTD at Ser-5 and Ser-7 | Decreased tumor cells viability and invasion | [18,188-193] |
| CDK9 | THAL-SNS-032, PHA-767491, CDKI-73 | ALL, AML, colon cancer, cervical cancer | Blocked the phosphorylation of the transcriptional elongation factor P-TEFb on the C-terminal region of RNA Poly-II | Reduced in disease progression, tumor volume and promoted apoptosis | [49,190-192] |
| CDK12 | TH2531 | T-ALL, ewing sarcoma, breast cancer, ovarian cancers | Downregulation of DNA damage response and SE-associated genes | Promoted tumor cells apoptosis | [190-192] |

several lncRNAs, including HOTAIR, MEG3, and lncRNA-ATB, are involved in the progression of glioma [160,161]. Moreover, several studies have found that lncRNAs associated with SEs may be a crucial regulator in glioma (Table 3).

5.1. Colon cancer-associated transcript 1 (CCAT1)

CCAT1, located at chromosome 8q24.21, is an ~2 kb lncRNA that was first found to be upregulated in colon cancer [162]. Xiang et al. found that CCAT1 regulated the CTCF protein to preserve chromatin cyclization between MYC enhancers and was enriched in the SE region of tumor cells [163]. A recent epigenomic analysis of SEs in squamous cell carcinoma (SCC) showed that TP63 and SOX2 co-bind to SE regions of CCAT1 [82]. Notably, CCAT1 has been found to be implicated in the pathogenesis of several types of tumors. Wang et al. demonstrated that CCAT1 expression is significantly upregulated in glioma and that CCAT1 knockdown represses cell vitality and colony formation ability in glioma [164]. Another study has reported that the upregulation of CCAT1 is related to the pathological grade and prognosis of patients with glioma [165]. Therefore, these results suggest that SE driven-lncRNA CCAT1 may be involved in the development of glioma.

5.2. Long noncoding RNA 00152 (linc00152)

Linc00152, located on chromosome 2p11.2, is a recently identified tumor-promoting long non-coding RNA [166]. A pan-cancer study has demonstrated that linc00152 expression is regulated by SEs and is strongly enriched in the SE region [60]. Wei et al. investigated the relationship between linc00152 and SEs by using the SEA database, and they suggested that linc00152 is driven by SEs [60]. Increasing evidence suggests that the aberrant expression of linc00152 contributes to the malignancy of cancers [167-169]. Chen et al. showed that linc00152 is highly expressed in glioma cells and enhances the proliferation, migration, and invasion, and they also reported that knockdown of linc00152 inhibits growth and increases apoptosis in glioma [170,171]. Therefore, these findings indicate that linc00152 associated with SEs may promote the malignant phenotype of glioma.

5.3. Nuclear paraspeckle assembly transcript 1 (NEAT1)

NEAT1 is a nuclear-enriched lncRNA that is necessary for the formation of nuclear paraspeckles [172]. A recent integrative analysis using both whole-transcriptome sequencing (RNA-Seq) and ChIP-Seq characterization of SE-mediated networks has identified many novel SE-associated oncogenic transcripts, including NEAT1, in nasopharyngeal carcinoma (NPC) [173,174]. It has been demonstrated that high expression of NEAT1 is positively correlated with the pathological grade of glioma [175]. However, knockdown of NEAT1 inhibits the malignant phenotype of glioma cells [156]. Chen et al. found that NEAT1 enhances the malignancy of glioma by activating the WNT/beta-catenin pathway [176]. Therefore, these studies suggest that NEAT1 mediated by SEs may promote the malignant phenotype of glioma.

6. SEs inhibitors and their applications in glioma

We have discussed the biological functions of SE-driven protein-coding genes and non-coding genes (miRNAs and lncRNAs) in glioma. We observed that the abnormal transcription driven by SEs can regulate malignant biological behavior of cancer cells. Moreover, we believe that cancer cells may be highly dependent on these transcriptional programs, which generates new targets for therapeutic interventions of cancers. As the core regulatory factors of gene transcription, SE complexes play key roles in the process of oncogene transcription. Increasing studies have shown that the repression of oncogenes by inhibiting SE complexes has become the most attractive target in cancer

therapy [177,178]. Interestingly, some studies have shown that the same oncogenes can form different SE structures in different tumors types [79]. However, the components of SEs are the same in different tumor cells, which allows direct inhibition of the most common components of SEs to prevent oncogenes from becoming resistant to SEs. Currently, this approach has been used in a variety of cancer models, showing great potential. It is important to further identify the composition of SEs, which will allow more inhibitors targeting the key components of SEs to be applied in cancers in the future. There is evidence that targeting these core transcriptional networks, either by knockdown by RNA interference or small molecule inhibitors, may block cancer development [179,180].

Several new drugs targeting SE complexes have been recently found to affect cellular transcription mechanisms, resulting in anti-tumor effects (Table 4). Inhibitors of SE complexes, including BRD4 and CDKs, block transcription by inhibiting RNA polymerase II or affecting covalent modification of histones [65]. Treatment of cancer cells with these inhibitors may result in acute and simultaneous repression of multiple oncogenes, thereby leading to the destruction of various carcinogenic mechanisms.

The BET family is composed of four members (BRD2, BRD3, BRD4, and BRDT), which share a C-terminal extraterminal motif and two N-terminal tandem bromodomains [181]. The BET inhibitor (BETi) is a competitive inhibitor of the BET family bromine domain, which competitively inhibits the binding of the BET bromine domain to acetylated lysine, thereby inhibiting the extension of transcription [182]. Among all of the family members, BRD4 is one of the most widely studied genes, and it plays a significant role in gene transcriptional regulation [183]. Therefore, the blockade of BET by inhibiting BRD4 is used in many studies. BRD4 inhibitors inhibit the recruitment of the positive transcriptional extension factor complex, resulting in gene transcription interruption [184]. At present, the following BRD4 inhibitors have been reported: JQ1, I-BET151, AZD5153, and MK-8628 [185,186]. A recent study has reported that JQ1 represses the transcription of oncogenes that sustain the aberrant growth and self-renewal properties in acute myeloid leukemia (AML) [187]. Additionally, JQ1 impairs the activity of DIPG cells by inhibiting SE-driven transcription [188].

Other studies have indicated that CDK7 inhibitors have become one of the powerful candidates to target oncogenic SEs [189]. CDK7 inhibitors include THZ1, THZ2, LDC4297, and BS-181 [190–192]. As a covalent inhibitor of CDK7, THZ1 inhibits transcription by eliminating CDK7-dependent phosphorylation of RNA Pol II CTD on Ser-5 and Ser-7 [193]. A recent study has reported that THZ1 treatment results in considerable disruption of global gene transcription in glioma cells, preferentially targeting SE-associated genes [18]. These studies suggest that targeting the CDK7-dysregulated transcription program with SE inhibitors may be an effective treatment strategy for glioma. Similarly, THZ1 inhibits the transcription of related oncogenes by inhibiting SEs, which ultimately results in the destruction of DIPG cell viability. Additionally, THZ1 treatment modestly increases survival in a patient-derived DIPG xenograft model [188]. However, further investigation is required to understand whether THZ1 has better brain penetration. In summary, drugs that inhibit CDK7 and BRD4, such as JQ1 and THZ1, respectively, specifically target the inhibition of SEs in tumors, providing an efficient way to treat tumors by only targeting tumor cells.

Increasing evidence suggests that SE inhibitors have great potential as selective, anti-cancer therapeutics. More studies are required to explore the mechanism of SE-driven oncogenic transcription addiction to identify new targets to block transcription to treat tumors. However, there are several problems associated with treating tumors by targeting SEs in tumor cells. As previously discussed, SEs are more sensitive to external signals than any other genomic region, and SEs control cell identity genes in both normal and diseased cells. Therefore, SE inhibitors must specifically target SEs in tumor cells without affecting SEs in normal cells, which is one of the most challenging issues in cancer treatment. Some researchers have found that most SEs are suppressed in

cells, and only a small number of active SEs determine cell identity in different cells [71,194]. Compared to normal cells, tumor cells actively assemble SEs at oncogene domains to drive oncogene expression in the process of tumorigenesis [15]. These studies suggest that the strategy of targeting SEs is feasible in some tumors, which may provide novel therapeutic options for other malignant tumors that lack good drug therapies.

Because SEs are a series of enhancer clusters, they have some similar components as typical enhancers. Therefore, the use of SE inhibitors may inhibit typical enhancers in normal cells, resulting in transcriptional suppression and activation of new oncogenes. Thus, the non-specific targeting of general transcriptional machinery may also lead to cytotoxicity in non-malignant cells. Some researchers have addressed these challenges. Treatment of multiple myeloma tumor cells with JQ1 causes BRD4 to become imbalanced in the genome, and this imbalance is more frequent in the SE region than in the typical enhancer region [15]. This phenomenon is found in other tumors, such as B cell lymphoma and colorectal cancer [14,195]. Drugs, such as JQ1 and THZ1, specifically target the inhibition of SEs in tumors, providing an efficient way to treat tumors [15,193]. Additionally, recent studies have found that SE inhibitors (CDK7 inhibitors) are highly sensitive and specific to tumor cells [196,197]. Although SE inhibitors have been studied in many tumors, the potential side effects and off-target effects of SEs have not been fully investigated. Therefore, when SE inhibitors are used to treat tumors, their inhibitory effect on these tumors as well as their possible side effects should be studied to allow avoidance of these side effects in the future. Finally, these insights are important to understand the assembly and activation of SEs to identify more candidates that inhibit SEs in glioma (Fig. 3).

7. Conclusion and prospective

In this review, we summarized recent advances in the basic concepts, characteristics, and biological functions of SEs and their identification in different cells. In addition, we described the role of the protein-coding genes and non-coding genes (miRNAs and lncRNAs) driven by SEs in glioma. We also found that SEs are specific to the tumour type, but they can regulate the same gene in different tumours. Thus, it is clear that SEs have central effects on transcriptional regulation of glioma, and these SEs have oncogenic capability depending on the environment. However, the intrinsic properties of SEs and their interactions with target genes are still poorly understood. Moreover, the role of each SE complex component and how they work together to regulate gene expression require additional research and discussion. Future studies on SEs should focus on exploring the various components of SEs in different tumor cells and how they regulate the function of SEs and affect the biological function of tumor cells. The underlying mechanism of SEs in normal development and cancer conditions remains to be elucidated.

SE-related components of the glioma cell genome can be mapped using sequencing techniques followed by gene-editing techniques to knockout individual components to investigate their cooperative roles in SEs.

Because SE complexes are shared in diverse cancer subtypes, targeting individual components of SE complexes, such as BRD4 and CDK7, may have great potential in the treatment of cancers. In addition to applying genome-editing techniques, such as CRISPR/Cas9, for the analysis of SE components, this approach may also be a novel gene therapy to target oncogenic SEs. The characteristics of SEs in glioma provide a new framework for application of inhibitors that target SEs to destroy tumor cell transcription. However, challenges still exist. Although the role of SE inhibitors has been demonstrated in many tumor subtypes, the extent of their involvement remains controversial. Targeted SEs used in cancer treatment may cause significant side effects because some tumor suppressor genes may also be blocked by SE inhibitors. Therefore, before SEs can be used as a therapeutic target for

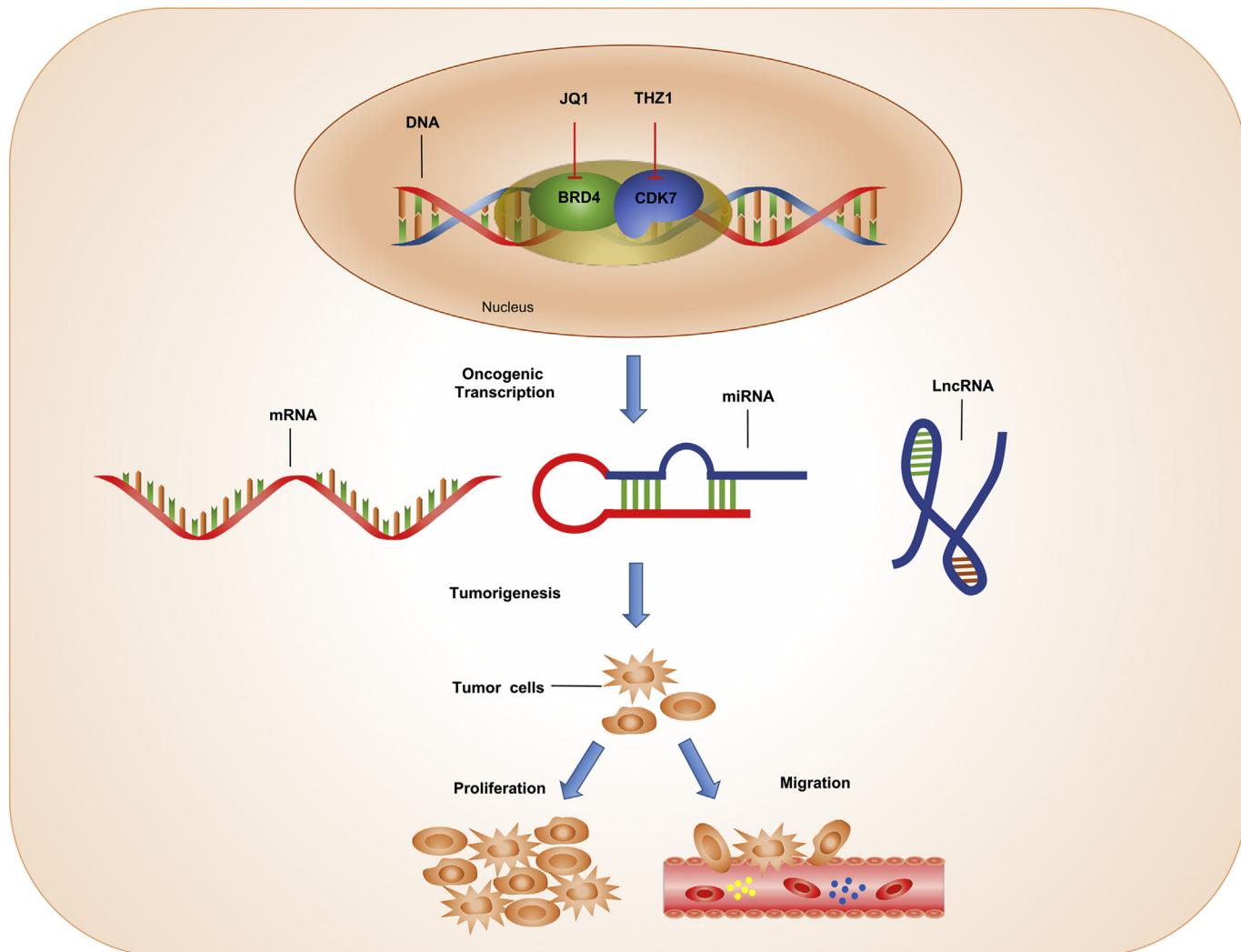


Fig. 3. Super-enhancer inhibitors block gene transcription by inhibiting the transcription factors of SE-complex.

glioma, there is an urgent need to better understand the mechanism of the addictive nature of SE-driven oncogene transcription.

High-throughput sequencing technology has revealed many SEs associated with tumors and other diseases. Despite the compelling evidence that SEs regulate cellular identity genes leading to tumors, there is insufficient genetic evidence to determine whether individual SEs determine cell fate and change specific cell types. In this review, we emphasized that SEs play underappreciated but critical roles in glioma cells. SEs may increase the malignant degree of glioma cells by regulating the overexpression of protein-coding genes and non-coding genes. Therefore, we hypothesize that SEs may regulate the biological function of glioma cells by influencing SE-associated genes or non-coding RNAs. Moreover, SEs can be used as prognostic markers to predict the progression and risk of glioma. Integrative analysis of the SE signature and gene transcription profile of the glioma genome may be a novel approach for diagnosis. In corresponding fresh glioma samples and para-cancer tissue samples, the SE landscape can be established using ChIP-Seq technology to study the changes in the SE landscape in each stage of the occurrence and development of glioma. Finally, as the research field of SEs expands, increasing numbers of SEs associated with glioma will be found. In the future, SEs may be applied in clinical practice for the diagnosis, prognosis or treatment of glioma.

Abbreviations

| | |
|----------|--|
| SEs | Super-enhancers |
| TFs | Transcription factors |
| CDK7 | Cyclin-dependent kinase 7 |
| MED1 | Mediator complex subunit 1 |
| BRD4 | Bromodomain-containing protein 4 |
| BET | Bromodomain and Extraterminal domain |
| ROSE | Rank Ordering of Super-enhance |
| WHO | World health organization |
| GBM | Glioblastoma |
| ESC | Embryonic stem cells |
| ChIP-Seq | Chromatin-immunoprecipitation sequencing |
| AML | Acute myeloid leukemia |
| SCC | Squamous cell carcinoma |
| DIPG | Diffuse intrinsic pontine glioma |
| HSCs | Hematopoietic stem cells |
| OSCC | Oesophageal squamous cell carcinoma |
| BETi | BET inhibitor |
| EMT | Epithelial-mesenchymal transition |
| NPC | Nasopharyngeal carcinoma |

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Authors' contributions

ZB and BEB conceived the idea presented, CM, JXH and ZZW collected relevant literature and drafted manuscripts, XYD modified and edited manuscripts, CM and BEB mapped these numbers, all authors have read and approved final manuscript.

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Declaration of Competing Interest

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