

Determines the glioblastoma cells spatial phenotype.

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Abstract

Glioblastoma is characterized by intra-tumoral heterogeneity, which impairs the effectiveness of treatment. However, little is known about the mechanisms underlying tumour heterogeneity and tumour cell migration. Here, we present a thorough spatiotemporal study that links dynamic characteristics and a distinct, usable spatial transcriptomic signature to oncostreams, distinctive intra-tumoral histopathological structures. Using ex vivo explants and in vivo intravital imaging, oncostreams which are dynamic multicellular fascicles of spindle-like and aligned cells with mesenchymal properties, can be found. In high grade human gliomas and genetically modified mouse glioma models, their density are inversely correlated with tumour aggressiveness. Oncostreams make it easier for tumoral and non-tumor cells to spread within tumours, potentially leading to a mass invasion of the healthy brain. These fascicles have a unique molecular signature that governs how they are organised and function. Overexpression of COL1A1 is necessary for the structure and operation of oncostreams. Col1a1 is a key gene in the dynamic setup of the glioma mesenchymal transformation and a potent regulator of the malignant nature of gliomas. Col1a1 inhibition reduces expression of the mesenchymal associated genes, induces changes in the tumour microenvironment, eliminates oncostreams, changes the malignant histopathological phenotype, and prolongs animal survival. Oncostreams are a pathological marker that may be useful for treatment, prognosis, and diagnosis.

Keywords: Glioblastoma Cells, Spatial, Phenotype

Introduction

At the histological, cellular, and molecular levels, HGG are highly heterogeneous. Additionally, distinctive pathological features like pseudopalisades, microvascular proliferation, and areas of hypoxia and necrosis serve as illustrations of the heterogeneity of HGG. Three main molecular signatures-proneural, mesenchymal, and classical-were identified through the molecular characterization of glioma heterogeneity. Later research, however, showed that each tumour expresses all three transcriptomic signatures. The consensus suggests that individual tumours are enriched in particular molecular subtypes rather than outright glioma subtypes. Therefore, studies have linked transcriptional expression patterns and histological characteristics. For instance, highly aggressive histological characteristics like hypoxic, necrotic, and microvascular proliferative zones have been linked to a poorer prognosis and the mesenchymal molecular signature [1-2].

The molecular classification, however, barely affects clinical outcomes. As a result, alternative classification schemes based on pathways are currently being thought about. It is still unknown how these new classifications will handle tumour heterogeneity. The GBM transcriptomic signature also undergoes transitions that are driven by various micro

environmental, metabolic, and therapeutic factors, particularly transitions to mesenchymal states.

However, it has remained difficult to pinpoint the cellular and molecular mechanisms that control mesenchymal transformation in gliomas, particularly with regard to the mesenchymal characteristics of invasive cells. Understanding the progression of gliomas requires integrating morphological characteristics, spatially resolved transcriptomics, and cellular dynamics brought on by mesenchymal transformation, growth, and invasion [3].

Studies on tumour motility have focused on how glioma cells behave at the tumor's edge of invasion. The possibility of motility at the glioma core has not yet been thoroughly investigated. The central core of the glioma appears to exhibit collective migratory patterns, which contradicts the conventional wisdom that these cells are immobile. This would imply that gliomas' ability to invade and spread stems from events that happen at the tumor's invasive border as well as from their general ability to coordinate mass movement from the tumor's core to its border with healthy brain tissue [4].

According to our research, malignant gliomas consistently exhibit anatomical multicellular fascicles of aligned and

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elongated, spindle-like cells. This is true for both high grade human gliomas and mouse glioma models. They may be regions of mesenchymal transformation, as we propose. We have given these areas the name "oncostreams" to make their description throughout the manuscript more straightforward. We show that oncostreams are organised collective dynamic structures using time-lapse laser scanning confocal imaging of high grade glioma explants *ex vivo* and multiphoton microscopy *in vivo*. In areas of the tumour border and at its centre, where it meets the normal brain, they are present. We use laser capture microdissection (LCM), RNA-sequencing, and bioinformatics analysis to investigate the molecular mechanisms underlying oncostream organisation and function [5].

Conclusion

We found that the mesenchymal transformation signature of oncostreams is enriched in proteins related to the extracellular matrix, which suggests that COL1A1 is a critical factor in the organisation of oncostreams. Coll1a1 inhibition in glioma cells caused oncostream loss and altered the HGG's highly aggressive phenotype. These results suggest that COL1A1 organises areas of collective motion in gliomas and contributes to the scaffold of the tumour microenvironment. We offer a thorough analysis of the histological, morphological, and dynamic characteristics of glioma tumours. We also describe the molecular processes that lead to intra-tumoral

mesenchymal transformation in gliomas and talk about the therapeutic implications of these processes. Oncostreams have unique anatomical and molecular characteristics, control glioma growth, exhibit collective motion, and are influenced by the extracellular matrix, particularly by and, in particular, by COL1A1, are controlled by the extracellular matrix. A possible therapeutic approach to prevent glioma mesenchymal transformation, intra-tumoral heterogeneity, and glioma invasion and growth is to inhibit Coll1a1 within glioma cells

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