

Nuclear Receptors as Potential Pharmacological Targets for Colorectal Cancer Therapy via Regulating Wnt/ β -catenin Signaling

AUTHORS:

Jihuan Hou^a,
Xiaolin Xu^a,
Yanyan Zhan^{*}
Tianhui Hu^{*}

AUTHORS Note:

Cancer Research Center,
Xiamen University Medical College,
Xiamen 361102, China

^a These authors contribute equally to this work.

*** Corresponding authors:**

Yanyan Zhan (yyzhan@xmu.edu.cn)

Tianhui Hu (thu@xmu.edu.cn)

Abstract

Hyperactivation of the Wnt/ β -catenin signaling pathway due to mutations in its components initiates the majority of colorectal cancer (CRC) cases and promotes CRC development.

Unphosphorylated β -catenin accumulates in the nucleus and interacts with TCF/LEF factors to stimulate the transcription of the downstream target genes of Wnt/ β -catenin signaling. Therefore, the suppression of dysregulated Wnt/ β -catenin signaling is considered as a promising strategy for CRC therapy. In the past decade, accumulating evidence revealed that nuclear receptors (NRs) modulated Wnt/ β -catenin signaling activity via binding to diverse members of this pathway. In this review, we mainly focus on the regulation and the underlying mechanisms of Wnt/ β -catenin signaling by NRs and their ligands or pharmacological modulators. Their potential in the precise treatment and individualized therapy for colorectal cancer is also discussed.

Nuclear Receptors as Potential Pharmacological Targets for Colorectal Cancer Therapy via Regulating Wnt/ β -catenin Signaling

Introduction

Nuclear receptors (NRs) are ligand-dependent transcription factors, with wide distributions in biological organisms. NRs regulate gene expression, activating or preventing the transcription of specific target genes, and thus play important roles in cell growth, proliferation and metabolism, etc. (1-4). Till now, 48 members of human NR superfamily have been found (5). The structures of NRs are conservative, mainly composed of four domains with different functions, namely A/ B, C, D and E. The N-terminal A/B domain is cis-activated in a ligand-independent manner. The conserved C domain (DNA-binding domain, DBD) is a characteristic area of NRs, which determines its DNA binding activity and the selection of binding partners. D domain is a flexible hinge area with nuclear location information, which connects C and E domains. E domain is the ligand binding domain (LBD) (6, 7). After their corresponding ligands binding to the LBD, NRs form homologous or heterologous dimers, and transcriptionally regulate the expression of the downstream genes.

Wnt gene was originally found in murine breast cancer research. The activation of Wnt gene depended on the insertion of mouse mammary tumor virus gene, so it was named *Int1* gene. The following research demonstrated that the *Int1* gene was essential in the mouse embryonic development, which was the equivalent of the Wingless gene (Wingless) in fruit flies. Thus, the names of *Int1* and Wingless were harmoniously known as Wnt (8). The Wnt pathways were involved in embryonic development, tissue homeostasis and cellular cancerization (9-11). Hyperactivation of the Wnt signaling pathway due to mutations in its components initiates most cases of colorectal cancer (CRC) and promotes CRC development (12). β -catenin is a key protein of the Wnt pathway. Activated Wnt pathway impedes GSK-3 β -induced phosphorylation and the following degradation of β -catenin, resulting in the

accumulation of β -catenin in the nucleus, which then binds to the transcription factor TCF/LEF (13, 14) and initiates the transcription of target genes (15, 16). The abnormality of Wnt pathway promotes the development of cancer as a great majority of these target genes play critical roles in multiple cellular functions, including cell cycle regulation and epithelial-mesenchymal transition (EMT) (17, 18). Therefore, the inhibition of hyperactivated Wnt signaling is regarded as a promising strategy for CRC therapy.

A large number of studies have shown that NRs regulate the Wnt signaling pathway in CRC (19). Some small molecule compounds, ligands or modulators of NRs, have also been identified to regulate Wnt signaling via NRs mediation (20, 21). Recently, our studies also demonstrated that berberine, an isoquinoline alkaloid isolated from traditional Chinese medicine *Coptis chinensis*, inhibited Wnt/ β -catenin signaling pathway via binding to RXR α and thus decelerated the CRC progression. The underlying mechanisms were also revealed, which might provide new strategies for berberine's application in CRC therapies.

Nuclear receptors and Wnt / β -catenin

NRs are ligand-activated transcription factors that bind to the specific response element on the promoter of their target genes. NRs function mainly in three ways: (i) directly interact with the corresponding DNA response elements and modulate the transcription level of their target genes, (ii) mediate by protein-protein interaction, and (iii) regulate via different subcellular localization (22-24). In recent years, a series of great breakthrough has been made in the mechanism research of NR signal transduction. NRs' regulatory effects on Wnt/ β -catenin have also been further studied. It has been reported that a variety of NRs directly bind with β -catenin or TCF4, restrain β -catenin/TCF/LEF compound formation, resulting in the inhibition of the transcriptional activity of downstream target genes and the

Nuclear Receptors as Potential Pharmacological Targets for Colorectal Cancer Therapy via Regulating Wnt/ β -catenin Signaling

consequent promotion of CRC development.

1. RXR α and Wnt/ β -catenin

RXR α is one of the most important members in NRs. RXR α , in the form of homologous or heterologous dimer, is involved in multiple signaling pathways in cells. RXR α has close relationship with many diseases, such as cancer, metabolic syndrome, and so on (25, 26). So far, many RXR α agonists have been found, such as retinol, 9-*cis*-retinoic acid (9-*cis*-RA), docosahexaenoic acid (DHA), fatty acids (FAs), arachidonic acid (AA), oleic acid, bexarotene, AGN194204, etc. (7, 27). In recent studies, RXR α and its ligands or pharmacological modulators were found to regulate Wnt/ β -catenin pathway. RXR α was found to directly bind to β -catenin to induce the degradation of β -catenin in colorectal cancer cells, thus inhibiting the transcription of Wnt/ β -catenin downstream genes and ultimately affecting CRC cell cycle progression (28). This report was further confirmed by the observation that retinol enhanced the interaction between RXR α and β -catenin and promoted the transport of β -catenin into cytoplasm to undergo degradation (29). In APC- and P53-mutated CRC cell lines, RXR α agonist AGN194204 inactivates Wnt/ β -catenin signaling via RXR α mediation (20). Besides, RXR α expression decreased while β -catenin expression increased at both mRNA and protein levels in CRC tissues as compared to the adjacent normal colon tissues; moreover, the lower-expression of RXR α was significantly associated with TNM classification of CRC (30). Our recent studies also found that berberine directly bound to RXR α to promote the interaction between RXR α and β -catenin, which led to the degradation of nuclear β -catenin and thus inhibited the transcription of Wnt signaling downstream genes, therefore arrested the cell cycle at G2/M phase and inhibited the proliferation of colon cancer cells (unpublished data).

2. VDR and Wnt/ β -catenin

Vitamin D receptor (VDR) plays an important role in the regulation of bone

mineral homeostasis, disease prevention and cancer (31, 32). Agonists of VDR include lithocholic acid (LCA), vitamin D3 (1, 25-dihydroxyvitamin D3) and its derivatives, phenyl-pyrrole-based pentane derivatives, etc. (33, 34). Recent researches showed that VDR inhibited CRC progression via targeting to Wnt/ β -catenin pathway. VDR agonists, vitamin D3 and LCA, significantly promoted the interaction between VDR and β -catenin, down-regulated the transactivational activity of β -catenin/TCF and finally inhibited the expression of downstream target genes (35). Knocking down VDR accumulated β -catenin in the nucleus and raised the expression of downstream target genes in colon cancer cells; meanwhile, systemic knockout of VDR blocked vitamin D3-mediated β -catenin translocation from the nucleus to the cell membrane (35). Tumors of *Apc*^{min/+}*Vdr*^{-/-} mice had increased nuclear β -catenin and the volume of these tumors was larger than that in *Apc*^{min/+}*Vdr*^{+/+} mice (36). VDR expression was down-regulated by the transcription factor snail (37, 38); in snail-expressed colorectal cancer cells, vitamin D3-induced Wnt/ β -catenin inhibition and E-cadherin expression were eliminated (39). Vitamin D3 promoted the interaction between VDR and β -catenin to suppress the transactivational activity of β -catenin/TCF (21, 40, 41). In *Apc*^{min/+} mice, vitamin D and its analogs down-regulated the nuclear β -catenin, decreased the expression of downstream target genes, and reduced the number of tumors (42, 43).

3. PPAR and Wnt/ β -catenin

Peroxisome proliferator-activated receptor (PPAR) is related to fat cell differentiation, metabolism, inflammation and cancer (44, 45). PPAR was named mainly because that it could be activated by fatty acids-like compound peroxisome proliferator. Agonists of PPAR include fatty acids, 15d-PGJ2, thiazolidinedione (TZD), isosilybin A and L312, etc. (46, 47).

It has been reported that PPAR γ interacted with β -catenin (48). In the process of fat formation, PPAR γ targeted

Nuclear Receptors as Potential Pharmacological Targets for Colorectal Cancer Therapy via Regulating Wnt/ β -catenin Signaling

β -catenin and induced its degradation to suppress the Wnt signaling pathways (49). The agonists of PPAR γ inhibited the β -catenin signals independently on the transactivational activity of PPAR γ (50). PPAR γ decreased the expression of downstream genes of Wnt/ β -catenin signaling in gastric cancer cells (51). In mice treated with PPAR γ agonist pioglitazone or rosiglitazone, the length of the colon fossae and the proliferation of colon epithelial cell were significantly suppressed. PGJ2-activated PPAR γ inhibited the transcription mediated by β -catenin/TCF in colon cancer cells (52). PPAR γ inhibited β -catenin expression in the *Apc*^{+/-1638N} mice, and impeded the occurrence and development of colon cancer (53).

4. LXR and Wnt/ β -catenin

Liver X receptor (LXR) play important roles in the process of cholesterol, fatty acids and glucose metabolism (54, 55). The agonists of LXR include T0901317, GW3965, GSK9772, etc. (56, 57). The activation of LXR by T0901317 inhibited the cell proliferation of prostate and breast cancer, and the effect of T0901317 directly correlated with LXR α expression levels (58). T0901317 influenced the formation of β -catenin/TCF/LEF complex by activating LXR, and prevented the transactivational activity of this complex (59). LXR agonist GW3965 inhibited cell proliferation and induced apoptosis in colon cancer cells (60). T0901317 or GW3965 binding to LXR promoted the interaction between LXR and β -catenin in HCT116 cells, which did not affect the mRNA expression or the degradation of β -catenin but changed the formation of β -catenin/TCF/LEF complex, leading to the suppression of the transactivational activity of this complex and the inhibition of cell proliferation (61).

5. TR3 and Wnt/ β -catenin

Orphan receptor TR3, also called Nur77, regulates tumor development, metabolic disease and cardiovascular disease (62-64). In recent years, some agonists of TR3 were identified, including

Csn-B and THPN (65, 66). TR3 was also reported to regulate Wnt/ β -catenin pathway. In CRC cells, degradation of β -catenin protein was induced by TR3, which required both the interaction between TR3 and β -catenin and TR3 shuttling from nucleus to cytoplasm (67). TR3 inhibited the development of CRC by down-regulating the Wnt signaling pathways in the *Apc*^{min/+} mice models, through binding to β -catenin and TCF4 and influencing the assembly of β -catenin/TCF/LEF complex; moreover, Csn-B inhibited the Wnt signal via TR3 (68).

6. HNF4 α and Wnt/ β -catenin

Hepatocyte nuclear factor 4 α (HNF4 α), one of the orphan receptors, is involved in the physiological process of cell metabolism, differentiation and cancer development (69-71). The mRNA and protein levels of HNF4 α was significantly lower in the clinical samples of colon cancer compared to the adjacent normal colon tissues, and was significantly associated with clinical outcomes. In xenograft tumor experiment in nude mice using CRC cell line HT29, HNF4 α inhibited the growth and liver metastasis of xenograft tumor; in CRC cells, HNF4 α competed with β -catenin to interact with TCF4, resulting in the suppression of assembly of β -catenin/TCF/LEF complex and cell growth (72). The nuclear β -catenin was increased by 50% in *Hnf-4a*^{int Δ} mice compared with that in *Hnf-4a*^{loxP/loxP} mice; Wnt downstream target genes were subsequently raised by accumulated nuclear β -catenin (73). Over-expressed HNF4 α improved the transcriptional activity of TOP/FOP report gene in HCT116 colorectal cancer cells (73). However, β -catenin protein level in intestinal crypt cell cytoplasm had no significant change in *Hnf-4a* intestinal deleted mice (73).

Discussion

NRs interact with Wnt signaling pathway in colon cancer mainly through two approaches: (i) NRs directly interact with nuclear β -catenin in colon cancer

Nuclear Receptors as Potential Pharmacological Targets for Colorectal Cancer Therapy via Regulating Wnt/ β -catenin Signaling

cells and β -catenin is guided out of the nucleus and degraded by protease, which inhibit the expression of the Wnt downstream target genes. (ii) NRs interact with TCF4 to inhibit β -catenin/TCF4/LEF complex formation independently on β -catenin degradation. The binding of the corresponding agonists to NRs enhanced the effects of NRs on the regulation of Wnt/ β -catenin signaling and development of CRC. Notably, the pharmaceuticals targeting NRs are the second leading approved medicines by FDA, accounting for 13% of all FDA approved 20000 drugs in 2006 (74). Therefore, the exploration of molecular mechanism and optimization of small molecule agonists targeting NRs in Wnt pathway may provide theoretical basis for their future application in the CRC treatment.

Nuclear receptors usually function as homodimers or heterodimers. It was proposed that the combined use of different NR agonists may be significantly superior to single agonist in cancer treatment. It has been reported that the phosphorylated RXR α accumulated in colon cancer cells and tissues (75). The single use of 9-cis-RA (the agonist of RXR α) does not change the phosphorylation levels of RXR α (75). However, the combined use of 9-cis-RA and ciglitazone (an agonist of PPAR) can synergistically reduce the phosphorylation of RXR α , leading to the activation of the promoter of PPARs and the inhibition of the activity of AP-1 promoter and the expression of COX2 and C-JUN, which then inhibited cell growth and induced apoptosis (75). LGD1069 (an agonist of RXR α) in combination with rosiglitazone

(PPAR γ agonist) synergistically activated the transcription of a serial of genes including S100A2 in A375(DRO) melanoma cells remarkably (76).

Since multiple NRs and their ligands or pharmacological modulators regulate Wnt pathway, it would make great sense to further explore whether they showed synergistically effect on Wnt/ β -catenin signaling, as well as the underlying mechanisms. If so, the combined treatments with NRs agonists would have significant advantages for CRC treatment by targeting Wnt/ β -catenin signaling.

Together, the clarification of NR-related molecular mechanisms in CRC, as well as the optimization of ligands or pharmacological modulators targeting NR-Wnt signaling and the exploration for the potential combined use of these agents will provide new strategies for the precise treatment and individualized therapy of colorectal cancer.

Conflict of interest

The authors declare no competing financial interests.

Acknowledgements

We Thanks Dr. Ying Shi for her kind help with the manuscript preparation. This work was supported by the grants from the National Natural Science Foundation of China (U1405228 and 81572589), the Natural Science Foundation of Fujian grant (2014J07010, 2015R1036-1, 2016R1034-1 and 2016R1034-4), and the Fundamental Research Funds for the Central Universities (20720150058).

Nuclear Receptors as Potential Pharmacological Targets for Colorectal Cancer Therapy via Regulating Wnt/ β -catenin Signaling

References

- [1] Hollman DA, Milona A, van Erpecum KJ, et al. Anti-inflammatory and metabolic actions of FXR: insights into molecular mechanisms. *Biochimica et Biophysica Acta (BBA)-Molecular and Cell Biology of Lipids*. 2012; 1821(11):1443-52.
- [2] Barbier O, Torra IP, Duguay Y, et al. Pleiotropic actions of peroxisome proliferator-activated receptors in lipid metabolism and atherosclerosis. *Arteriosclerosis, Thrombosis, and Vascular Biology*. 2002; 22(5):717-26.
- [3] Pascual-García M, Valledor AF. Biological roles of liver X receptors in immune cells. *Archivum immunologiae et therapiae experimentalis*. 2012; 60(4):235-49.
- [4] Wu Y, Yu D-d, Yan D-l, et al. Liver X receptor as a drug target for the treatment of breast cancer. *Anti-cancer drugs*. 2016; 27(5):373-82.
- [5] Xiao X, Wang P, Chou K-C. Recent progresses in identifying nuclear receptors and their families. *Current topics in medicinal chemistry*. 2013; 13(10):1192-200.
- [6] Helsen C, Claessens F. Looking at nuclear receptors from a new angle. *Molecular and cellular endocrinology*. 2014; 382(1):97-106.
- [7] Dawson MI, Xia Z. The retinoid X receptors and their ligands. *Biochimica et Biophysica Acta (BBA)-Molecular and Cell Biology of Lipids*. 2012; 1821(1):21-56.
- [8] Korzh V. Winding roots of Wnts. *Zebrafish*. 2008; 5(3):159-68.
- [9] Sugimura R, Li L. Noncanonical Wnt signaling in vertebrate development, stem cells, and diseases. *Birth Defects Research Part C: Embryo Today: Reviews*. 2010; 90(4):243-56.
- [10] Reya T, Clevers H. Wnt signalling in stem cells and cancer. *Nature*. 2005; 434(7035):843-50.
- [11] Logan CY, Nusse R. The Wnt signaling pathway in development and disease. *Annu Rev Cell Dev Biol*. 2004; 20:781-810.
- [12] Powell SM, Zilz N, Beazer-Barclay Y, et al. APC mutations occur early during colorectal tumorigenesis. *Nature*. 1992; 359(6392):235-7.
- [13] Behrens J, von Kries JP, Kühl M, et al. Functional interaction of β -catenin with the transcription factor LEF-1. *Nature*. 1996; 382(6592):638-42.
- [14] Molenaar M, Van De Wetering M, Oosterwegel M, et al. XTcf-3 transcription factor mediates β -catenin-induced axis formation in *Xenopus* embryos. *Cell*. 1996; 86(3):391-9.
- [15] He T-C, Sparks AB, Rago C, et al. Identification of c-MYC as a target of the APC pathway. *Science*. 1998; 281(5382):1509-12.
- [16] Tetsu O, McCormick F. β -Catenin regulates expression of cyclin D1 in colon carcinoma cells. *Nature*. 1999; 398(6726):422-6.
- [17] He L, Lu N, Dai Q, et al. Wogonin induced G1 cell cycle arrest by regulating Wnt/ β -catenin signaling pathway and inactivating CDK8 in human colorectal cancer carcinoma cells. *Toxicology*. 2013; 312:36-47.
- [18] Yang M, Li S-N, Anjum KM, et al. A double-negative feedback loop between Wnt- β -catenin signaling and HNF4 α regulates epithelial-mesenchymal transition in hepatocellular carcinoma. *J Cell Sci*. 2013; 126(24):5692-703.
- [19] Mulholland DJ, Dedhar S, Coetzee GA, et al. Interaction of nuclear receptors with the Wnt/ β -catenin/Tcf signaling axis: Wnt you like to know? *Endocrine reviews*. 2005; 26(7):898-915.
- [20] Xiao J-H, Ghosn C, Hinchman C, et al. Adenomatous polyposis coli (APC)-independent regulation of β -catenin degradation via a retinoid X receptor-mediated pathway. *Journal of Biological Chemistry*. 2003; 278(32):29954-62.
- [21] Palmer HG, González-Sancho JM, Espada J, et al. Vitamin D3 promotes the differentiation of colon carcinoma cells by the induction of E-cadherin and the inhibition of β -catenin signaling. *The Journal of cell biology*. 2001; 154(2):369-88.
- [22] Cao X, Liu W, Lin F, et al. Retinoid X receptor regulates Nur77/TR3-dependent apoptosis [corrected] by modulating its

Nuclear Receptors as Potential Pharmacological Targets for Colorectal Cancer Therapy via Regulating Wnt/ β -catenin Signaling

- nuclear export and mitochondrial targeting. *Molecular and cellular biology*. 2004; 24(22):9705-25.
- [23] Zhang X-k. Targeting Nur77 translocation. *Expert opinion on therapeutic targets*. 2007; 11(1):69-79.
- [24] Lin X-F, Zhao B-X, Chen H-Z, et al. RXR α acts as a carrier for TR3 nuclear export in a 9-cis retinoic acid-dependent manner in gastric cancer cells. *Journal of cell science*. 2004; 117(23):5609-21.
- [25] Ahuja H, Szanto A, Nagy L, et al. The retinoid X receptor and its ligands: versatile regulators of metabolic function, cell differentiation and cell death. *Journal of biological regulators and homeostatic agents*. 2003; 17(1):29-45.
- [26] Liu B, Lee K-W, Li H, et al. Combination therapy of insulin-like growth factor binding protein-3 and retinoid X receptor ligands synergize on prostate cancer cell apoptosis in vitro and in vivo. *Clinical cancer research*. 2005; 11(13):4851-6.
- [27] de Lera ÁR, Krezel W, Rühl R. An Endogenous Mammalian Retinoid X Receptor Ligand, At Last! *ChemMedChem*. 2016; 11(10):1027-37.
- [28] Han A, Tong C, Hu D, et al. A direct protein-protein interaction is involved in the suppression of β -catenin transcription by retinoid X receptor α in colorectal cancer cells. *Cancer biology & therapy*. 2008; 7(3):454-9.
- [29] Dillard AC, Lane MA. Retinol increases β -catenin-RXR α binding leading to the increased proteasomal degradation of β -catenin and RXR α . *Nutrition and cancer*. 2007; 60(1):97-108.
- [30] Zhang F, Meng F, Li H, et al. Suppression of retinoid X receptor alpha and aberrant β -catenin expression significantly associates with progression of colorectal carcinoma. *European Journal of Cancer*. 2011; 47(13):2060-7.
- [31] Haussler MR, Haussler CA, Bartik L, et al. Vitamin D receptor: molecular signaling and actions of nutritional ligands in disease prevention. *Nutrition reviews*. 2008; 66(suppl 2):S98-S112.
- [32] Bikle DD. Vitamin D receptor, a tumor suppressor in skin 1. *Canadian journal of physiology and pharmacology*. 2014; 93(5):349-54.
- [33] Maestro MA, Molnár F, Mouriño A, et al. Vitamin D receptor 2016: novel ligands and structural insights. *Expert Opinion on Therapeutic Patents*. 2016:1-16.
- [34] Ge Z, Hao M, Xu M, et al. Novel nonsecosteroidal VDR ligands with phenyl-pyrrolyl pentane skeleton for cancer therapy. *European journal of medicinal chemistry*. 2016; 107:48-62.
- [35] Egan JB, Thompson PA, Vitanov MV, et al. Vitamin D receptor ligands, adenomatous polyposis coli, and the vitamin D receptor FokI polymorphism collectively modulate β -catenin activity in colon cancer cells. *Molecular carcinogenesis*. 2010; 49(4):337-52.
- [36] Larriba MJ, Ordóñez-Morán P, Chicote I, et al. Vitamin D receptor deficiency enhances Wnt/ β -catenin signaling and tumor burden in colon cancer. *PloS one*. 2011; 6(8):e23524.
- [37] Pálmer HG, Larriba MJ, García JM, et al. The transcription factor SNAIL represses vitamin D receptor expression and responsiveness in human colon cancer. *Nature medicine*. 2004; 10(9):917-9.
- [38] Larriba MJ, Martín-Villar E, García JM, et al. Snail2 cooperates with Snail1 in the repression of vitamin D receptor in colon cancer. *Carcinogenesis*. 2009; 30(8):1459-68.
- [39] Larriba MJ, Valle N, Pálmer HG, et al. The inhibition of Wnt/ β -catenin signalling by 1 α , 25-dihydroxyvitamin D3 is abrogated by Snail1 in human colon cancer cells. *Endocrine-Related Cancer*. 2007; 14(1):141-51.
- [40] Pendas-Franco N, Aguilera O, Pereira F, et al. Vitamin D and Wnt/ β -catenin pathway in colon cancer: role and regulation of DICKKOPF genes. *Anticancer Research*. 2008; 28(5A):2613-23.
- [41] Ahearn TU, Shaukat A, Flanders WD, et al. A randomized clinical trial of the effects of supplemental calcium and vitamin D3 on the APC/ β -catenin pathway in the normal mucosa of colorectal adenoma patients. *Cancer Prevention*

Nuclear Receptors as Potential Pharmacological Targets for Colorectal Cancer Therapy via Regulating Wnt/ β -catenin Signaling

- Research. 2012; 5(10):1247-56.
- [42] Huerta S, Irwin RW, Heber D, et al. 1 α , 25-(OH)(2)-D (3) and its synthetic analogue decrease tumor load in the Apc (min) Mouse. *Cancer Research*. 1(62):741-6.
- [43] Xu H, Posner GH, Stevenson M, et al. ApcMIN modulation of vitamin D secosteroid growth control. *Carcinogenesis*. 2010; 31(8):1434-41.
- [44] Polvani S, Tarocchi M, Tempesti S, et al. Peroxisome proliferator activated receptors at the crossroad of obesity, diabetes, and pancreatic cancer. *World journal of gastroenterology*. 2016; 22(8):2441.
- [45] Reddy AT, Lakshmi SP, Reddy RC. PPAR γ as a Novel Therapeutic Target in Lung Cancer. *PPAR Research*. 2016; 2016.
- [46] Sikka S, Chen L, Sethi G, et al. Targeting PPAR γ signaling cascade for the prevention and treatment of prostate cancer. *PPAR research*. 2012; 2012.
- [47] Zhang J, Liu X, Xie XB, et al. Multitargeted bioactive ligands for PPARs discovered in the last decade. *Chemical Biology & Drug Design*. 2016.
- [48] Liu J, Wang H, Zuo Y, et al. Functional interaction between peroxisome proliferator-activated receptor γ and β -catenin. *Molecular and cellular biology*. 2006; 26(15):5827-37.
- [49] Moldes M, Ying Z, Morrison RF, et al. Peroxisome-proliferator-activated receptor γ suppresses Wnt/ β -catenin signalling during adipogenesis. *Biochemical Journal*. 2003; 376(3):607-13.
- [50] Lu D, Carson DA. Repression of β -catenin signaling by PPAR γ ligands. *European journal of pharmacology*. 2010; 636(1):198-202.
- [51] Guo F, Ren X, Dong Y, et al. Constitutive expression of PPAR γ inhibits proliferation and migration of gastric cancer cells and down-regulates Wnt/ β -Catenin signaling pathway downstream target genes TERT and ENAH. *Gene*. 2016; 584(1):31-7.
- [52] Fujisawa T, Nakajima A, Fujisawa N, et al. Peroxisome Proliferator-Activated Receptor. GAMMA.(PPAR. GAMMA.) Suppresses Colonic Epithelial Cell Turnover and Colon Carcinogenesis Through Inhibition of the. BETA.-Catenin/T Cell Factor (TCF) Pathway. *Journal of pharmacological sciences*. 2008; 106(4):627-38.
- [53] Girnun GD, Smith WM, Drori S, et al. APC-dependent suppression of colon carcinogenesis by PPAR γ . *Proceedings of the National Academy of Sciences*. 2002; 99(21):13771-6.
- [54] Moschetta A. Nuclear receptors and cholesterol metabolism in the intestine. *Atherosclerosis Supplements*. 2015; 17:9-11.
- [55] Schultz JR, Tu H, Luk A, et al. Role of LXRs in control of lipogenesis. *Genes & development*. 2000; 14(22):2831-8.
- [56] Collins JL, Fivush AM, Watson MA, et al. Identification of a nonsteroidal liver X receptor agonist through parallel array synthesis of tertiary amines. *Journal of medicinal chemistry*. 2002; 45(10):1963-6.
- [57] Chao EY, Caravella JA, Watson MA, et al. Structure-guided design of N-phenyl tertiary amines as transrepression-selective liver X receptor modulators with anti-inflammatory activity. *Journal of medicinal chemistry*. 2008; 51(18):5758-65.
- [58] Fukuchi J, Kokontis JM, Hiipakka RA, et al. Antiproliferative effect of liver X receptor agonists on LNCaP human prostate cancer cells. *Cancer research*. 2004; 64(21):7686-9.
- [59] Makoukji J, Shackelford G, Meffre D, et al. Interplay between LXR and Wnt/ β -Catenin Signaling in the Negative Regulation of Peripheral Myelin Genes by Oxysterols. *The Journal of Neuroscience*. 2011; 31(26):9620.
- [60] Sasso GL, Bovenga F, Murzilli S, et al. Liver X receptors inhibit proliferation of human colorectal cancer cells and growth of intestinal tumors in mice. *Gastroenterology*. 2013; 144(7):1497-507. e13.
- [61] Uno S, Endo K, Jeong Y, et al. Suppression of β -catenin signaling by liver X receptor ligands. *Biochemical Pharmacology*. 2009; 77(2):186-95.
- [62] To SK, Zeng J-Z, Wong AS. Nur77: a potential therapeutic target in cancer.

Nuclear Receptors as Potential Pharmacological Targets for Colorectal Cancer Therapy via Regulating Wnt/ β -catenin Signaling

- Expert opinion on therapeutic targets. 2012; 16(6):573-85.
- [63] Wang W-j, Wang Y, Chen H-z, et al. Orphan nuclear receptor TR3 acts in autophagic cell death via mitochondrial signaling pathway. *Nature chemical biology*. 2014; 10(2):133-40.
- [64] Zhao D, Qin L, Bourbon P-M, et al. Orphan nuclear transcription factor TR3/Nur77 regulates microvessel permeability by targeting endothelial nitric oxide synthase and destabilizing endothelial junctions. *Proceedings of the National Academy of Sciences*. 2011; 108(29):12066-71.
- [65] Zhan Y, Du X, Chen H, et al. Cyclosporine B is an agonist for nuclear orphan receptor Nur77. *Nature Chemical Biology*. 2008; 4(9):548.
- [66] Pinton P, Kroemer G. Cancer therapy: altering mitochondrial properties. *Nature chemical biology*. 2014; 10(2):89-90.
- [67] Sun Z, Cao X, Jiang M-M, et al. Inhibition of β -catenin signaling by nongenomic action of orphan nuclear receptor Nur77. *Oncogene*. 2012; 31(21):2653-67.
- [68] Chen H, Liu Q, Li L, et al. The orphan receptor TR3 suppresses intestinal tumorigenesis in mice by downregulating Wnt signalling. *Gut*. 2012; 61(5):714-24.
- [69] Gupta RK, Gao N, Gorski RK, et al. Expansion of adult β -cell mass in response to increased metabolic demand is dependent on HNF-4 α . *Genes & development*. 2007; 21(7):756-69.
- [70] Wang J, Cheng H, Li X, et al. Regulation of neural stem cell differentiation by transcription factors HNF4-1 and MAZ-1. *Molecular neurobiology*. 2013; 47(1):228-40.
- [71] Lazarevich N, Shavochkina D, Fleishman D, et al. Deregulation of hepatocyte nuclear factor 4 (HNF4) as a marker of epithelial tumors progression. *Exp Oncol*. 2010; 32(3):167-71.
- [72] Yao HS, Wang J, Zhang XP, et al. Hepatocyte nuclear factor 4 α suppresses the aggravation of colon carcinoma. *Molecular carcinogenesis*. 2016; 55(5):458-72.
- [73] Cattin AL, Le Beyec J, Barreau F, et al. Hepatocyte Nuclear Factor 4 α , a Key Factor for Homeostasis, Cell Architecture, and Barrier Function of the Adult Intestinal Epithelium. *Mol Cell Biol*. 2009; 29(23):6294-308.
- [74] Allazikani B, Hopkins AL. How many drug targets are there. *Nature Reviews Drug Discovery*. 2006; 5(12):993.
- [75] Yamazaki K, Shimizu M, Okuno M, et al. Synergistic effects of RXR α and PPAR γ ligands to inhibit growth in human colon cancer cells—phosphorylated RXR α is a critical target for colon cancer management. *Gut*. 2007; 56(11):1557-63.
- [76] Klopper JP, Sharma V, Bissonnette R, et al. Combination PPAR and RXR Agonist Treatment in Melanoma Cells: Functional Importance of S100A2. *PPAR research*. 2009; 2010.