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# **The Chicken Model of Spontaneous Ovarian Cancer**

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## **Abstract**

The chicken is a unique experimental model for studying the spontaneous onset and progression of ovarian cancer (OVC). The prevalence of OVC in chickens can range from 10–35% depending on age, genetic strain, reproductive history, and diet. Furthermore, the chicken presents epidemiological, morphological, and molecular traits that are similar to human OVC making it a relevant experimental model for translation research. Similarities to humans include associated increased risk of OVC with the number of ovulations, common histopathological sub-types including high-grade serous, and molecular-level markers or pathways such as CA-125 expression and p53 mutation frequency. Collectively, the similarities between chicken and human OVC combined with a tightly controlled genetic background and predictable onset window provides an outstanding experimental model for studying the early events and progression of spontaneous OVC tumors under controlled environmental conditions. This review will cover the existing literature on OVC in the chicken and highlight potential opportunities for further exploitation (e.g, biomarkers, prevention, treatment, and genomics).

# **INTRODUCTION**

The World Health Organization (WHO) estimates that approximately 225,000 women are diagnosed with ovarian cancer (OVC) per year accounting for 4% of all cancer cases in the world on an annual basis[1]. An estimated 140,000 deaths[1] are attributed to OVC per year with the highest prevalence in Europe<sup>[1]</sup>. 5-year mortality rates for OVC are high due to advanced stage diagnosis and resistance to existing chemotherapeutic drugs.[2–4] More aggressive surgical procedures have resulted in slight improvements to survival rates over the past several years but early detection remains the most critical factor in determining patient survival[5]. For example, more than two thirds of OVC patients are diagnosed at Stage III or Stage IV where overall 5-year survival rate under optimal conditions is approximately 33%[6] whereas diagnosis at Stage I results in 5-years survival rates of greater than 90%. Progress in finding more accurate biomarkers and effective therapeutic strategies have been slowed by the heterogeneous nature of OVC tumors[3], paucity of early-stage biospecimens (i.e., primary tissues and plasma) from which to identify early molecular events of tumorigenesis, and few experimental models that faithfully recapitulate the pathophysiology of the human disease  $[7-10]$ .

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The magnitude of OVC heterogeneity is summarized by the International Federation of Gynecological Oncologists (FIGO)[11] and WHO[12] having identified over 100 histopathological sub-types of OVC, 46 of which are epithelial types that constitute the majority of OVC cases (est. 90%). Further complicating the OVC phenotype is the fact that the tissue of origin remains unresolved. The ovarian surface epithelium (OSE), a monolayer of flat-to-cuboidal cells that line the surface of the ovary, has historically been viewed as the primary tissue of origin for epithelial ovarian cancer[13]. The small population OSE cells are difficult to obtain and then maintain in culture making it difficult to establish fundamental traits of healthy versus cancerous (transformed) OSE[14–16]. Furthermore, there is limited access to healthy ovary tissues for exhaustive molecular characterization. Thus, experimental models based on the 'OSE-to-OVC' hypothesis have been difficult to design with incomplete molecular characteristics of OSE transformation. An alternative to the OSE hypothesis that is gaining greater appreciation is that some histopathological subtypes of OVC, particularly high-grade serous adenocarcinomas, originate from the fallopian tube epithelium (FTE)[17]. Recent studies in mice have provided convincing functional evidence to support the 'FTE-to-OVC' hypothesis.[18–20] Although the development and wider availability of novel experimental systems with engineered genetic elements will undoubtedly improve our understanding of OVC, the emergence of the chicken as a natural experimental model of spontaneous OVC is providing an unbiased, complimentary system to studying OVC pathogenesis.

The chicken is rapidly emerging as an important experimental model for studying the spontaneous onset and progression of OVC.[10] Although reports of high rates of OVC in chickens have existed in literature for over 80 years[21–24], it is more recently that the animal has gained greater attention for OVC biomedical research. No other animal develops spontaneous OVC tumors at comparable rates to the chicken which can exceed 35% depending on the genetic background (i.e., strain[24, 25]), age, and number of eggs produced by the flock. Furthermore, the chicken OVC model displays similar histopathological subtypes<sup>[26]</sup> and multiple molecular level traits (e.g., CA-125) similar to human OVC. Fredrickson[24] provided the most detailed account of OVC in the laying hen by surveying over 400 birds from three genetic strains for up to 7 years. The quantitative evidence from this study combined with the sequencing of the chicken genome [27] has provided the foundation for the expansion of studies into the onset and progression of spontaneous OVC in the chicken. This review will cover epidemiological, histopathological, and molecular features of OVC in the chicken as well as potential opportunities for further exploration.

# **GENERAL OVERVIEW OF CHICKEN OVC STUDIES**

The agricultural utility and OVC research potential of the chicken is summarized in Figure 1. A hen begins laying eggs once it reaches sexual maturity which typically starts at ~5 months of age.[28] Birds typically produce eggs for at least the next year up to  $\sim$  2 years of age after which the research potential for OVC begins. Most studies reviewed herein cover birds 2–4 years of age as OVC presents itself in >5% of the birds providing sufficient numbers of biospecimens (assuming at least 200 birds at the start of a study). Pilot chemoprevention studies that inhibit egg production or reduce inflammation have

established key epidemiological similarities between chicken and human OVC[29–35]. More recent molecular characterizations of chicken OVC have found many notable similarities including CA-125 expression[36], p53 mutational frequency[37], and E-cadherin expression [38–41]. Furthermore, several oviduct-specific proteins have been identified in chicken OVC[42–44] suggesting potential links to oviductal involvement in chicken OVC pathogenesis. Efforts are underway to translate these molecular markers to humans in the hope that they will serve as early-stage biomarkers for OVC diagnosis. Unlike contrived mouse models, biomarker discovery studies in the chicken can be carried out in great detail with matched longitudinal plasma samples and tissue biospecimens which can be harvested for genomic, proteomics, or metabolomics signatures. Because the birds develop spontaneous tumors while maintained under identical conditions, traditional confounding factors in human studies (e.g., environment and diet) can be minimized making it easier to detect true biological changes related the onset and progression of OVC. It is expected the intra-individual variability, or personalized reference ranges, will be critical to an early-stage OVC screen in humans as previously demonstrated for CA-125.[45–49] The combined biomarker discovery and validation potential of longitudinal plasma repositories [43, 50, 51] provides a powerful model for OVC biomarker development and translation to humans.

# **EPIDEMIOLOGICAL CHARACTERISTICS OF CHICKEN OVC**

A woman's risk for developing OVC has been associated with the number of ovulations in her lifetime[52] which can be affected by pregnancy and oral contraceptive use. A woman who has never been pregnant and did not use birth control could in theory ovulate at least 400 times over her lifetime. Women who use oral progestin-estrogen contraceptives can reduce their risk of OVC by as much as 50%.[53] Figure 2A (conceptually adapted from Noara *et al.*[54] and Silverthorn[55]) shows a cross sectional illustration of the human ovary. Ovulation in women occurs on average every 28 days with the promotion of primary follicles to egg release occurring over ~14 days.[55] The premise of the OSE-to-OVC is that the constant rupture and repair of the OSE during the course of ovulation gives rise to the majority of OVC cases. However, as previously noted there is increasing evidence to suggest that the fallopian epithelium contribute to the origin of OVC as they are in contact with the OSE. Figure 2B shows a cross-sectional illustration of the chicken ovary based on the ovulatory cycle of the bird[56]. Like in the human ovary, the chicken ovary has immature follicles and an OSE as shown in the H&E stained formalin fixed tissue images in Figure 2C and 2D from a healthy fully functional (egg-producing) bird. The mature follicle (Figure 2B: F1) is released into the oviduct where it forms into a mature egg in  $\sim$ 24–27 hours. During this time period, the F2 follicle moves into place where it can be released into the oviduct immediately after the F1 egg is produced. This cycle repeats itself every  $\sim$ 27 hours disrupting the OSE. The agricultural utility of a laying hen is typically limited to the first 1– 2 years of the bird's life wherein a bird can lay between 200–400 eggs. After 2 years of age, birds are removed from the egg-producing flock but they can continue to live several more years and produce another ~200 eggs. Thus, the number of ovulations in chickens and humans is comparable but the compressed ovulation cycle of  $\sim$  28 days in humans versus  $\sim$  27 hours in the chicken in theory gives rise to high rates of OVC over a narrower window of time relative to humans. However, it was noted by Auersperg[57] that the mouse, which does

not typically develop spontaneous OVC at appreciable rates, can undergo multiple ovulations over a 2 year lifespan generating as many if not more insults to the ovary than in humans or chickens.

Fredrickson [24] monitored egg production from 2–7 years of age but found it was not associated with OVC prevalence. Barnes et al.[29] studied the effect of egg production on OVC prevalence in four hundred 3-year old birds where half were injected with the contraceptive medroxyprogesterone (Depo-Provera) three times over a 16 month period versus no injection for the control group. The treated birds produced fewer eggs and showed a 15% reduction in OVC risk. In a more recent study, Trevino et al.[34] looked at the prevalence of OVC in chickens as a function of progestin treatment. The results of the study showed that progestin treatment could reduce the risk of OVC in chickens by more than 90% compared with age-matched controls. Giles et al.[32] studied the prevalence of OVC in 33 mutant restricted ovulator (RO) birds and 31 wild-type (WT) siblings. The birds were studied over a 31-month period during which the WT birds produced an average of 422  $\pm$  134 eggs and the RO birds produced 28  $\pm$  66 eggs. Following necropsy, only one of the WT birds (3%) had developed OVC whereas 9 RO birds (27%) developed OVC strongly suggesting the lower ovulations gave rise to reduced risk of developing OVC. RO birds have lower progesterone levels but higher estrogen and gonadotropin levels in plasma compared with WT birds.[58] A higher progesterone level is protective whereas women with lower levels of estrogen and gonadotropins are at higher risk of developing OVC.[59]

A large-scale chemoprevention study at North Carolina State University investigated OVC prevalence in 2400 two-year old birds as a function of different treatment conditions over a 2 year period.[33, 35] Carver et al.[33] reported a 5-fold reduction in OVC prevalence for birds on a calorie-restricted diet which inhibited egg production. Control birds fed a full calorie diet produced 64% more eggs compared with birds fed a calorie-restricted diet. A second report by Rodriguez *et al.*[35] investigated the OVC prevalence as a function of progestin (levonorgestrel and Provera) and Vitamin D treatments. The Vitamin D treated birds showed no reduction in OVC risk whereas the progestin treated birds showed a 60% risk reduction. Importantly, the authors concluded that progestins and not the reduction in ovulations provided the reduced OVC risk.

Inflammation is a critical factor in the onset and progression of cancer.[60] Urick et al. studied the effect of non-steroidal anit-inflammatory drugs (NSAID) on the proliferation and prevalence of OVC in the chicken.[30, 31] Primary cultures of ascites-derived cells were treated with aspirin and cyclooxygenase enzyme (COX-1 and COX-2) inhibitors to study cell growth, VEGF expression, and prostaglandin  $E_2$  (PGE<sub>2</sub>) concentration[30]. Aspirin and the COX-1 inhibitor SC-560 were effective at reducing cell proliferation whereas the COX-2 inhibitor NS-398 was ineffective. A second study by the same group looked at the effect of dietary aspirin on the prevalence of OVC in 200 chickens over different age-groups.[31] The aspirin-treated birds showed reduced  $PGE<sub>2</sub>$  levels in liver tissues but the overall prevalence of OVC was not affected versus the control group. Although OVC prevalence was not affected by aspirin diet, the severity of OVC (i.e., Stage) was reduced in aspirin-treated birds versus the control birds. Eilati *et al.*[61] investigated the effect of chronic inflammation on the onset and progression of OVC 600 birds from 1.5−3.5 years of age. The concentrations

of COX-1 and COX-2 and their downstream pro-inflammatory lipid product  $PGE_2$  were measured in ovarian tumors and healthy tissues. The study found that all three targeted analytes increased in concentration with age concurrent with the onset and progression of OVC.

These studies underscore the potential of the chicken as a model for OVC chemoprevention studies. Molecular signatures in chickens are beginning to emerge that will support such studies as diagnostic and prognostic biomarkers that could potentially translate to humans. These markers, potentially in concert with transvaginal sonagraphy[62], could facilitate experimental chemotherapeutic intervention studies in chickens with translational potential in humans.

# **MOLECULAR CHARACTERISTICS OF CHICKEN OVC**

The sequencing of the chicken genome[27] has enabled researchers to begin studying OVC in the chicken making comparative observations with humans. Table 1 gives a summary of studies that have identified biomolecular characteristics in the chicken that either corroborate previous observations in human OVC or identify new gene products that have translational potential. Many of these reports have occurred in the past 5 years suggesting the model is gaining more widespread appreciation and acceptance. One of the limitations of the model that has restricted progress is the lack of commercially available antibodies for immmunohistochemcial staining (IHC) and Western blot analysis. Nonetheless, antibodies against human proteins related to OVC have been used with success in the chicken (vide supra). The development of chicken-specific reagents combined with advanced systems biology technologies (i.e., genomics, proteomics, and metabolomics) will further expand the potential utility of the model for translation OVC research.

#### **CA-125 expression in chicken OVC tumors**

Cancer antigen 125 (CA-125), also referred to as mucin 16 (MUC-16), was discovered by Bast et al.[63, 64] and has emerged as the most widely used biomarker for OVC detection in the world. Although it does not have the predictive power to be used as a population-based screen, it remains the most accurate marker for OVC to date. Two studies have investigated the presence of CA-125 in chicken OVC using commercially available human antibodies with conflicting results. Rodriguez-Burford et al.[65] used IHC to measure the expression levels of several OVC-related proteins in chicken OVC tumors. Positive IHC staining was observed for EGFR, Her2, AE1/AE3, Lewis Y, CEA, and Tag 72 and negative IHC staining was observed for CA-125, PCNA, p27, and TGF-alpha. Jackson et al.[36] measured CA-125 expression in chicken OVC tumors and primary cultures of OVC cells by both IHC and Western blot (WB). CA-125 was positive in tissues specimens and in 90% of primary ovarian cancer cultures after 28 hours of growth. The closest CA-125 homologue in chickens based on BLAST analysis is a predicted form of MUC-16 (NCBI RefSeq XP\_0012330006.3). The predicted chicken isoform is found on Chromosome 28 and has 726 amino acids with 38% sequence to human CA-125. Additional research and chickenspecific antibodies are needed to establish and confirm the existence of CA-125 in chicken OVC.

#### **p53 is commonly mutated in chicken OVC**

The tumor suppressor p53 is mutated in over 95% of high-grade serous ovarian cancers (HGSOV), the most common and lethal form of OVC.[66] Hakim et al.[37] found that the overall frequency of p53 mutation in OVC tumors from a total 172 4-year old birds from two different flocks was 48% (81/172). The birds (Flock A and B) were age-matched but raised under different conditions. Flock A had reduced light and calorie restriction that limited the number of ovulations whereas Flock B received normal light and diet. The p53 mutations in Flock A were exclusively found in the p53-DNA binding domain (14/14) whereas the Flock B results showed the large majority of mutations occurred in the proline-rich region (68/76) with few in the transactivation domain (8/76) and none in the DNA binding domain. The types of mutation for Flock A were largely deletions (13/14) with one missense whereas missense dominated in Flock B (71/76) in agreement with studies in human HGSOVC[67]. The mutation and expression of H-/K-ras and Her2, respectively, were also investigated.[37] H-ras was not mutated in any of the OVC tumors and only two tumors showed K-ras mutations which agrees with findings in human HGSOVC[68, 69]. Her2 was overexpressed in 53% of OVC tumors by IHC staining which is high but not outside reported ranges found in the human OVC literature (8–66% depending on Stage and sub-type)[70]. Overall these molecular features of chicken OVC, in particular p53 mutation, provide a strong link to common traits in human OVC.

#### **E-cadherin is up-regulated in chicken OVC**

E-cadherin is a 120 kDa calcium-dependent transmembrane protein that plays a critical role in epithelial cell-cell adhesion.[71] E-cadherin is constitutively expressed in human endometrial and oviductal epithelium, not expressed in normal human OSE except for rare instances where OSE cells have committed to metaplastic and neoplastic phenotypes, and overexpressed in the majority of human OVC tumors.[13] Thus, E-cadherin is a biomarker for epithelial differentiation in human reproductive tissues and OVC tumors. Ansenberger et al.[38] studied the expression of E-cadherin in normal and cancerous chicken ovaries using a combination of IHC, WB, and mRNA analysis. Positive E-cadherin staining was observed in the granulosa cells of healthy fully functioning ovaries, glandular regions in early-stage (confined to the ovary) OVC tumors, and throughout late-stage OVC tumors. WB and mRNA analysis confirmed the presence and up-regulation of of E-cadherin in OVC tumors relative to healthy chicken ovaries. Two independent global gene expression studies found up-regulation of E-cadherin in chicken OVC tumors.[39, 40] Gonzalez-Bosquet et al.[40] examined early-stage (confined to ovary) OVC, metastatic OVC, and oviductal carcinomas and found 1.28, 2.64, and 3.39 (log-expression) higher levels of E-cadherin, respectively. Tiwari et al.[41] characterized ascites-derived primary OVC cells and normal OSE cells in culture and found E-cadherin was expressed in all cell types. Collectively, these reports support the use of E-cadherin as a tissue marker for chicken OVC pathogenesis and provide additional evidence for its similarity to humans.

#### **Oviductal proteins and chicken OVC pathogenesis**

The OSE has traditionally been considered the tissue of origin for human OVC[13] but emerging data supports the alternative hypothesis that some histopathological subtypes of

OVC, most notably high-grade serous (HSOVC), originates in the fallopian tube epithelium. [18–20] The majority of late-stage OVC cases in the chicken have adenocarcinomas on the oviduct. At present, there is no way to determine the tissue of origin when tumors are present on both the ovary and oviduct although molecular signatures suggest the latter may be the initiation site. Giles *et al.*[42] showed that ovoalbumin, a protein primarily expressed in the oviducts of fully functional birds and the most abundant protein in egg whites, was over-expressed in chicken OVC tumors. This study provided the first molecular evidence of oviductal involvement in the chicken OVC pathogenesis. Hawkridge et al.[43] characterized the intra-individual variability of the plasma proteome by LC-MS/MS and identified a predicted form of ovostatin (ovostatin 2). This unique protein is a member of the I39 MEROPS I39 protease inhibitor family which includes alpha-2 macroglobulin and ovostatin 1, proteins primarily synthesized in the liver and oviduct, respectively. Trevino et al.[39] identified several oviduct-specific proteins in chicken OVC including paired box 2 protein and estrogen receptor 1 in a global gene expression study. Lim et al.[72] studied the tissue distribution and expression levels of WNT4 in healthy and OVC tumor tissues. WNT4 was expressed primarily in healthy chicken oviducts, over-expressed in glandular epithelium of OVC tumors, and not expressed in healthy ovaries suggesting it may be a marker for oviductal involvement. The increasing list of oviduct-specific proteins over-expressed in chicken OVC tumors reinforces the hypothesis that the oviduct contributes to the onset of OVC in the hen.

# **FUTURE OPPORTUNITIES**

There remain significant opportunities for the continued development of the chicken as an experimental model for spontaneous OVC. The epidemiological and molecular characteristics strongly support the chicken as a viable model that recapitulates many of the significant hallmarks of human OVC. Figure 1 provides a general overview of the chicken's lifespan as it relates to OVC in addition to the existing and potential uses for translation biomedical research. An area that has not been developed thus far is identifying genetic susceptibilities of OVC in the chicken. Genome wide association studies could provide critical markers for selecting specific populations for future studies. Targeted studies that focus on known susceptibility genes such as BRCA1[73] and BRCA2[74], both of which have been identified in the chicken, could also further support the use of the chicken model. Furthermore, the measurement of intra- versus inter-individual variability of plasma proteins and metabolites with LC-MS/MS as a function of genotype and phenotype (healthy vs. OVC) and genotype provides the opportunity to develop tools and strategies for a truly systems-level experimental model with a heterogeneous genetic background. Despite extensive breeding of chickens in the agricultural industry, their genetic background remains similar in diversity to the wild jungle fowl.[27] Thus, the chicken is complimentary to genetically engineered mouse models with defined genetic elements. In summary, the chicken fills an unmet need in the OVC research community that lacks a true natural experimental model for OVC. Through careful experimental design and advanced systemslevel 'omics' technologies, it will be possible to explore and discover in an unbiased way the epidemiological and molecular characteristics that contribute to the spontaneous onset and progression of ovarian cancer.

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# **ABBREVIATIONS**



# **References**

- 1. Ferlay, J.; Shin, HR.; Bray, F.; Forman, D., et al. GLOBOCAN 2008 v2.0, Cancer Incidence and Mortality Worldwide: IARC CancerBase No. 10. [http://globocan.iarc.fr2008](http://globocan.iarc.fr2008/)
- 2. Bast RC, Hennessy B, Mills GB. The biology of ovarian cancer: new opportunities for translation. Nat. Rev. Cancer. 2009; 9(6):415–428. [PubMed: 19461667]
- 3. Cho KR, Shih Ie M. Ovarian cancer. Annu. Rev. Pathol. 2009; 4:287–313. [PubMed: 18842102]
- 4. Yap TA, Carden CP, Kaye SB. Beyond chemotherapy: targeted therapies in ovarian cancer. 2009; 9(3):167–181.
- 5. Agarwal R, Kaye SB. Ovarian cancer: strategies for overcoming resistance to chemotherapy. Nat. Rev. Cancer. 2003; 3(7):502–516. [PubMed: 12835670]
- 6. Clarke-Pearson DL. Clinical practice. Screening for ovarian cancer. N. Engl. J. Med. 2009; 361(2): 170–177. [PubMed: 19587342]
- 7. Vanderhyden BC, Shaw TJ, Ethier JF. Animal models of ovarian cancer. Reprod. Biol. Endocrinol. 2003; 1:67. [PubMed: 14613552]
- 8. Garson K, Shaw TJ, Clark KV, Yao DS, et al. Models of ovarian cancer are we there yet? Mol. Cell. Endocrinol. 2005; 239(1–2):15–26. [PubMed: 15955618]
- 9. Cheon DJ, Orsulic S. Mouse models of cancer. Annu. Rev. Pathol. 2011; 6:95–119. [PubMed: 20936938]
- 10. Johnson PA, Giles JR. The hen as a model of ovarian cancer. Nat. Rev. Cancer. 2013; 13(6):432– 436. [PubMed: 23676850]
- 11. Benedet JL, Bender H, Jones H 3rd, Ngan HY, et al. FIGO staging classifications and clinical practice guidelines in the management of gynecologic cancers. FIGO Committee on Gynecologic Oncology. Int. J. Gynaecol. Obstet. 2000; 70(2):209–262. [PubMed: 11041682]

- 12. Scully, RE.; Sobin, LH.; Serov, SF. Histological typing of ovarian tumours. 2nd ed. Berlin ; New York: Springer; 1999. 136 p.
- 13. Auersperg N, Wong AS, Choi KC, Kang SK, et al. Ovarian surface epithelium: biology, endocrinology, and pathology. Endocr. Rev. 2001; 22(2):255–288. [PubMed: 11294827]
- 14. Auersperg N, Siemens CH, Myrdal SE. Human ovarian surface epithelium in primary culture. In vitro. 1984; 20(10):743–755. [PubMed: 6083974]
- 15. Okamura H, Katabuchi H, Ohba T. What we have learned from isolated cells from human ovary? Mol. Cell. Endocrinol. 2003; 202(1–2):37–45. [PubMed: 12770728]
- 16. Shepherd TG, Theriault BL, Campbell EJ, Nachtigal MW. Primary culture of ovarian surface epithelial cells and ascites-derived ovarian cancer cells from patients. Nat. Protoc. 2006; 1(6): 2643–2649. [PubMed: 17406520]
- 17. Dubeau L, Drapkin R. Coming into focus: the nonovarian origins of ovarian cancer. Annals of oncology : official journal of the European Society for Medical Oncology / ESMO. 2013; 24(Suppl 8):viii28–viii35. [PubMed: 24131966]
- 18. Karst AM, Levanon K, Drapkin R. Modeling high-grade serous ovarian carcinogenesis from the fallopian tube. Proc. Natl. Acad. Sci. U.S.A. 2011; 108(18):7547–7552. [PubMed: 21502498]
- 19. Kim J, Coffey DM, Creighton CJ, Yu Z, et al. High-grade serous ovarian cancer arises from fallopian tube in a mouse model. Proc. Natl. Acad. Sci. U.S.A. 2012; 109(10):3921–3926. [PubMed: 22331912]
- 20. Perets R, Wyant GA, Muto KW, Bijron JG, et al. Transformation of the Fallopian Tube Secretory Epithelium Leads to High-Grade Serous Ovarian Cancer in Brca, Tp53, Pten Models. Cancer Cell. 2013; 24:751–765. [PubMed: 24332043]
- 21. McGowan JP. The Biological Significance of Ovarian Tumors in the Fowl. J. Canc. Res. 1930; 14:527–535.
- 22. Wilson JE. Adeno-carcinomata in hens kept in a constant environment. Poult. Sci. 1958; 37:1253.
- 23. Papasolomontos PA, Appleby EC, Mayor OY. Pathological findings in condemned chickens: a survey of 1,000 carcases. Vet. Rec. 1969; 84(17):459–464. [PubMed: 5387897]
- 24. Fredrickson TN. Ovarian Tumors of the Hen. Environ. Health Perspect. 1987; 73:35–51. [PubMed: 3665870]
- 25. Johnson PA, Giles JR. Use of genetic strains of chickens in studies of ovarian cancer. Poult. Sci. 2006; 85(2):246–250. [PubMed: 16523622]
- 26. Barua A, Bitterman P, Abramowicz JS, Dirks AL, et al. Histopathology of ovarian tumors in laying hens: a preclinical model of human ovarian cancer. Int J. Gynecol. Cancer. 2009; 19(4):531–539. [PubMed: 19509547]
- 27. International Chicken Genome Sequencing C. Sequence and comparative analysis of the chicken genome provide unique perspectives on vertebrate evolution. Nature. 2004; 432(7018):695–716. [PubMed: 15592404]
- 28. Bahr, JM. The Chicken as a Model Organism. In: Conn, PM., editor. Sourcebook of Models for Biomedical Research. Totowa: Human Press; 2008. p. 161-167.
- 29. Barnes MN, Berry WD, Straughn JM, Kirby TO, et al. A pilot study of ovarian cancer chemoprevention using medroxyprogesterone acetate in an avian model of spontaneous ovarian carcinogenesis. Gynecol. Oncol. 2002; 87(1):57–63. [PubMed: 12468343]
- 30. Urick ME, Giles JR, Johnson PA. VEGF expression and the effect of NSAIDs on ascites cell proliferation in the hen model of ovarian cancer. Gynecol. Oncol. 2008; 110(3):418–424. [PubMed: 18606441]
- 31. Urick ME, Giles JR, Johnson PA. Dietary aspirin decreases the stage of ovarian cancer in the hen. Gynecol. Oncol. 2009; 112(1):166–170. [PubMed: 18986688]
- 32. Giles JR, Elkin RG, Trevino LS, Urick ME, et al. The restricted ovulator chicken: a unique animal model for investigating the etiology of ovarian cancer. Int. J. Gynecol. Cancer. 2010; 20(5):738– 744. [PubMed: 20973263]
- 33. Carver DK, Barnes HJ, Anderson KE, Petitte JN, et al. Reduction of ovarian and oviductal cancers in calorie-restricted laying chickens. Cancer Prev. Res. 2011; 4(4):562–567.

- 34. Trevino LS, Buckles EL, Johnson PA. Oral contraceptives decrease the prevalence of ovarian cancer in the hen. Cancer Prev. Res. 2012; 5(2):343–349.
- 35. Rodriguez GC, Barnes HJ, Anderson KE, Whitaker RS, et al. Evidence of a Chemopreventive Effect of Progestin Unrelated to Ovulation on Reproductive Tract Cancers in the Egg-laying Hen. Cancer. Prev. Res. 2013; 6(12):1283–1292.
- 36. Jackson E, Anderson K, Ashwell C, Petitte J, et al. CA125 expression in spontaneous ovarian adenocarcinomas from laying hens. Gynecol. Oncol. 2007; 104(1):192–198. [PubMed: 16942793]
- 37. Hakim AA, Barry CP, Barnes HJ, Anderson KE, et al. Ovarian adenocarcinomas in the laying hen and women share similar alterations in p53, ras, and HER-2/neu. Cancer Prev. Res. 2009; 2(2): 114–121.
- 38. Ansenberger K, Zhuge Y, Lagman JA, Richards C, et al. E-cadherin expression in ovarian cancer in the laying hen, Gallus domesticus, compared to human ovarian cancer. Gynecol. Oncol. 2009; 113(3):362–369. [PubMed: 19321195]
- 39. Trevino LS, Giles JR, Wang W, Urick ME, et al. Gene expression profiling reveals differentially expressed genes in ovarian cancer of the hen: support for oviductal origin? Horm. Cancer. 2010; 1(4):177–186. [PubMed: 21761365]
- 40. Gonzalez Bosquet J, Peedicayil A, Maguire J, Chien J, et al. Comparison of gene expression patterns between avian and human ovarian cancers. Gynecol. Oncol. 2011; 120(2):256–264. [PubMed: 21093898]
- 41. Tiwari A, Hadley JA, Hendricks GL 3rd, Elkin RG, et al. Characterization of ascites-derived ovarian tumor cells from spontaneously occurring ovarian tumors of the chicken: evidence for Ecadherin upregulation. PLoS One. 2013; 8(2):e57582. [PubMed: 23460878]
- 42. Giles JR, Shivaprasad HL, Johnson PA. Ovarian tumor expression of an oviductal protein in the hen: a model for human serous ovarian adenocarcinoma. Gynecol. Oncol. 2004; 95(3):530–533. [PubMed: 15581958]
- 43. Hawkridge AM, Wysocky RB, Petitte JN, Anderson KE, et al. Measuring the intra-individual variability of the plasma proteome in the chicken model of spontaneous ovarian adenocarcinoma. Anal. Bioanal. Chem. 2010; 398(2):737–749. [PubMed: 20640409]
- 44. Lim W, Jeong W, Kim JH, Lee JY, et al. Differential expression of alpha 2 macroglobulin in response to dietylstilbestrol and in ovarian carcinomas in chickens. Reprod. Biol. Endocrinol. 2011; 9:137–146. [PubMed: 21978460]
- 45. Skates SJ, Xu FJ, Yu YH, Sjovall K, et al. Toward an optimal algorithm for ovarian cancer screening with longitudinal tumor markers. Cancer. 1995; 76(10):2004–2010. [PubMed: 8634992]
- 46. Tuxen MK, Soletormos G, Petersen PH, Schioler V, et al. Assessment of biological variation and analytical imprecision of CA 125, CEA, and TPA in relation to monitoring of ovarian cancer. Gynecol. Oncol. 1999; 74(1):12–22. [PubMed: 10385546]
- 47. Tuxen MK, Soletormos G, Rustin GJ, Nelstrop AE, et al. Biological variation and analytical imprecision of CA 125 in patients with ovarian cancer. Scand. J. Clin. Lab. Invest. 2000; 60(8): 713–721. [PubMed: 11218154]
- 48. Skates S, Troiano R, Knapp RC. Longitudinal CA125 detection of sporadic papillary serous carcinoma of the peritoneum. Int. J. Gynecol. Cancer. 2003; 13(5):693–696. [PubMed: 14675358]
- 49. Skates SJ, Menon U, MacDonald N, Rosenthal AN, et al. Calculation of the risk of ovarian cancer from serial CA-125 values for preclinical detection in postmenopausal women. J. Clin. Oncol. 2003; 21(10 Suppl):206s–210s. [PubMed: 12743136]
- 50. Dixon RB, Bereman MS, Petitte JN, Hawkridge AM, et al. One-Year Plasma N-linked Glycome Intra-individual and Inter-individual Variability in the Chicken Model of Spontaneous Ovarian Adenocarcinoma. Int J Mass Spectrom. 2011; 305(2–3):79–86. [PubMed: 21845070]
- 51. Andrews Kingon GL, Petitte JN, Muddiman DC, Hawkridge AM. Multi-peptide nLC-PC-IDMS-SRM-based Assay for the Quantification of Biomarkers in the Chicken Ovarian Cancer Model. Methods. 2013; 61(3):323–330. [PubMed: 23603217]
- 52. Fathalla MF. Incessant ovulation--a factor in ovarian neoplasia? Lancet. 1971; 2(7716):163. [PubMed: 4104488]

- 53. Wu ML, Whittemore AS, Paffenbarger RS Jr, Sarles DL, et al. Personal and environmental characteristics related to epithelial ovarian cancer. I. Reproductive and menstrual events and oral contraceptive use. Am. J. Epidemiol. 1988; 128(6):1216–1227. [PubMed: 3195563]
- 54. Naora H, Montell DJ. Ovarian cancer metastasis: integrating insights from disparate model organisms. Nat. Rev. Cancer. 2005; 5(5):355–366. [PubMed: 15864277]
- 55. Silverthorn, DU.; Ober, WC.; Garrison, CW.; Silverthorn, AC. Human Physiology: An Integrated Approach. 2nd ed. Prentice Hall; 2001. 815 p.
- 56. Whittow, GC., editor. Sturkie's Avian Physiology. 5th ed. San Diego: Academic Press; 2000.
- 57. Auersperg N. Specific keynote: experimental models of epithelial ovarian carcinogenesis. Gynecol. Oncol. 2003; 88(1):S47–S51. [PubMed: 12586085]
- 58. Ocon-Grove OM, Maddineni S, Hendricks GL 3rd, Elkin RG, et al. Pituitary progesterone receptor expression and plasma gonadotrophin concentrations in the reproductively dysfunctional mutant restricted ovulator chicken. Domest. Anim. Endocrinol. 2007; 32(3):201–215. [PubMed: 16677794]
- 59. Riman T, Persson I, Nilsson S. Hormonal aspects of epithelial ovarian cancer: review of epidemiological evidence. Clin. Endocrinol. 1998; 49(6):695–707.
- 60. Coussens LM, Werb Z. Inflammation and cancer. Nature. 2002; 420(6917):860–867. [PubMed: 12490959]
- 61. Eilati E, Pan L, Bahr JM, Hales DB. Age dependent increase in prostaglandin pathway coincides with onset of ovarian cancer in laying hens. Prostaglandins Leukot. Essent. Fatty Acids. 2012; 87(6):177–184. [PubMed: 23089186]
- 62. Barua A, Abramowicz JS, Bahr JM, Bitterman P, et al. Detection of ovarian tumors in chicken by sonography: a step toward early diagnosis in humans? J. Ultrasound Med. 2007; 26(7):909–919. [PubMed: 17592054]
- 63. Bast RC, Feeney M, Lazarus H, Nadler LM, et al. Reactivity of a Monoclonal-Antibody with Human Ovarian-Carcinoma. J. Clin. Invest. 1981; 68(5):1331–1337. [PubMed: 7028788]
- 64. Bast RC, Klug TL, Stjohn E, Jenison E, et al. A Radioimmunoassay Using a Monoclonal-Antibody to Monitor the Course of Epithelial Ovarian-Cancer. N. Engl. J. Med. 1983; 309(15):883–887. [PubMed: 6310399]
- 65. Rodriguez-Burford C, Barnes MN, Berry W, Partridge EE, et al. Immunohistochemical expression of molecular markers in an avian model: a potential model for preclinical evaluation of agents for ovarian cancer chemoprevention. Gynecol Oncol. 2001; 81(3):373–379. [PubMed: 11371125]
- 66. Cancer Genome Atlas Research, N. Integrated genomic analyses of ovarian carcinoma. Nature. 2011; 474(7353):609–615. [PubMed: 21720365]
- 67. Ahmed AA, Etemadmoghadam D, Temple J, Lynch AG, et al. Driver mutations in TP53 are ubiquitous in high grade serous carcinoma of the ovary. J. Pathol. 2010; 221(1):49–56. [PubMed: 20229506]
- 68. Liu J, Yang G, Thompson-Lanza JA, Glassman A, et al. A genetically defined model for human ovarian cancer. Canc. Res. 2004; 64(5):1655–1663.
- 69. Nakayama N, Nakayama K, Yeasmin S, Ishibashi M, et al. KRAS or BRAF mutation status is a useful predictor of sensitivity to MEK inhibition in ovarian cancer. Br. J. Cancer. 2008; 99(12): 2020–2028. [PubMed: 19018267]
- 70. Tuefferd M, Couturier J, Penault-Llorca F, Vincent-Salomon A, et al. HER2 status in ovarian carcinomas: a multicenter GINECO study of 320 patients. PLoS One. 2007; 2(11):e1138. [PubMed: 17987122]
- 71. Geiger B, Ayalon O. Cadherins. Annu. Rev. Cell Biol. 1992; 8:307–332. [PubMed: 1476802]
- 72. Lim CH, Lim W, Jeong W, Lee JY, et al. Avian WNT4 in the female reproductive tracts: potential role of oviduct development and ovarian carcinogenesis. PLoS One. 2013; 8(7):e65935. [PubMed: 23843947]
- 73. Orelli BJ, Logsdon Jr JM Jr, Bishop DK. Nine novel conserved motifs in BRCA1 identified by the chicken orthologue. Oncogene. 2001; 20(32):4433–4438. [PubMed: 11466627]
- 74. Takata M, Tachiiri S, Fujimori A, Thompson LH, et al. Conserved domains in the chicken homologue of BRCA2. Oncogene. 2002; 21(7):1130–1134. [PubMed: 11850831]

- 75. Giles JR, Olson LM, Johnson PA. Characterization of ovarian surface epithelial cells from the hen: a unique model for ovarian cancer. Exp. Biol. Med. 2006; 231(11):1718–1725.
- 76. Urick ME, Johnson PA. Cyclooxygenase 1 and 2 mRNA and protein expression in the Gallus domesticus model of ovarian cancer. Gynecol. Oncol. 2006; 103(2):673–678. [PubMed: 16797680]
- 77. Stammer K, Edassery SL, Barua A, Bitterman P, et al. Selenium-binding protein 1 expression in ovaries and ovarian tumors in the laying hen, a spontaneous model of human ovarian cancer. Gynecol. Oncol. 2008; 109(1):115–121. [PubMed: 18272210]
- 78. Zhuge Y, Lagman JA, Ansenberger K, Mahon CJ, et al. CYP1B1 expression in ovarian cancer in the laying hen Gallusdomesticus. Gynecol. Oncol. 2009; 112(1):171–178. [PubMed: 18973935]
- 79. Ahn SE, Choi JW, Rengaraj D, Seo HW, et al. Increased expression of cysteine cathepsins in ovarian tissue from chickens with ovarian cancer. Reprod. Biol. Endocrinol. 2010; 8:100. [PubMed: 20727192]
- 80. Seo HW, Rengaraj D, Choi JW, Ahn SE, et al. Claudin 10 is a glandular epithelial marker in the chicken model as human epithelial ovarian cancer. Int. J. Gynecol. Cancer. 2010; 20(9):1465– 1473. [PubMed: 21370593]
- 81. Choi JW, Ahn SE, Rengaraj D, Seo HW, et al. Matrix metalloproteinase 3 is a stromal marker for chicken ovarian cancer. Oncol. Lett. 2011; 2(6):1047–1051. [PubMed: 22848266]
- 82. Seo HW, Rengaraj D, Choi JW, Park KJ, et al. The expression profile of apoptosis-related genes in the chicken as a human epithelial ovarian cancer model. Oncol. Rep. 2011; 25(1):49–56. [PubMed: 21109956]
- 83. Yu Y, Edassery SL, Barua A, Abramowicz JS, et al. The hen model of human ovarian cancer develops anti-mesothelin autoantibodies in response to mesothelin expressing tumors. J. Ovarian Res. 2011; 4:12. [PubMed: 21801396]
- 84. Jeong W, Kim HS, Kim YB, Kim MA, et al. Paradoxical expression of AHCYL1 affecting ovarian carcinogenesis between chickens and women. Exp. Biol. Med. 2012; 237(7):758–767.
- 85. Lee JY, Jeong W, Kim JH, Kim J, et al. Distinct expression pattern and post-transcriptional regulation of cell cycle genes in the glandular epithelia of avian ovarian carcinomas. PLoS One. 2012; 7(12):e51592. [PubMed: 23236518]
- 86. Lee JY, Jeong W, Lim W, Kim J, et al. Chicken pleiotrophin: regulation of tissue specific expression by estrogen in the oviduct and distinct expression pattern in the ovarian carcinomas. PLoS One. 2012; 7(4):e34215. [PubMed: 22496782]
- 87. Lim W, Jeong W, Kim J, Ka H, et al. Differential expression of secreted phosphoprotein 1 in response to estradiol-17beta and in ovarian tumors in chickens. Biochem. Biophys. Res. Commun. 2012; 422(3):494–500. [PubMed: 22588173]
- 88. Lim W, Kim HS, Jeong W, Ahn SE, et al. SERPINB3 in the chicken model of ovarian cancer: a prognostic factor for platinum resistance and survival in patients with epithelial ovarian cancer. PLoS One. 2012; 7(11):e49869. [PubMed: 23185467]
- 89. Lim W, Kim JH, Ahn SE, Jeong W, et al. Avian SERPINB11 gene: a marker for ovarian endometrioid cancer in chickens. Exp. Biol. Med. 2012; 237(2):150–159.
- 90. Bae SM, Lim W, Jeong W, Lee JY, et al. Hormonal regulation of beta-catenin during development of the avian oviduct and its expression in epithelial cell-derived ovarian carcinogenesis. Mol. Cell. Endocrinol. 2013; 382(1):46–54. [PubMed: 24055276]
- 91. Bradaric MJ, Penumatsa K, Barua A, Edassery SL, et al. Immune Cells in the Normal Ovary and Spontaneous Ovarian Tumors in the Laying Hen (Gallus domesticus) Model of Human Ovarian Cancer. PLoS One. 2013; 8(9):e74147. [PubMed: 24040191]
- 92. Lee JY, Jeong W, Lim W, Lim CH, et al. Hypermethylation and post-transcriptional regulation of DNA methyltransferases in the ovarian carcinomas of the laying hen. PLoS One. 2013; 8(4):e61658. [PubMed: 23613894]
- 93. Lim W, Jeong W, Kim J, Yoshimura Y, et al. Expression and regulation of beta-defensin 11 in the oviduct in response to estrogen and in ovarian tumors of chickens. Mol. Cell. Endocrinol. 2013; 366(1):1–8. [PubMed: 23159989]



#### **Figure 1.**

Lifespan of chickens summarized in the context of the agricultural industry and ovarian cancer onset window overlayed with potential research opportunities afforded by the animal. PK/PD = pharmacokinetics/pharmacodynamics, ADME = absorption, distribution, metabolism, and excretion.

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#### **Figure 2.**

Cross sectional illustration of a human ovary with an emphasis on the process of ovulation over ~14 days. (A) Cross sectional illustration of a chicken ovary with an emphasis on the process of ovulation over  $\sim$  27 hours.(B) Formalin fixed hematoxylin and eosin stained tissues of a fully functional healthy ovary showing immature (arrow) and F-series follicles at 1.25 $\times$  magnification (C) and the ovarian surface epithelium (OSE) at 40  $\times$  magnification (D).

**OSE** 

50 µm

## **Table 1**

Summary of the biomolecular characteristics identified in chicken ovarian cancer. Evidence notes: IHC = immunohistochemical staining, mRNA = targeted messenger RNA analysis, Global mRNA = global (chipbased) messenger RNA analysis, WB = Western blotting, ELISA = enzyme-linked immunosorbent assay, Flow Cyt. = flow cytometry, LC-MS/MS = liquid chromatography coupled to tandem mass spectrometry.





