

# 丙酮酸激酶M2型在非小细胞肺癌中的作用

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**[摘要]** 肺癌是目前全球最常见的病死原因之一,其中,非小细胞肺癌(NSCLC)占有肺癌的85%。丙酮酸激酶(PK)是糖代谢中的关键酶,调控磷酸烯醇式丙酮酸向丙酮酸转化速率,存在四种亚型,其中丙酮酸激酶M2型(PKM2)主要存在于具有高合成代谢要求的高增殖细胞,尤其是肿瘤和胚胎组织中。PKM2可以调控肿瘤细胞的有氧糖酵解过程,并能转移至细胞核内参与调控多种促癌因子的表达。PI3K/AKT信号通路在细胞生长、增殖、分化、生存和代谢等多个生物学过程中发挥着至关重要的作用。PKM2可以通过与PI3K/AKT通路的相互作用参与NSCLC的发生、发展。本文针对PKM2在非小细胞肺癌中作用及其调节机制的研究进展进行综述。

**[关键词]** 丙酮酸激酶M2型;非小细胞肺癌;能量代谢;AKT信号通路

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## The role of pyruvate kinase M2 in non-small cell lung cancer

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**[Abstract]** Lung cancer is one of the most common causes of death in the world, among which non-small cell lung cancer (NSCLC) accounts for 85% of all lung cancers. Pyruvate kinase (PK) is a key enzyme in glucose metabolism, which regulates the conversion rate of phosphoenolpyruvate to pyruvate. There are four subtypes, among which pyruvate kinase M2 (PKM2) mainly exists in highly proliferative cells with high anabolic requirements, especially in tumors and embryonic tissues. PKM2 can regulate the aerobic glycolysis process of tumor cells and be transferred to the nucleus to participate in regulating the expression of various cancer-promoting factors. PI3K/AKT signaling pathway plays an important role in many biological processes such as cell growth, proliferation, differentiation, survival and metabolism. PKM2 can participate in the occurrence and development of NSCLC through the interaction with PI3K/AKT pathway. In this paper, the role of PKM2 in non-small cell lung cancer and its regulatory mechanism are reviewed.

**[Key words]** Pyruvate kinase M2; Non-small cell lung cancer; Energy metabolism; AKT signal pathway

肺癌是导致全球范围内癌症相关病死的首要因素,其发病率及病死率均位于前列<sup>[1]</sup>,肺癌分为小细胞肺癌、非小细胞肺癌(non-small cell lung cancer,

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NSCLC);蛋白激酶B/丝氨酸/苏氨酸激酶(protein kinase B, PKB/AKT)信号通路,是磷脂酰肌醇3-激酶/AKT(phosphoinositide 3-kinase/AKT, PI3K/AKT)通路的一部分,其是细胞生长、增殖和迁移的关键调节因子,与肿瘤发生、发展密切相关<sup>[2]</sup>。丙酮酸激酶M2型(pyruvate kinase M2, PKM2)作为糖酵解过程中的关键限速酶<sup>[3]</sup>,参与肿瘤细胞的生长、增

殖、转移等过程<sup>[4]</sup>,并可作为 AKT 信号通路的下游靶基因参与肿瘤细胞生理过程。

## 1 AKT通路、PKM2与NSCLC

### 1.1 NSCLC

肺癌起源于气管、支气管黏膜或腺体,是常见恶性肿瘤之一,高病死率与发病率使其成为全球范围内负担最重的恶性肿瘤之一,其中,NSCLC 约占 85%<sup>[1]</sup>。当前,临床上针对 NSCLC 的治疗方法多样,但肺癌治疗中的耐药性问题仍未得到有效解决,导致治疗及预后不良。因此,研究 NSCLC 的增殖、扩散、转移、耐药性以及寻找可能的治疗靶点,在提高治疗效果、生存率及延长生存时间等方面具有重大意义。

### 1.2 AKT通路

AKT 是一种丝氨酸 / 苏氨酸激酶,对多种细胞功能发挥关键作用,如细胞生长周期、细胞代谢、基因转录及蛋白质合成等。AKT 可以通过各种信号激活<sup>[5]</sup>,其中 PI3K/AKT 信号通路是目前研究最多的调控通路<sup>[6]</sup>。研究认为,在多种恶性肿瘤中普遍存在 PI3K/AKT 通路的异常激活,与患者的预后不良有显著相关性<sup>[7]</sup>;深入研究发现,PI3K/AKT 信号转导能够引起许多下游信号通路的活化<sup>[2]</sup>,这些通路参与细胞增殖、细胞周期、细胞凋亡等生物功能。

### 1.3 PKM2

丙酮酸激酶(pyruvate kinase, PK)是细胞代谢的关键酶,促进磷酸烯醇式丙酮酸、二磷酸腺苷之间不可逆的磷酸化反应,产生磷酸酯和三磷酸腺苷<sup>[8]</sup>。细胞中 PK 存在四种亚型:丙酮酸激酶 L 型、丙酮酸激酶 R 型、丙酮酸激酶 M1 型和 PKM2<sup>[4]</sup>,每种亚型具有不同的生物学功能和分布特点。PKM2 主要存在于肿瘤、胚胎组织等具有高合成代谢要求的细胞中<sup>[5]</sup>,其具有两种形式,即高活性四聚体、低活性二聚体。PKM2 在肿瘤细胞中高表达有多种原因<sup>[9]</sup>。肿瘤细胞中,PKM2 优先表达为低亲和力二聚体形式,使得磷酸烯醇类物质积累,为肿瘤细胞增殖提供能量基础促进生长和扩散;而在缺氧、营养不良状态时,PKM2 会以高亲和力四聚体形式表达,以维持其存活、生长和增殖;此外,PKM2 还参与了癌相关基因的转录,影响肿瘤发生发展<sup>[10-13]</sup>。

## 2 PI3K/AKT通路在NSCLC中的作用

### 2.1 PI3K/AKT信号通路

PI3K/AKT 通路是细胞内关键信号传导途径之一,通过一系列下游底物的丝氨酸或苏氨酸磷酸化介导来响应细胞外信号,进而影响细胞代谢、细胞增殖、细胞存活、细胞生长和血管生成<sup>[12-13]</sup>,涉及的关键基因是 PI3K 和 AKT。PI3K 由 p85 调节

亚基和 p110 催化亚基构成。当细胞接收到外来信号,配体与受体结合,受体激活 p85 并招募 p110,催化磷脂酰肌醇二磷酸生成磷脂酰肌醇三磷酸(phosphatidylinositol-3,4,5-trisphosphate, PIP3); PIP3 作为第二信使招募磷酸肌醇依赖性蛋白激酶-1(phosphoinositide-dependent protein kinase 1, PDK1)和 AKT 蛋白到质膜上,使 PDK1 磷酸化 AKT 蛋白的 308 号位的苏氨酸,导致 AKT 部分活化,当哺乳动物雷帕霉素靶蛋白复合体 2 磷酸化 473 号位的丝氨酸时,可激发 AKT 完全的酶活性<sup>[14]</sup>。由于 PI3K/AKT 通路这种特殊的激活过程,许多肿瘤增殖、代谢的相关研究着眼于拮抗 PI3K 和 AKT,通过抑制 AKT 磷酸化、去磷酸化,降低细胞中的 AKT 磷酸化水平,从而阻断 PI3K/AKT 信号通路。

### 2.2 PI3K/AKT下游蛋白及其细胞效应

PI3K/AKT 通路的细胞内效应主要与其下游蛋白功能相关。AKT 激活后会磷酸化其下游靶标<sup>[2,9]</sup>,如泛素蛋白连接酶 2、结节性硬化症蛋白复合体 2、糖原合成酶激酶-3、叉形头转录因子 O 型、雷帕霉素靶蛋白等,通过其下游蛋白的功能调控细胞的生长、存活、增殖、糖代谢等一系列生命活动,进而参与癌症、心血管疾病、糖尿病及神经系统疾病的发生发展<sup>[15]</sup>。

### 2.3 PI3K/AKT信号通路在NSCLC中的作用

肺癌细胞通过 PI3K/AKT 信号通路促进内皮细胞管的形成和存活,为肿瘤的生存和生长创造有利条件<sup>[16]</sup>,并参与肿瘤耐药性的产生<sup>[17]</sup>。呼吸道恶性肿瘤中 PI3K/AKT 信号通路的异常激活现象表明,该通路在呼吸道恶性肿瘤的进程中起重要作用,并且与患者的不良预后有着显著关联<sup>[18]</sup>。同时,在 NSCLC 的表皮生长因子受体(epidermal growth factor receptor, EGFR)突变体中,作为 EGFR 的下游信号,PI3K/AKT 通路被显著激活。而使用 EGFR 酪氨酸激酶抑制剂治疗后,PI3K/AKT 活性可被抑制,细胞增殖能力显著降低<sup>[19]</sup>。因此,干预 PI3K/AKT 信号通路可能是探索 NSCLC 的有效治疗方法的基点<sup>[17-20]</sup>。

## 3 PI3K/AKT信号通路中PKM2的作用

PKM2 可通过调节有氧糖酵解途径调节多种细胞内信号转导<sup>[11-13]</sup>。并且有研究认为,除在糖酵解途径中的作用,PKM2 可作为关键下游介质,介导 PI3K/AKT 通路转导,参与调控细胞生长、增殖、存活<sup>[21-22]</sup>、自噬、迁移<sup>[23]</sup>、凋亡<sup>[24]</sup>等多种细胞效应过程。PKM2 的减少可抑制 PI3K/AKT 通路,而抑制 PI3K/AKT 通路可反向减弱 PKM2 表达<sup>[25]</sup>。同时,PKM2 可与信号传导及转录蛋白<sup>[26]</sup>、缺氧诱导因子-1 $\alpha$ <sup>[27]</sup>、转录因子<sup>[28]</sup>等 PI3K/AKT 下游蛋白相结合,参与 PI3K/AKT 通

路不同细胞效应过程。因此,PKM2可作为PI3K/AKT通路的研究靶点,为临床提供更加深入理解肿瘤的视角,为抗肿瘤药物研发指引新路径。

#### 4 PKM2在NSCLC中的研究

##### 4.1 PKM2促进NSCLC增殖、转移

NSCLC组织中PKM2高表达,与预后呈负相关<sup>[29]</sup>。PKM2不仅可以通过改变表达形式和影响肿瘤微环境促进增殖和转移;在缺氧条件下,PKM2蛋白会在外泌体中表达上调,直接转运至肿瘤细胞参与糖代谢,同时影响肿瘤微环境加速癌变<sup>[30]</sup>,敲除PKM2基因后NSCLC中增殖、迁移、侵袭和糖酵解等细胞效应显著抑制<sup>[31]</sup>。NSCLC细胞可向细胞外释放PKM2,激活PI3K/AKT信号通路,从而导致E-钙黏蛋白表达下调,并促进N-钙黏蛋白等基因的表达,促进细胞迁移、转移<sup>[32]</sup>。PKM2可以与PI3K/AKT通路相互作用,利用各种AKT下游靶向蛋白的作用参与NSCLC细胞的发生、发展。同时有研究表明,PKM2在肺癌干细胞中高表达,促进肿瘤干细胞增殖<sup>[33]</sup>。线粒体在生命过程中发挥多种功能,包括控制应激反应、细胞信号调节和细胞凋亡<sup>[34]</sup>。在线粒体中,四聚体PKM2在高氧化态下抑制细胞线粒体途径凋亡<sup>[35]</sup>。

##### 4.2 PKM2促进NSCLC耐药

PKM2的过表达可能与NSCLC耐药性有关。抑制PKM2,可以逆转、去分化NSCLC细胞,提高细胞对药物的反应敏感性<sup>[22]</sup>且有助于NSCLC细胞在体外和体内的放射敏感性<sup>[36]</sup>。因此,PKM2有可能成为针对肺癌及其他特定表达PKM2的恶性肿瘤的有效治疗新靶点,为恶性肿瘤的治疗提供了新的可能性。

#### 5 总结与展望

当前,NSCLC的发病率仍逐年上升,尽管各新生检测技术在早期筛查诊断中推广、各种创新性治疗方案在临床中使用,但由于肿瘤晚期化疗、靶向治疗、免疫治疗耐药等原因,NSCLC病死率仍居高不下。如何高效的早期初筛、诊断,以及挖掘新的治疗靶点迫在眉睫。肿瘤的强代谢适应性、易产生耐药性,是肿瘤细胞难以消灭的关键因素,其中PKM2表达与活性调控在此过程中发挥重要作用。尽管大量研究表明,PKM2在肿瘤细胞中的表达水平较高,但其尚未被充分利用于临床实践,其在早期诊断中的潜力仍有待进一步挖掘。PKM2作为肿瘤代谢及其调控的核心分子,目前针对性治疗研究尚显不足,动物实验与临床试验的数量较少且研究深度有限,细胞实验的结果也缺乏系统性的归纳与总结。因此,针对PKM2的药物研发及其机制的研究对于NSCLC的治疗具有重要意义。

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