

## *Coriolus versicolor* (Trametes) - A medicinal mushroom

- A *Basidiomycetes* macrofungi - member of the polyporaceae family
- First use in Traditional Chinese Medicine (TCM) in the Ming dynasty (16th century)
- High therapeutic potential
- Minimal toxicity
- Beneficial effects to general health
- Extracts known to be effective in promoting health of cancer subjects



### Bioactive compounds

- Polysaccharides-K or protein-bound polysaccharides (PSK)
- Basic  $\beta$ -glucan structure with 1-3 $\beta$ - and 1-4 $\beta$  linkages main chain and 1-3 and 1-6- $\beta$  branch points for every four 1-4 linkages
- High water solubility and present in systemic circulation 2-4 hrs after oral ingestion
- Stable in the blood circulation and distributes in BM, salivary gland, brain, liver, spleen, pancreas and tumour
- Does not interfere with other drugs nor affect hepatic drug-metabolizing enzymes
- PSK reaches the tumour tissue in the active form to exert anti-tumour activity
- Chemical modification of polysaccharide structure can enhance or attenuate antitumour activity

### Immunodulatory effects (direct effects on cells of the immune system)

PSK activate cells of the innate immune system that lead to the activation effector T cells.

- Activates the complement system and the thymus
- Enhances pro-inflammatory interferon, IL-1 and TNF- $\alpha$  production
- Enhances macrophage chemotaxis in tumour-bearing state
- Restores T cell function (DTH, cytotoxic T cells)
- Promotes localization of effector cells at tumour site
- Augments NK and LAK cell activity
- Enhances proliferation of CD4+ and CD8+T cells and activated T cells
- Promotes bystander killing of tumour cells by 'PSK'-antigen-specific cytotoxic T cells
- Induces cytokine gene expression in immune and inflammatory cells
- Activates T cells via monocytes/macrophages secreting IL-15
- Reduce immunosuppressive substances in tumour-bearing host
- Mediate anti-tumour activity via antigen-specific mechanisms
- Drives dendritic maturation to induce Th1 dominance
- Augments IL-2 production by gut mucosal CD4+ T cells via modulation of T cell receptor signalling
- Regulates TH1/Th2 balance and regulatory T-cells (Treg)
- Acts as a TLR2 agonist to mediate inhibition of tumour growth and CD8 T cells and NK cells

## Cellular and molecular targets

- Mediates NF- $\kappa$ B inhibition to augment drug-induced apoptosis
- Upregulates antioxidant Mn superoxide dismutase, Se-dep glutathione dismutase and glutathione S-transferase.
- Upregulates iNOS and NO production in PMN
- Suppresses CD57(+) T cells to improve survival of advanced gastric cancer patients
- Stimulate TNF- $\alpha$  secretion via activation of TLR4 receptor on macrophages
- Enhances docetaxel efficacy by inhibiting NF $\kappa$ B activation and surviving expression in gastric cancer cells
- Prevents apoptosis of circulating T cells induced by anti-cancer drug
- Inhibits prion activity involved in infectious neurodegenerative disease
- Induce maturation of immune-tolerant dendritic cells in combination with TGF- $\beta$  receptor I kinase inhibitor
- Prevents apoptosis of circulating T cells induced by anti-cancer drug in patients with gastric cancer.

## Chemopreventive and radioprotective effects

- Delays carcinogenic agent-induced carcinogenesis
- Inhibits spontaneous tumour development
- Protects chemo and/or radiation-induced normal cell injury through upregulation of MnSOD
- Suppresses chromatid damage and sister chromatid exchange in bone marrow
- MnSOD expression reduces tumour control radiation dose and tumourogenicity
- Reduces side effects when combined with low-dose chemotherapeutic drug, cisplatin

## Direct anti-neoplastic effects

- Sensitises tumour cells (enhanced expression of apoptosis and HLA Class 1) for elimination in the host
- Inhibit tumour cell proliferation via cytokine activities of immune and inflammatory cells
- Alters prostaglandin metabolism and therefore platelet aggregation and vascular adhesion
- Inhibits cytoskeletal function and motility (mobility), and therefore, interferes with extravasation process leading to metastasis
- Inhibits angiogenesis and therefore metastasis
- Mimics SOD activity to enhance sensitivity of tumour cells (for elimination by cancer treatment) whose SOD and coupling enzyme activities are lower than normal cells
- Suppresses tumour cell progression by increasing SOD (via inflammatory cytokine activities by decreasing TGF- $\beta$  and increasing IFN- $\gamma$ )
- Binds to TGF- $\beta$  and PDGF leading to inactivation
- Downregulates matrix metalloproteinases MMP2 and MMP9, uPA expression and TGF- $\beta$ 1 expression to reduce tumour cell invasiveness and metastasis
- Enhances HLA Class I and Class expression to promote immune surveillance and recognition
- Decrease cell growth and PCA production in androgen-sensitive prostate cancer cells
- Augment anti-tumour action by upregulating multi-drug resistance proteins without disrupting cell-cycle progression
- Prevent metastasis when used in combination with anti-cancer agent, docetaxel

## Early clinical studies

- Significant benefits when used with standard cancer treatment
- Positive results in cervical, esophageal, gastric, colorectal, bladder, nasopharyngeal and lung cancers as well as medulloblastoma, astrocytomas, oligodendrogliomas and leukemias
- Case reports also shows benefits in malignancies including sarcomas, hepatocellular carcinomas, cholangiocarcinomas, pancreatic carcinomas and ovarian cancers

## Randomised-controlled clinical trials

- Use for decades as an adjuvant cancer therapy for the treatment of stomach, colorectal, lung, stomach, breast, esophageal and nasopharyngeal cancers and leukemias
- RCT and meta-analysis confirm extended survival in colorectal and gastric cancers
- Adverse reactions have not been reported
- Symptoms such as coughing, nail pigmentation, constipation and diarrhoea have been reported
- Low grade haematological and GI toxicities have been reported but these may be due to cancer treatment

## Other potential uses

Normal tissue radioprotector, tumour radiosensitiser and chemoprotector

- Decreases tumour growth after radiation therapy in mice
- Enhances splenic cell colony formation
- Enhances lymphocyte infiltration into tumours, decreases risk of metastases
- Reduces or prevent radiation-induced congenital malformation and tetratogenic effects
- Increases radiosensitivity of tumours by SOD mimicry or induces expression of SOD and protective effect on normal cell
- Enhances effect of irradiation on carcinoma of the cervix
- Enhances anti-cancer activity of cisplatin
- Mediates NFκB inhibition to augment docetaxel-induced apoptosis in human pancreatic cells
- Reduces myelosuppression of cytotoxic chemotherapy
- Acts to reduce oxidative stress due to free radicals induced by chemotherapy
- Suppresses the increase in lipid peroxide and decrease in SOD activity in normal cell induced by treatment with cisplatin
- Augments lipid peroxide formation and the decrease in SOD in cancer cells induced by cisplatin

## Positive predictors of PSK-improved overall survival in cancer patients

- Carcinoembryonic antigen (CEA) levels > 65 yrs
- High NK cell numbers
- Positive delayed type hypersensitivity (DTH) by the tuberculin test
- Abnormal serum IAP levels
- Low CD57(+) T cell numbers
- Nuclear factor-kappa B activation
- Diffuse nuclear accumulation-type beta-catenin activation

## Regulatory status

- Prescribed as an adjuvant therapy agent in Japan for cancer treatment at a dose of 3 gm/day
- Complied with LD-50 test
- Marketed in the US as a class of mushroom immunochemicals
- Lists as a TGA complementary medicine product