

# **Tunneling Nanotubes: The Fuel of Tumor Progression?** Giulia Pinto, Christel Brou, Chiara Zurzolo

## ▶ To cite this version:

Giulia Pinto, Christel Brou, Chiara Zurzolo. Tunneling Nanotubes: The Fuel of Tumor Progression?. Trends in Cancer, 2020, 10.1016/j.trecan.2020.04.012 . pasteur-02941638

# HAL Id: pasteur-02941638 https://pasteur.hal.science/pasteur-02941638

Submitted on 17 Oct 2022

**HAL** is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers. L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.



Distributed under a Creative Commons Attribution - NonCommercial 4.0 International License

### 1 Tunneling Nanotubes: The Fuel of Tumor Progression?

- 2 Pinto Giulia<sup>1,2</sup>, Brou Christel<sup>1\*</sup>, Zurzolo Chiara<sup>1\*#</sup>
- 3
- 4 1. Unité de Trafic Membranaire et Pathogenèse, Institut Pasteur, UMR3691 CNRS,
- 5 28 rue du Docteur Roux, F-75015 Paris, France
- Sorbonne Université, ED394 Physiologie, physiopathologie et thérapeutique, F 75005 Paris, France
- 8 \* These authors contributed equally to this work
- 9 # Correspondence: chiara.zurzolo@pasteur.fr (C. Zurzolo)
- 10

## 11 Keywords

12 Tunneling nanotubes, cancer, cell-to-cell communication, glioblastoma

13

## 14 Abstract

15

Tunneling nanotubes (TNTs) are thin membrane tubes connecting remote cells and 16 allowing the transfer of cellular content. TNTs have been reported in several cancer 17 18 in vitro, ex vivo and in vivo models. Cancer cells exploit TNT-like connections to exchange material between themselves or with the tumoral microenvironment. Cells 19 20 acquire new abilities (e.g., enhanced metabolic plasticity, migratory phenotypes, 21 angiogenic ability, and therapy resistance) via these exchanges, contributing to 22 cancer aggressiveness. Here we review the morphological and functional features of TNT-like structures and their impact on cancer progression and resistance to 23 24 therapies. Finally, we discuss the case of glioblastoma, in which a functional and 25 resistant network between cancer cells in an *in vivo* model has been described for 26 the first time.

28 Cancer and Intercellular Communication

29

30 Cancer is among the leading causes of mortality worldwide, responsible for 1 in 6 31 deaths, according to the World Health Organization. Over the past decades, many 32 therapeutic strategies have proven their effectiveness and the overall cancer death rate has been reduced by 27% [1]. Several features of cancer cells make these 33 34 pathologies very aggressive and difficult to cure, such as their uncontrollable proliferative capacity and their ability to get nourishment through neo-formed blood 35 36 vessels, to infiltrate healthy tissues forming metastasis, to evade the immune system and, finally, to adapt to clinical treatments. In this context, intercellular 37 38 communication and particularly, cell-to-cell transfer of cellular material can contribute to each of the aforementioned characteristics, including treatment resistance. Over 39 40 the past 20 years, numerous studies have shown that that exosomes and exo-41 vesicles are able to carry malignant content (e.g. proteins, nucleic acids), likely helping the recipient cells to express genes supporting proliferation, colonization, 42 43 immune evasion or to recover from damage provoked by treatment [2,3]. Recent 44 work has highlighted a new communication mechanism implemented by tumor cells: 45 tunneling nanotubes (TNTs), which are physical channels providing cytoplasmic continuity between distant cells (Figure 1A). TNTs are thin, actin-based membrane 46 47 tubes that, in contrast to other cellular protrusions, listed in Table 1, are open-ended at their extremities [4,5]. They allow the transfer of various-sized cargoes (Figure 1), 48 49 such as small molecules (e.g. Ca2+ ions), macromolecules (proteins, nucleic acids etc.) and even organelles (vesicles, mitochondria, lysosomes, autophagosomes, 50 51 etc.) [6]. Several cells can be connected by TNTs, possibly leading to the formation 52 of a functional cellular network [7].

53 TNTs were first identified in 2004 by Rustom and colleagues in cultures of 54 pheochromocytoma PC12 cells [4]. Later, several other publications reported the presence of "TNT-like structures", (heterogenous intercellular connections, defined 55 on the basis of their morphology), in many other cell types in *in vitro* cultures, 56 including astrocytes [8], immune cells [9], as well as in tumor cancer cell lines, where 57 often their occurrence was correlated with more aggressive tumor phenotypes 58 [10,11]. Beyond tumors, TNT-like structures have been observed in early 59 60 developmental stages in various organisms [12] as well as in relation to stressinduced responses, such as oxidative stress [8,13], allowing the discharge of cellular 61

62 waste or dangerous materials. Similarly, they can be used as a route for the dissemination of pathogens such as HIV virus [14,15], bacteria [9], prions and 63 amyloids fibrils in the case of neurodegenerative diseases [16-21]. Although TNT-64 like structures have been clearly identified as physical and functional entities in solid 65 tumors [22-26], the existence of these connections in whole healthy organs or 66 tissues is still a matter of debate. In this manuscript we review the studies on TNTs 67 and their heterogeneity in cancers and their possible role in tumor progression and 68 development of treatment -resistance, with a particular focus on glioblastoma (GBM). 69

70

#### 71 Detection of TNT-like structures *in vitro* and *in vivo* in cancer

72

73 The first identification of TNTs occurred in PC12 cells, which are derived from a rare 74 rat tumor of adrenal gland tissue [4]. Subsequently, many other cancer cell lines 75 have been shown to form membranous connections bridging distant cells as summarized in Table 1. Of importance for this review, TNT-like structures were also 76 observed in primary cells directly obtained from patients, for example in squamous 77 78 cell carcinoma [24,25], mesothelioma [10,22] and different forms of leukemia [27-79 29]. Cancer cells can form heterotypic connections with cells of the tumor microenvironment, including mesenchymal [30], endothelial [11] and immune cells 80 81 [31]. Cross-talk with the tumor microenvironment plays a significant role in sustaining 82 cancer progression, providing nutrients or buffering metabolic stress [32], and 83 interaction with immune cells can contribute to overcoming immunosurveillance [33]. While it is possible to identify TNT-like structures between the same or different cell 84 85 types in cell cultures using light microscopy [34], their identification in a more 86 complex context such as animal models or tumor resections is still very challenging. 87 This is because no specific marker for these structures has been identified yet, and the optical resolution of classical microscopy doesn't allow for the morphological 88 characterization of these connections in a tissue environment [5,12]. Therefore, the 89 90 heterogeneity and lack of structural characterization of TNTs represent a major problem for their investigation. Because of their morphological heterogeneity and 91 92 poor molecular and structural characterization, the intercellular connections observed to-date have been named differently in different studies (nanoscale conduit 93 94 [11], tunneling nanotubes [22], intercellular bridges [12] or membranous tunneling tubes [24]). This raised both confusion and skepticism in the field [35], and calls out 95

96 for both more rigorous definition and more accurate technical approaches to study them. We propose to call TNTs only the connections that fulfill the following 97 98 characteristics: i) continuous membrane connections with the plasma membrane of 99 the connected cells, ii) non-adherent to substratum, iii) containing actin, iv) proven 100 cargo transport, and v) open-ended (see Table 1). On the other hand, we will refer to 101 "TNT-like" connections when one or more of these properties is not fulfilled or has 102 not been assessed. The first documentation of TNT-like structures ex vivo in solid 103 tumors was provided by the laboratory of Emil Lou in 2012, which described 104 mitochondria-containing connections in tissue sections of a mesothelioma resected 105 from a patient [22]. These observations were followed by others, showing various 106 intercellular connections in squamous cells carcinoma [24,25], in ovarian [23] and 107 pancreatic cancer [26] and in human glioblastoma cells engrafted into mice models [36] (see Table 2). Little is known about the structural and functional features of 108 109 these connections in vivo. In some cases, however, the presence of mitochondria and possibly other cargoes inside them supports the hypothesis that these structures 110 111 may be open-ended as canonical TNTs and may allow the transfer of cargoes.

112

#### 113 Morphology and structure of TNTs

114

115 Despite the lack of a specific marker, TNTs can be identified in cell culture by 116 fluorescent labelling of the plasma membrane and cytoskeleton components and 117 observed by using light microscopy, (Figure 1B). However, specific fixation protocols 118 are needed to preserve their delicate and fragile nature [34], and functional assays 119 have to be performed in addition to morphological studies to fulfill the definition of 120 TNTs (see above). TNTs exhibit high variability in their morphology, in terms of 121 length and thickness, and in cytoskeleton content, specifically regarding the 122 presence/absence of microtubules [34]. Nevertheless, they always appear as actinbased connections and their presence and functionality can be affected by inhibitors 123 124 of actin polymerization (e.g. latrunculin, cytochalasin) (Table 2). In cancer cellular 125 models, the observed connections can range from tens to several hundreds of 126 microns [10,11,25]. In some tumor tissues, exceptional connections longer than 500 127 µm were observed [24,36]. Whereas, in most of the studies in vitro, the diameter of 128 the connections in tissues was in the nanoscale (<1  $\mu$ m), microscale connections (>1 129 µm) [24,36] were also present. However, these long and thick connections are fitting

130 best with the definition of tumor microtubes rather than TNTs (Table 1). At present, we do not know whether TNTs display different morphologies in vitro or in vivo (e.g. 131 132 filopodia, mitotic bridges) (e.g. filopodia, mitotic bridges) or whether nanoscale 133 connections are detectable in the complexity of the tissue. The thickness of TNTs 134 also correlates with their cytoskeleton content, with protrusions containing microtubules having larger diameters [9]. However, some cancers seem to present 135 136 both types of connections: those containing only actin and those with actin and 137 microtubules [11,25].

Few studies have addressed the ultrastructure of TNTs in cancer models with the 138 139 use of electron microscopy [37,38]. A deeper structural analysis of TNTs, using a 140 combination of cryo-fluorescence microscopy with cryo-electron microscopy, was 141 conducted recently. This study used a catecholaminergic-a-differentiated (CAD) cell line, established from a brain tumor in a transgenic mouse, and SH-SY5Y cells, 142 143 isolated from a neuroblastoma patient [5]. By using experimental conditions set up to better preserve TNT structure, this study has shown that in these two types of 144 145 neuronal cell lines, TNTs can be composed of multiple individual tubes (named 146 iTNTs) held together by N-cadherin-positive structures and often open-ended at their 147 tips [5]. Nonetheless, whether iTNTs exist in different cell types and tumors, and/or 148 *in vivo* remains an open question.

149

#### 150 Functional approaches

151

The distinguishing characteristic of TNTs with respect to other cellular extensions 152 153 (e.g. filopodia, mitotic bridges, see Table 1) is their ability to transfer cellular material. 154 Some works provided qualitative evidence of cargoes inside TNT-like structures 155 observed in different cancers [22,37], without proving that actual transfer had 156 occurred and without excluding cell division as the mechanism by which the cellular material was shared. To exclude the latter possibility, membrane vesicles or 157 158 organelles such as mitochondria or lysosomes can be labelled in a population of cells defined as donors. This population is then co-cultured with an acceptor 159 population (differently labelled) to further detect and quantify the cargoes transferred 160 161 in the acceptors by fluorescence microscopy (in fixed or live condition) or flow 162 cytometry [34]. The co-culture has to be performed placing the two populations in 163 direct physical contact at an appropriate cell density that favors the formation and

164 detection of TNTs. In order to evaluate secretion as a possible mechanism of transfer, the two populations can be separated by a filter which allows the transfer of 165 166 secreted material, or they can be grown in different dishes and the acceptor 167 population challenged with the supernatant from donor cells [34]. The weakness of 168 this approach is that it only allows the direct transfer (cell contact-mediated) of the labelled cargo to be determined. It does not consider other materials that could be 169 170 transported through the same connections, including the ones that could be shared 171 in the opposite direction. To overcome this limit, other approaches such as mass 172 spectrometry [38] and transcriptomic analysis [11] have been recently applied to 173 detect alterations at the proteome and transcriptome levels. In these examples, the 174 acceptor population acquired pro-tumoral features correlated to the transfer of 175 proteins or miRNA involved in cell survival, drug response or cellular reprogramming. 176 All these approaches show how TNTs might be differently exploited in various types 177 of cancer (Table 2). However, we still don't know if the variability observed at the TNT level in the various studies and in the various cancers corresponds to different 178 179 roles for TNTs in the cancers or just to the different questions addressed. Few approaches have studied the dynamics and transfer ability of these structures in 180 181 *vivo*. Using multiphoton microscopy, connections between human tumor cells were 182 detected in mouse xenografts [36] (Table 3); while the transfer between human and 183 murine cells was quantified by amplification of species-specific DNA sequences or detection of labelled material by flow cytometry [11,28,29]. Although powerful and of 184 185 great interest, these approaches have made it possible to monitor the transfer without specifically identifying its mechanism, in particular without excluding the 186 187 secretion mechanism. In conclusion, due to the limitations of the *in vivo* models (e.g. 188 TNT preservation and observation), the field needs to pursue the study of these 189 fragile structures in cellular models, as much as possible representative of the 190 tumoral tissue (eg, patient-derived cells), which allow to address more easily specific questions on the mechanism and content of the transfer and its impact on the 191 192 receiving cells. In parallel, new tissular models recapitulating the tumoral context as 193 tumor-derived organoid cultures, need to be implemented in the field. Finally, additional efforts need to be made to overcome the technical limitations of the in vivo 194 195 study of TNTs to finally unravel their role in physio-pathological contexts beyond their 196 morphological diversities.

197

#### 198 **Tumoral context might favor TNT connectivity**

199

200 Since their discovery, TNTs have been described as a mechanism of adaptive 201 response to cellular stress. Interestingly, several cancer-related environmental 202 conditions have been shown to stimulate their formation. Reactive oxygen species 203 (ROS), known to be intensively produced by cancer cells [39], have been shown to 204 induce TNT formation in different contexts, including cancer [8,13,20,29,40] (Table 205 1). Moreover, treatments such as chemo and radiotherapy induce ROS production 206 [41]. Hypoxia, typical of the denser tumor regions, has been found to be a TNT 207 inducer in ovarian [42] and prostate cancers [43]. Interestingly, other conditions mimicking the tumor microenvironment in vitro stimulate TNT-mediated 208 209 communication, such as acidic pH, hyperglycemia, serum deprivation [22,43] and 210 exposure to TNF-a normally produced during inflammation [44]. Finally, different signaling pathways that are often dysregulated in cancer have been shown to be 211 involved in TNT formation, like PI3K/Akt/mTor [37,40,42,43], K-RAS [45] and p53 212 213 [13,40]. These signaling cascades could activate downstream proteins, such as M-214 Sec in the case of immune cells [46], which are involved in actin remodeling and 215 polymerization and have been shown to induce TNT formation [47]. Altogether, these 216 findings suggest that the tumor context, globally experienced as a stress by cells, 217 provides the conditions that favor TNT formation and communication. In turn we can 218 speculate that this route for intercellular communication allowing cells to share 219 material may result in a beneficial effect for the connected cancer cells, as described 220 in the following sections.

221

#### 222 Roles of TNT in cancer progression

223

224 The ability of cancer cells to interconnect among themselves is correlated to more aggressive cancer phenotypes. For example, in ovarian and breast cancers, highly 225 226 malignant and metastatic cells are more prone to interconnect in tumor networks 227 than their less aggressive counterparts [10,11]. Also, in gliomas, where for the first 228 time tumors have been described as a functional inter-communicating network, there 229 is a correlation between extended interconnectivity and the most aggressive grades 230 of tumors and their poorer therapeutic outcome in response to radiotherapy [36]. 231 However, the mechanisms of treatment resistance have not been fully elucidated yet. Different cancers could be applying different strategies to protect themselves from the therapeutic attempts and eventually a unique mechanism may be determined. Below we review the possible roles of TNT-like connections in different types of cancer and how they affect cancer progression. We then focus on the specific example of GBM.

237

### 238 TNT-mediated transfer can promote aggressive features

239

TNTs seem to drive the acquisition of aggressive features in the receiving cells through the transfer of different cellular materials. As we will see, cells may use TNTs as a route to get rid of dangerous material (Figure 2A, C). Another possibility is that the uptake of cellular material such as miRNA, mitochondria or other sets of proteins might drive phenotypic modifications of the recipient cells (Figure 2A, B).

In the case of breast cancer, TNT-mediated contacts from cells of the tumoral 245 environment such as macrophages seem to drive the acquisition of an invasive 246 phenotype in the cancer cells [31]. Although it is not clear how this contact could 247 248 induce this phenotypic switch, mitochondria appear to be good candidates for 249 transferred cargo that could induce invasiveness. In fact, breast cancer cells have 250 been shown to be able to receive mitochondria from mesenchymal cells (MSCs) 251 through TNT-like structures [30]. Further, the uptake of isolated mitochondria derived from MSCs, by a protocol defined as MitoCeption, was able to induce migratory 252 253 ability and cellular proliferation [48]. Many studies have shown TNT-mediated 254 mitochondria transfer to be possible [24,25,30,49]; although the possibility that 255 mitochondria could be transferred through the supernatant should be considered, as 256 a few reports have suggested that the mitochondria could be released and taken up 257 by neighboring cells [50]. Transfer of mitochondria has also been found to restore 258 tumorigenic potential in cells devoid of mitochondrial DNA [51,52], although these studies did not address the mechanism of mitochondrial transfer. Furthermore, TNT-259 mediated traffic of mitochondria was correlated to increased invasiveness in bladder 260 cancer [37]. Here, different cancer cell lines in co-culture could exchange functional 261 262 mitochondria with each other, possibly stimulating the migratory capacity of the 263 acceptor cells, as assessed by in vitro assays. Further, their ability to form larger 264 tumors with a higher vascularization index was stimulated when implanted in nude mice. In a second study, additional evidence suggests that the acquisition of these 265

pro-tumor properties might be due to TNT-mediated transfer of miRNA from the most
aggressive to the least aggressive cells leading to the activation of the Deptor-mTor
signaling pathway, an important downstream mediator of cancer cell proliferation and
motility [53].

270 Endothelial cells (ECs) play a critical role in physiological and tumoral vascularization 271 and their angiogenic potential might be regulated by TNT-mediated interactions. 272 TNT-like connections sprouting from ECs or pericytes have been identified in 273 sections of developing human cerebral cortex and human glioblastoma, two contexts 274 were the process of vascularization is intensively active [54]. Moreover, ECs 275 experiencing chemotherapy stress are able to receive mitochondria from MSCs via 276 TNT connections and this transfer could rescue the damaged cells, promoting cell 277 proliferation and restoring migratory and angiogenic abilities [55]. Furthermore, an 278 elegant work, published by Connor and colleagues [11], has shown that TNT-279 mediated transfer from metastatic cancer cells to ECs can induce an alteration of the miRNA profile of the receiving cells. This work showed for the first time TNTs as a 280 281 route for the dissemination of oncogenic material that resulted in reprogramming of 282 the ECs. Altogether, the current evidence suggests that TNT-mediated transfer of 283 mitochondria and mRNA could stimulate invasiveness, proliferation and angiogenic 284 ability.

285

#### 286 TNTs can support therapy resistance

287

288 Intercellular communication through TNT-like structures and resistance to therapies 289 appear to be tightly correlated. As for the other cancer features that might be driven 290 by contact-mediated transfer of cargoes, TNT-like structures may provide a way for 291 distributing harmful substances and cellular wastes, or sharing defensive tools 292 against treatment, such as mitochondria, miRNA and specific factors (Figure 2). TNT-mediated communication appears to be stimulated by radiotherapy, which 293 294 causes free radical production, known to be TNT-inducers [41], radiofrequency 295 treatment [56] and chemotherapy [43]. A recent study in prostatic cancer has shown that the chemotherapeutic blockage of the androgen receptor, which induces 296 297 metabolic stress, enhances TNT-like structure formation [43]. Disrupting these 298 connections by cytochalasin D sensitizes prostatic cancer cells to treatment-induced 299 cell death, suggesting that the presence of this stress-induced network favors cancer 300 cell survival upon treatment. In this study, lysosomes, mitochondria and stress-301 induced chaperones were observed inside the TNT-like structures. Therefore, it is 302 possible that transferring these cellular components may benefit stressed cells. 303 Conversely, TNT-like structures could be used as a way to get rid of damaged 304 organelles or autophagosomes [25] and possibly other dangerous substances, such as ROS, produced in response to treatments, or the drugs themselves (Figure 2C). 305 306 Transfer of a soluble drug via TNT-like structures has also been observed in both 307 pancreatic and ovarian cancer cellular models [26]. Here, multidrug-resistant cell 308 lines use TNT-like connections to redistribute doxorubicin from chemo-resistant 309 toward chemo-sensitive cells, leading to cell death of the latter and enrichment of the 310 therapy-resistant population. Although the possibility of using TNT-like structures as 311 a drug outflow pathway must be considered, there are currently no quantitative data supporting the actual relevance of this mechanism in vivo. Also, this work raises 312 313 questions on the specificity of the transferred materials through TNTs, and whether this occurs through an active or passive mechanism of redistribution. 314

315 As mentioned above, TNT-based networking allows the exchange of "defensive 316 tools" against treatment (Figure 2A). The transfer of mitochondria has been shown to 317 modulate the response to treatments in a beneficial manner for the recipient cells 318 [49,57,58], impacting on their cellular metabolism [48,58], rescuing their aerobic 319 respiration [59] and providing metabolic support against treatment-related stress [58]. This was first observed in PC12 cells, where delivery of healthy mitochondria 320 321 through TNT-like structures from untreated to UV-injured cells protected the latter from apoptosis [60]. This rescue mechanism is also applied by MSCs to 322 323 chemotherapy treated ECs [55]. Both MSCs and ECs have been found to transfer 324 mitochondria to cancer cells of different origins, resulting in an improved resistance 325 to doxorubicin in the cells that received the transfer [30]. This mechanism appears to 326 be critical in different forms of leukemia. Leukemic cells, engrafted in mice bone marrow, were able to obtain and receive mitochondria from stromal cells with an 327 impact on cancer cell metabolism [27,28,58], cell proliferation [58,61] and 328 329 chemoresistance [27]. The disruption of this transfer increased the sensitivity of the 330 cancer cells to various chemotherapies [27]. This suggests that MSCs could play a 331 protective role toward tumor cells by eliminating the damaged mitochondria they 332 receive, thereby stabilizing the homeostasis of the cancer population, and possibly 333 providing metabolic support. Moreover, chemotherapy-induced ROS production can

334 enhance mitochondria transfer [28], again suggesting that mitochondrial transfer may be a mechanism for adaptation to treatment. Interestingly, the inhibition of CD38, 335 336 previously described to promote mitochondrial release from astrocytes [50], could 337 prevent the contact-mediated mitochondria transfer from MSCs to leukemic cells, 338 resulting in an increased apoptosis of the leukemic cells and improved mice survival [29]. This opens the possibility of specifically targeting mitochondria transfer at the 339 340 clinical level. Following this evidence, others have assessed the communication 341 between stroma and leukemic cancer cells. By using mass spectrometry they 342 revealed the transfer of specific factors, like stress-induced chaperons, together with 343 cellular vesicles, with a potential role in survival and adaptation [38]. Other cargoes 344 such as miRNA can be transferred between cells leading to the acquisition of 345 therapy resistance. Thayanithy and collaborators [23] have shown that the transfer of miR-19 and miR-199a occurred in heterotypic connections between different cancer 346 347 cell lines of the same tumor, osteosarcoma and ovarian cancer, respectively. Specifically, miR-199a appears to be differentially expressed in chemo-sensitive and 348 chemo-resistant cells, suggesting that the transfer of this particular miRNA could 349 350 drive treatment-resistant features in the receiving cells. Altogether, TNTs could be a 351 beneficial feature for cancer cells and the ability to exploit this efficient route of 352 communication may be positively selected during treatment.

353

## 354 Glioblastoma: an "exemplary" or "peculiar" case of TNT-like networks?

355

Among the deadliest types of cancer, GBM stands out for its aggressiveness and 356 357 resilience in response to treatment. GBM is the most undifferentiated and invasive 358 cancer within the gliomas and it is classified as a IV grade tumor. Surgery followed 359 by chemo and radiotherapy was insufficient to eradicate completely cancer cells from 360 the brain, although the mean survival of patients increased from less than one year to about 15 months [62,63]. Currently no treatment is effective in preventing cancer 361 362 relapse and the reasons for therapy failure are poorly understood. Some studies 363 correlate the occurrence of relapse with elevated intra-tumoral heterogeneity: distinct 364 molecular profiles coexist and exhibit differential therapeutic responses [64]. In 365 particular, glioblastoma stem cells (GSCs) have been found to be the most resistant 366 to treatments and likely are at the origin of relapses [65]. Moreover, treatments can

367 positively modulate tumor heterogeneity by inducing cellular plasticity and trans-368 differentiation [66].

As outlined above, in the last few years, various studies have supported the 369 370 possibility that intercellular communication through cell-to-cell connections might be 371 a critical mechanism for treatment failure and tumor relapse. GBM is the first case 372 where a functional and resistant network among cancer cells has been described in 373 an *in vivo* model [36]. Specifically, GSCs, coming from patients with different grades 374 of glioma, were implanted in nude mice brains, where they developed a multicellular 375 and communicative network. In this study, Winkler and collaborators demonstrated 376 that highly interconnected tumors, which corresponded to higher malignant grades of 377 the original tumor, were found to be more resistant to irradiation [36]. Cancer cells 378 were shown to be able to propagate ion fluxes by long and thick membrane 379 protrusions, containing both actin and microtubules, which the authors termed tumor 380 microtubes (TMs), see Table 1. Moreover, the same authors suggested that TMs could be essential for driving the repopulation of a surgically resected area in GBM 381 382 mouse models [67] (Figure 3). The formation of TMs appears to be dependent on the 383 expression of connexin 43 (Cx43), a monomeric component of GAP-junctions, and 384 growth-associated protein 43 (GAP-43), a crucial protein for neurite formation, 385 regeneration, and plasticity. When Cx43 or GAP43 were knocked down, the number 386 of TMs decreased and the sensitivity to radiotherapy increased. Cx43 is a known regulator of the intracellular concentration of Ca<sup>2+</sup> [68] and it has been also described 387 388 to play a critical but controversial role in GBM progression, acting both as tumor suppressor and tumor inducer, promoting growth, cell migration and resistance to 389 390 apoptosis [69]. Interestingly, Gerdes and colleagues [70] reported earlier that a 391 subset of TNTs observed in kidney-derived cells contained Cx43 forming a hemi-392 connexon or a GAP-junction at their tip. It was also proposed that GAP-junctions 393 could mediate the transfer of electrical signals in electrically coupled TNTs [6]. 394 Nonetheless, the presence of GAP-junctions along TNT-connections would not allow 395 the transfer of any cargo of a size superior to their pore size (1 kDa) [71], like organelles or macromolecules. In the case of TMs the authors did not report transfer 396 of conventional TNT-cargoes, such as mitochondria or vesicles, within their lumen, 397 398 although they did observe nuclei travelling along these connections from a healthy 399 cell to a cell damaged by the treatment [36]. In addition, TMs display neurite-like 400 features, as they have been described to be post-synaptic targets for the surrounding neurons. Indeed axons can dock onto TMs and generate synchronized
calcium transients in glioma networks via AMPA receptors [72,73], Further,
depolarization of the post-synaptic glioma cells promoted TM proliferation [73] and
invasion [72].

405 Overall, the nature of TMs and the mechanisms at stake in this cellular network still 406 need to be unraveled. As for their morphological appearance and physical properties 407 TMs are very different from TNTs because they are not open-ended, they are much thicker (1.7 µm on average), more stable in time [74] and contain both actin and 408 409 microtubules, thus resembling more of a neuritic extension than TNTs [75] (see 410 Table 1). Nevertheless, direct cell-to-cell communication seems to play a key role in 411 the resistance to treatments in GBM and growing evidence suggests that the transfer 412 of cargo mediated by open connections could contribute to tumor progression as 413 shown previously in other cancer forms. A few in vitro studies suggest that GBM cells are capable of transferring cellular material through thinner TNT-like structures. 414 U-87 and U-251 cell lines, common GBM cellular models, can form TNT-like 415 structures [76–78] (see Figure 1), and their formation can be increased in response 416 417 to external stimuli, such as protein aggregate uptake or cocaine administration 418 [77,78]. Moreover, preliminary studies show that communication between astrocytes and glioma cells, known to facilitate cancer progression [79] can occur through TNT-419 420 like structures [13,76] and the transfer of mitochondria seems to modulate GBM cell 421 abilities in favor of a more proliferative [13] and drug-resistant state [80]. However, 422 the study of intercellular exchange of material needs to be elevated in more complex 423 and representative tumor models. The fact that GBM cells were able to form a 424 network in mice xenografts, but failed in forming connections when cultured in vitro 425 [67], suggests that TMs may exist only in the *in vivo* condition. It is possible that 426 GBM networks are composed of several types of connections that vary in size and 427 properties: open-ended TNTs, synaptic-like connections and/or thick GAP-junctionlinked protrusions such as TMs (Figure 3). 428

429

#### 430 Concluding Remarks and Future Perspectives

431

In the last decade, growing evidence has supported the existence and the
importance of intercellular communication based on TNT-like connections in various
tumors. Several cancer cell types have been shown to grow such connections and

communicate through them in culture, and similar structures have been found in 435 tumor sections [22], proving their existence in real tumors. Different studies have 436 437 described TNT-like structures with diverse morphologies and characteristics; 438 therefore, the ability to transfer cellular material has been used to define them 439 functionally rather than structurally. Cancer is one of the few contexts where TNTs have been functionally described, whereby the transfer of cellular cargoes has been 440 441 shown to have an impact on the behavior of the recipient cells and lead to further development of the disease. However, fundamental questions still remain regarding 442 443 the structural diversity of the different protrusions, as well as the molecular 444 determinants and the signaling pathways that would stimulate their growth in cancer 445 cells, compared to non-cancer cells.

446 Until now, the outcome of the transfer has been more often addressed as impacting pre-determined features. For example, studies have investigated whether the 447 unilateral transfer of a specific tagged cargo affected the migratory capacity or 448 angiogenesis of the recipient cells. The observation of a specific cargo transfer does 449 450 not necessarily implicate a role for that specific cargo, since other material, not 451 detected because it is non-labeled, could be transported through the connections 452 and lead to changes in the partner cells. Very few studies have addressed the 453 question globally, designing experiments to study the alteration induced by the 454 transfer in the receiving cells at the transcriptomic [11] or proteomic [38] level. Even 455 less work, if any, has addressed the changes under the assumption that bilateral 456 transfer could occur and modify the fate of each one of the two connected cells. Moreover, the mechanisms by which the transfer of cargoes mediated by TNTs 457 458 impacts on migratory or angiogenic cell ability remain largely unknown. In the case of 459 resistance to treatments, the acquisition of cargoes, such as mitochondria and 460 miRNA, could be the direct cause of enhanced regrowth potential [51,52] or 461 transcriptomic reprogramming [23], respectively, leading to the establishment of a more resistant phenotype. In other cases, the treatment itself seems to induce TNT 462 463 mediated communication, which probably acts as the mechanism in response to the induced stress [29,55], protecting the cells from the induced damages. Overall, the 464 ability of certain cancer cells to exploit TNTs as mechanisms of communication might 465 be positively selected during treatment, favoring such cells to become the majority 466 467 (see Outstanding Questions Box).

To address the complexity of the real pathology and also the diversity of TNT-like 468 469 connections, the use of models representative of the tumor environment is required. 470 Many of the studies reported here were carried out in cell lines in vitro. Only more 471 recent work has addressed the study of TNT-like structures with the use of patient-472 derived xenografts in mice. Based on current knowledge it appears that blocking 473 TNT-like connectivity could be a promising strategy to fight cancer, eventually 474 hindering cancer progression and sensitizing tumor cells toward treatments. A 475 couple of drugs have been described as able to specifically inhibit TNT formation in cell culture [81,82], but these need to be tested in cancer mouse models. 476 477 Conversely, TNTs have also been used as a route to diffuse therapeutics, like drugs 478 [26] and nanoparticles [76], affecting predominantly the network of connected cancer 479 cells. Certainly, a deeper understanding of TNT-based communication is critical for a better comprehension of cancer progression and treatment resistance, and in future 480 481 years this knowledge could lead to the development of new, more effective therapies. 482

483

#### 484 Acknowledgements

485

This work was funded by grants from HTE (HTE201502) and Institut National du Cancer (PLBIO18-103) to CZ, and Fondation ARC pour la recherche sur le cancer to GP (DOC20190508549). GP is supported by HTE and Fondation ARC. We also thank Inés Sáenz de Santa María Fernández, Maura Samarani and Diego Cordero Cervantes for critical reading.

#### 491 **References**

#### 492

- 493 1 Siegel, R.L. et al. (2019) Cancer statistics, 2019. CA Cancer J Clin 69, 7–34
- 494 2 Ruivo, C.F. *et al.* (2017) The Biology of Cancer Exosomes: Insights and New
  495 Perspectives. *Cancer Res.* 77, 6480–6488
- Sheehan, C. and D'Souza-Schorey, C. (2019) Tumor-derived extracellular
  vesicles: molecular parcels that enable regulation of the immune response in
  cancer. *J. Cell. Sci.* 132,
- 499 4 Rustom, A. *et al.* (2004) Nanotubular highways for intercellular organelle
  500 transport. *Science* 303, 1007–1010
- 501 5 Sartori-Rupp, A. *et al.* (2019) Correlative cryo-electron microscopy reveals the 502 structure of TNTs in neuronal cells. *Nat Commun* 10, 342
- 5036Abounit, S. and Zurzolo, C. (2012) Wiring through tunneling nanotubes from504electrical signals to organelle transfer. J Cell Sci 125, 1089–1098
- Ariazi, J. *et al.* (2017) Tunneling Nanotubes and Gap Junctions-Their Role in
  Long-Range Intercellular Communication during Development, Health, and
  Disease Conditions. *Front Mol Neurosci* 10, 333
- 508 8 Zhu, D. *et al.* (2005) Hydrogen peroxide alters membrane and cytoskeleton
  509 properties and increases intercellular connections in astrocytes. *J. Cell. Sci.* 118,
  510 3695–3703
- 9 Onfelt, B. *et al.* (2006) Structurally distinct membrane nanotubes between human
  macrophages support long-distance vesicular traffic or surfing of bacteria. *J. Immunol.* 177, 8476–8483
- 514 10 Ady, J.W. et al. (2014) Intercellular communication in malignant pleural
- 515 mesothelioma: properties of tunneling nanotubes. *Front Physiol* 5, 400

516 11 Connor, Y. et al. (2015) Physical nanoscale conduit-mediated communication

- 517 between tumour cells and the endothelium modulates endothelial phenotype.
- 518 *Nature Communications* 6, 8671
- 519 12 Korenkova, O. *et al.* (2020) Fine intercellular connections in development: TNTs,
  520 cytonemes, or intercellular bridges? *Cell Stress* 4, 30–43
- 521 13 Zhang, L. and Zhang, Y. (2015) Tunneling nanotubes between rat primary
- 522 astrocytes and C6 glioma cells alter proliferation potential of glioma cells.
- 523 *Neurosci Bull* 31, 371–378

- 524 14 Sowinski, S. *et al.* (2008) Membrane nanotubes physically connect T cells over
  525 long distances presenting a novel route for HIV-1 transmission. *Nat. Cell Biol.* 10,
  526 211–219
- 527 15 Souriant, S. *et al.* (2019) Tuberculosis Exacerbates HIV-1 Infection through IL528 10/STAT3-Dependent Tunneling Nanotube Formation in Macrophages. *Cell Rep*529 26, 3586-3599.e7
- 530 16 Gousset, K. and Zurzolo, C. (2009) Tunnelling nanotubes: a highway for prion
  531 spreading? *Prion* 3, 94–98
- 532 17 Zhu, S. *et al.* (2015) Prion aggregates transfer through tunneling nanotubes in
  533 endocytic vesicles. *Prion* 9, 125–135
- 18 Abounit, S. *et al.* (2016) Tunneling nanotubes: A possible highway in the
  spreading of tau and other prion-like proteins in neurodegenerative diseases. *Prion* 10, 344–351
- 537 19 Abounit, S. *et al.* (2016) Tunneling nanotubes spread fibrillar α-synuclein by
   538 intercellular trafficking of lysosomes. *EMBO J.* 35, 2120–2138
- 539 20 Victoria, G.S. and Zurzolo, C. (2017) The spread of prion-like proteins by
  540 lysosomes and tunneling nanotubes: Implications for neurodegenerative
  541 diseases. *J. Cell Biol.* 216, 2633–2644

542 21 Gousset, K. *et al.* (2009) Prions hijack tunnelling nanotubes for intercellular
543 spread. *Nat. Cell Biol.* 11, 328–336

- 544 22 Lou, E. *et al.* (2012) Tunneling Nanotubes Provide a Unique Conduit for
  545 Intercellular Transfer of Cellular Contents in Human Malignant Pleural
  546 Mesothelioma. *PLoS One* 7,
- 547 23 Thayanithy, V. *et al.* (2014) Tumor-stromal cross talk: direct cell-to-cell transfer of
- oncogenic microRNAs via tunneling nanotubes. *Transl Res* 164, 359–365
- 549 24 Antanavičiūtė, I. *et al.* (2014) Long-distance communication between laryngeal
  550 carcinoma cells. *PLoS ONE* 9, e99196
- 551 25 Sáenz-de-Santa-María, I. *et al.* (2017) Control of long-distance cell-to-cell
- communication and autophagosome transfer in squamous cell carcinoma via
  tunneling nanotubes. *Oncotarget* 8, 20939–20960
- 26 Desir, S. *et al.* (2018) Chemotherapy-Induced Tunneling Nanotubes Mediate
  Intercellular Drug Efflux in Pancreatic Cancer. *Sci Rep* 8, 9484

- 556 27 Wang, J. *et al.* (2018) Cell adhesion-mediated mitochondria transfer contributes
  557 to mesenchymal stem cell-induced chemoresistance on T cell acute
  558 lymphoblastic leukemia cells. *J Hematol Oncol* 11,
- 559 28 Marlein, C.R. *et al.* (2017) NADPH oxidase-2 derived superoxide drives
  560 mitochondrial transfer from bone marrow stromal cells to leukemic blasts. *Blood*561 130, 1649–1660
- 562 29 Marlein, C.R. *et al.* (2019) CD38-Driven Mitochondrial Trafficking Promotes
  563 Bioenergetic Plasticity in Multiple Myeloma. *Cancer Res.* 79, 2285–2297
- 30 Pasquier, J. *et al.* (2013) Preferential transfer of mitochondria from endothelial to
   cancer cells through tunneling nanotubes modulates chemoresistance. *J Transl Med* 11, 94
- 31 Hanna, S.J. *et al.* (2019) Tunneling nanotubes, a novel mode of tumor cellmacrophage communication in tumor cell invasion. *J. Cell. Sci.* 132,
- 32 Yuan, Y. *et al.* (2016) Role of the tumor microenvironment in tumor progression
  and the clinical applications (Review). *Oncol. Rep.* 35, 2499–2515
- 33 Sharma, P. *et al.* (2017) Primary, Adaptive and Acquired Resistance to Cancer
  Immunotherapy. *Cell* 168, 707–723
- 34 Abounit, S. *et al.* (2015) Identification and Characterization of Tunneling
  Nanotubes for Intercellular Trafficking. *Curr Protoc Cell Biol* 67, 12.10.1-21
- 575 35 Gurke, S. *et al.* (2008) The art of cellular communication: tunneling nanotubes
  576 bridge the divide. *Histochem. Cell Biol.* 129, 539–550
- 36 Osswald, M. *et al.* (2015) Brain tumour cells interconnect to a functional and
  resistant network. *Nature* 528, 93–98
- 579 37 Lu, J. *et al.* (2017) Tunneling nanotubes promote intercellular mitochondria
  580 transfer followed by increased invasiveness in bladder cancer cells. *Oncotarget*
- 8, 15539–15552
  38 Kolba, M.D. *et al.* (2019) Tunneling nanotube-mediated intercellular vesicle and
- 583protein transfer in the stroma-provided imatinib resistance in chronic myeloid584leukemia cells. Cell Death & Disease 10, 1–16
- 585 39 Sosa, V. *et al.* (2013) Oxidative stress and cancer: an overview. *Ageing Res.*586 *Rev.* 12, 376–390
- 40 Wang, Y. *et al.* (2011) Tunneling-nanotube development in astrocytes depends
  on p53 activation. *Cell Death Differ.* 18, 732–742

- 41 Matejka, N. and Reindl, J. (2019) Perspectives of cellular communication through
  tunneling nanotubes in cancer cells and the connection to radiation effects. *Radiat Oncol* 14,
- 42 Desir, S. *et al.* (2016) Tunneling nanotube formation is stimulated by hypoxia in
  ovarian cancer cells. *Oncotarget* 7, 43150–43161
- 43 Kretschmer, A. *et al.* (2019) Stress-induced tunneling nanotubes support
  treatment adaptation in prostate cancer. *Sci Rep* 9,
- 44 Ranzinger, J. *et al.* (2011) Nanotube action between human mesothelial cells
  reveals novel aspects of inflammatory responses. *PLoS ONE* 6, e29537
- 45 Desir, S. *et al.* (2019) Intercellular Transfer of Oncogenic KRAS via Tunneling
  Nanotubes Introduces Intracellular Mutational Heterogeneity in Colon Cancer
  Cells. *Cancers (Basel)* 11,
- 46 Hase, K. *et al.* (2009) M-Sec promotes membrane nanotube formation by
- interacting with Ral and the exocyst complex. *Nat. Cell Biol.* 11, 1427–1432
- 603 47 Ohno, H. et al. (2010) M-Sec. Commun Integr Biol 3, 231–233
- 48 Caicedo, A. *et al.* (2015) MitoCeption as a new tool to assess the effects of
  mesenchymal stem/stromal cell mitochondria on cancer cell metabolism and
  function. *Sci Rep* 5,
- 49 Hekmatshoar, Y. *et al.* (2018) The role of metabolism and tunneling nanotube-
- mediated intercellular mitochondria exchange in cancer drug resistance. *Biochem. J.* 475, 2305–2328
- 50 Hayakawa, K. *et al.* (2016) Transfer of mitochondria from astrocytes to neurons
  after stroke. *Nature* 535, 551–555
- 51 Tan, A.S. et al. (2015) Mitochondrial genome acquisition restores respiratory
- function and tumorigenic potential of cancer cells without mitochondrial DNA. *Cell Metab.* 21, 81–94
- 52 Dong, L.-F. *et al.* (2017) Horizontal transfer of whole mitochondria restores
  tumorigenic potential in mitochondrial DNA-deficient cancer cells. *Elife* 6,
- 617 53 Lu, J.J. et al. (2019) Tunneling Nanotubes Mediated microRNA-155 Intercellular
- 618 Transportation Promotes Bladder Cancer Cells' Invasive and Proliferative
- 619 Capacity. Int J Nanomedicine 14, 9731–9743
- 54 Errede, M. et al. (2018) Tunneling nanotubes evoke pericyte/endothelial
- 621 communication during normal and tumoral angiogenesis. *Fluids Barriers CNS* 15,

- 55 Feng, Y. *et al.* (2019) Human Bone Marrow Mesenchymal Stem Cells Rescue
- Endothelial Cells Experiencing Chemotherapy Stress by Mitochondrial Transfer
  Via Tunneling Nanotubes. *Stem Cells Dev.* 28, 674–682
- 56 Ware, M.J. *et al.* (2015) Radiofrequency treatment alters cancer cell phenotype. *Sci Rep* 5, 12083
- 57 Vignais, M.-L. *et al.* (2017) Cell Connections by Tunneling Nanotubes: Effects of
   Mitochondrial Trafficking on Target Cell Metabolism, Homeostasis, and
- Response to Therapy. *Stem Cells Int* 2017, 6917941
- 58 Moschoi, R. *et al.* (2016) Protective mitochondrial transfer from bone marrow
  stromal cells to acute myeloid leukemic cells during chemotherapy. *Blood* 128,
  253–264
- 59 Spees, J.L. *et al.* (2006) Mitochondrial transfer between cells can rescue aerobic
  respiration. *Proc. Natl. Acad. Sci. U.S.A.* 103, 1283–1288
- 60 Wang, X. and Gerdes, H.-H. (2015) Transfer of mitochondria via tunneling
  nanotubes rescues apoptotic PC12 cells. *Cell Death Differ.* 22, 1181–1191
- 61 Griessinger, E. *et al.* (2017) Mitochondrial Transfer in the Leukemia
  Microenvironment. *Trends Cancer* 3, 828–839
- 639 62 Batash, R. *et al.* (2017) Glioblastoma Multiforme, Diagnosis and Treatment;
- 640 Recent Literature Review. *Curr. Med. Chem.* 24, 3002–3009
- 641 63 Stupp, R. et al. (2005) Radiotherapy plus concomitant and adjuvant
- temozolomide for glioblastoma. *N. Engl. J. Med.* 352, 987–996
- 643 64 Lathia, J.D. *et al.* (2015) Cancer stem cells in glioblastoma. *Genes Dev* 29,
  644 1203–1217
- 645 65 Chen, L. *et al.* (2015) Glioblastoma recurrence patterns near neural stem cell
  646 regions. *Radiother Oncol* 116, 294–300
- 647 66 Dahan, P. et al. (2014) Ionizing radiations sustain glioblastoma cell
- dedifferentiation to a stem-like phenotype through survivin: possible involvement
  in radioresistance. *Cell Death Dis* 5, e1543
- 67 Weil, S. *et al.* (2017) Tumor microtubes convey resistance to surgical lesions and
  chemotherapy in gliomas. *Neuro-oncology* 19, 1316–1326
- 652 68 Lurtz, M.M. and Louis, C.F. (2007) Intracellular calcium regulation of connexin43.
- 653 Am. J. Physiol., Cell Physiol. 293, C1806-1813
- 654 69 Sin, W.-C. *et al.* (2012) Opposing roles of connexin43 in glioma progression.
- 655 Biochim. Biophys. Acta 1818, 2058–2067

- 656 70 Wang, X. *et al.* (2010) Animal cells connected by nanotubes can be electrically
  657 coupled through interposed gap-junction channels. *Proc. Natl. Acad. Sci. U.S.A.*658 107, 17194–17199
- 71 Weber, P.A. *et al.* (2004) The permeability of gap junction channels to probes of
  different size is dependent on connexin composition and permeant-pore affinities. *Biophys. J.* 87, 958–973
- 662 72 Venkataramani, V. *et al.* (2019) Glutamatergic synaptic input to glioma cells
  663 drives brain tumour progression. *Nature* 573, 532–538
- 664 73 Venkatesh, H.S. *et al.* (2019) Electrical and synaptic integration of glioma into
  665 neural circuits. *Nature* 573, 539–545
- 666 74 Osswald, M. *et al.* (2019) Tunneling nanotube-like structures in brain tumors.
   667 *CANCER REPORTS* 2, e1181
- 5 Jung, E. *et al.* (2019) Emerging intersections between neuroscience and glioma
  biology. *Nature Neuroscience* 22, 1951–1960
- 670 76 Formicola, B. *et al.* (2019) Differential Exchange of Multifunctional Liposomes
  671 Between Glioblastoma Cells and Healthy Astrocytes via Tunneling Nanotubes.
  672 *Front. Bioeng. Biotechnol.* 7,
- 673 77 Carone, C. *et al.* (2015) In vitro effects of cocaine on tunneling nanotube
  674 formation and extracellular vesicle release in glioblastoma cell cultures. *J. Mol.*675 *Neurosci.* 55, 42–50
- 676 78 Ding, X. *et al.* (2015) Exposure to ALS-FTD-CSF generates TDP-43 aggregates
  677 in glioblastoma cells through exosomes and TNTs-like structure. *Oncotarget* 6,
  678 24178–24191
- 679 79 Guan, X. *et al.* (2018) Reactive Astrocytes in Glioblastoma Multiforme. *Mol.*680 *Neurobiol.* 55, 6927–6938
- 681 80 Civita, P. *et al.* (2019) Pre-Clinical Drug Testing in 2D and 3D Human In Vitro
  682 Models of Glioblastoma Incorporating Non-Neoplastic Astrocytes: Tunneling
- 683 Nano Tubules and Mitochondrial Transfer Modulates Cell Behavior and
- 684 Therapeutic Respons. *International Journal of Molecular Sciences* 20, 6017
- 81 Dilsizoglu Senol, A. *et al.* (2019) Effect of tolytoxin on tunneling nanotube
  formation and function. *Sci Rep* 9,
- 82 Hashimoto, M. *et al.* (2016) Potential Role of the Formation of Tunneling
  Nanotubes in HIV-1 Spread in Macrophages. *The Journal of Immunology* 196,
  1832–1841

- 83 Hua, K. and Ferland, R.J. (2018) Primary cilia proteins: Ciliary and extraciliary
  sites and functions. *Cell Mol Life Sci* 75, 1521–1540
- 692 84 Tilney, L.G. *et al.* (1992) Actin Filaments, Stereocilia, and Hair Cells: How Cells
  693 Count and Measure. *Annual Review of Cell Biology* 8, 257–274
- 85 Innocenti, M. (2018) New insights into the formation and the function of
- lamellipodia and ruffles in mesenchymal cell migration. *Cell Adh Migr* 12, 401–
  416
- 697 86 Gallop, J.L. (2019) Filopodia and their links with membrane traffic and cell
  698 adhesion. *Seminars in Cell & Developmental Biology* DOI:
- 699 10.1016/j.semcdb.2019.11.017
- 700 87 Kornberg, T.B. and Roy, S. (2014) Cytonemes as specialized signaling filopodia.
  701 *Development* 141, 729–736
- 702 88 Fykerud, T.A. et al. (2016) Mitotic cells form actin-based bridges with adjacent
- cells to provide intercellular communication during rounding. *Cell Cycle* 15,2943–2957
- 705 89 Flynn, K.C. (2013) The cytoskeleton and neurite initiation. *Bioarchitecture* 3, 86–
  706 109
- 90 Osswald, M. *et al.* (2016) A malignant cellular network in gliomas: potential
  clinical implications. *Neuro-oncology* 18, 479–485
- 91 Castro-Castro, A. et al. (2016) Cellular and Molecular Mechanisms of MT1-MMP-
- 710 Dependent Cancer Cell Invasion. *Annual Review of Cell and Developmental*711 *Biology* 32, 555–576
- 712 92 Veillat, V. *et al.* (2015) Podosomes: Multipurpose organelles? *The International*
- Journal of Biochemistry & Cell Biology 65, 52–60
- 714

## 716 Table 1. Types of Cellular Projections

Name	Description	Actin / microtubules content	Membrane fusion with a target cell	Function	Refs
Cilia	Large protuberance emerging from the cell body	Actin and microtubules	No	Environment sensing, coordination of signaling pathways	[83]
Stereocilia	Thin specialized cell protrusion on the apical surface	Actin	No	Cellular polarity, transduction of mechanic stimuli	[84]
Lamellipodia and ruffles	Dynamic veil-shaped cell protrusions	Actin	No	Leading edge in cell migration	[85]
Filopodia	Finger-like dynamic, thin membrane protrusions	Actin	No	Cell adhesion, environment sensing	[86]
Cytonemes/specialized filopodia	Finger-like dynamic, thin membrane protrusions extending to a target cell	Actin	No	Morphogens-delivery by direct contact to the target cells	[87]
Mitotic bridges	Thin bridges between daughter cells after mitosis	Actin	Yes	Reminiscent of cellular division, can share material	[88]
Neurites	Large extensions from the cell body of neurons	Actin and microtubules	No	Neurotransmitter release/reception and propagation of the action potential	[89]
Tumor microtubes	Thick membrane extensions containing GAP-junctions, either connecting cells either finger-like	Actin and microtubules	Yes/No	Transmission of intercellular ion fluxes, cell invasion, formation of neuron-glioma synapses	[67,72,73,90]
Tunneling nanotubes	Thin membrane connections, open- ended	Actin, sometimes microtubules	Yes	Exchange of cellular cargoes between cells	[6]
Invadopodia	Finger-like membrane protrusions	Actin	No	Matrix degradation	[91]
Podosomes	Dynamic membrane- bound microdomain	Actin	No	Adhesion, mechanosensing and matrix degradation	[92]

## **Table 2.** Tumor cell models used for the study of TNT-mediated communication *in*

## *vitro*

TUMOR MODEL	CARGO	TNT FUNCTION	TNT REGULATORS <sup>a</sup>	YEAR	Refs
Rat pheochromocytoma cell lines	Lysosomes, soluble and membrane marker	n.d.	n.d.	2004	[4]
HeLa (cervical cancer)	Calcium	n.d.	M-Sec	2009	[46]
Mesothelioma cell lines and primary human mesothelioma cells	Golgi vesicles, Mitochondria, fluorescent proteins	n.d.	Low-serum (+), hyperglycemic (+), acidic medium (+), EMT inducing cytokines (+), Metformin (-), Everolimus (-), Latrunculin A (-)	2012	[22]
Ovarian and breast cancer cell lines	Cytoplasmic content, Mitochondria	Mitochondria transfer from stromal cells promotes chemoresistance	n.d.	2013	[30]
Osteosarcoma and ovarian cancer cell lines	miRNA	Spreading of genetic and oncogenic material between tumoral-tumoral and tumoral-stromal cells	Low-serum and hyperglycemic medium (+)	2014	[23]
Mesothelioma cell lines	n.d.	TNT correlates with more aggressive phenotype and the expression genes related to invasion and metastasis	Low-serum and hyperglycemic medium (+), Migrastatin (-)	2014	[10]
Head and neck squamous cell carcinoma primary cells	Mitochondria and nucleic acids	Electrical coupling	n.d.	2014	[24]
Primary rat astrocytes and glioma cell line	Mitochondria	Support in glioma cell proliferation	H <sub>2</sub> O <sub>2</sub> (+), Latrunculin A (-)	2015	[13]
Metastatic breast cancer cell lines	miRNA	Transfer of miRNA and alter the phenotype of the receiving endothelial cells. TNT correlates with more aggressive phenotype	Docetaxel (-), LatrunculinA (-), Cytochalasin D (-)	2015	[11]
Pancreatic adenocarcinoma cell lines	Electron-dense particles	n.d.	Radiofrequency treatment (+)	2015	[56]
Rat pheochromocytoma cell lines	Mitochondria	Rescued of UV-treated apoptotic cells	Cytochalasin B (-)	2015	[60]
Ovarian cancer cell lines (different chemoresistances)	Mitochondria	Adaptation mechanism to hypoxia in chemoresistant cells	Hypoxia (+)	2016	[42]
Head and neck squamous cell carcinoma cell lines	Lysosomes, mitochondria, autophagosomes	n.d.	MMP2, FAK	2017	[25]
Bladder cancer cell lines	Mitochondria	Mitochondria transfer promotes invasiveness	n.d.	2017	[37]

Acute myeloid leukemia (AML) primary cells		Mitochondria transfer from the bone marrow supports cancer cell metabolism and promotes stress- adaptative response	NOX2	2017	[28]
Pancreatic adenocarcinoma and ovarian cancer cell lines	Doxorubicin	Redistribution of the drug	Doxorubicin (+)	2018	[26]
Acute lymphoblastic leukemia cell lines and human primary T- leukemic cells	Mitochondria	Mitochondria transfer promotion of chemoresistance	Cytochalasin D (-), MTX (-)	2018	[27]
Colon cancer cell lines	n.d.	Transfer of oncogenic protein (mutated KRAS) and activation of Erk pathway in acceptor cells	KRAS	2019	[45]
Breast cancer cell lines	Membrane and/or vesicles	Transfer between macrophages and tumor cells inducing invasiveness	M-Sec	2019	[31]
Prostate cancer cell lines	Lysosomes, mitochondria, stress-induced chaperones	Adaptation mechanism therapeutic stress	Chemotherapy by androgen receptor blockade (+), Low- serum, hyperglycemic, acidic medium (+), hypoxia (+), Cytochalasin D (-)	2019	[43]
Chronic myeloid leukemia cell lines	Protein-containing vesicles	Protein transfer from stromal cells provides protection to leukemic cells	n.d.	2019	[38]
Patient bone marrow cells and multiple myeloma-derived cell lines	Mitochondria	Mitochondria transfer from the bone marrow supports cancer cell metabolism and promotes stress- adaptative response	CD38, Chemotherapy by Bortezomid (+), Cytochalasin B (-)	2019	[29]
Bladder cancer cell lines	miRNA	Induction of invasive and proliferative phenotype	n.d.	2019	[53]
Glioblastoma cancer cell line	Functionalized liposomes	Delivery of nanoparticles	n.d.	2019	[76]

<sup>a</sup>(+), induced; (-), inhibited; n.d.,not described. 

## **Table 3.** Evidence of TNT-like communication in tissue

CANCER	MODEL	LABELLING	YEAR	Refs
Malignant pleural mesothelioma and lung adenocarcinoma	Patient tissue	Mitochondria	2012	[22]
Ovarian cancer	Patient tissue	Mitochondria	2014	[23]
Osteosarcoma	Murine orthotopic model of osteosarcoma	Mitochondria	2014	[23]
Head and neck squamous cell carcinoma	Patient tissue	F-actin, mitochondria	2014	[24]
Glioma	Mouse tumor xenograft from primary stem cells	Cytosolic GFP expression	2015	[36]
Head and neck squamous cell carcinoma	Patient tissue	Actin, tubulin	2017	[25]
Head and neck squamous cell carcinoma	Mouse tumor xenograft from cell line	Actin, tubulin	2017	[25]
Acute myeloid leukemia	Mouse tumor xenograft from human leukemic cells	Mitochondria	2017	[28]
Glioma	Mouse tumor xenograft from primary stem cells	Cytosolic GFP expression	2017	[67]
Pancreatic adenocarcinoma	Patient tissue	Mitochondria	2018	[26]
Developing human telencephalon and human GBM	Patient tissue	Collagen IV	2018	[54]
Multiple myeloma	Mouse tumor xenograft from cell line	Mitochondria	2019	[29]

730 Figure 1. TNT in cell culture. (A) Schematic of two cells connected by a TNT in cell 731 culture. The connection floats above the adhesion surface (dashed line). The lower 732 part shows a magnification of the TNT and possible cargoes travelling along it. The 733 range of TNT diameters and lengths is indicated. (B) Representative fluorescence images of TNTs between cells in culture. U-251 glioblastoma cells were plated at a 734 density of 20 k cells/cm<sup>2</sup> for 24 h, fixed with PFA 4% and permeabilized in 0.2% 735 Triton-X100. Actin filaments (in red), microtubules (in green) and nuclei (in blue) 736 were, respectively, stained with phalloidin-rhodamine (1/500 Invitrogen R415), anti-737 αTubulin (1/1000 Sigma-Aldrich T9026) and DAPI (Sigma-Aldrich D9542). White-738 739 filled arrowheads point to TNTs positive for actin staining. Dashed arrowheads 740 indicate the absence of tubulin staining. Confocal images acquired with Spinning 741 Disk Yokogawa CSU-X1. Scale bars 20 µm.

742

743 Figure 2. Schematic of TNT-based network in cancer. In (A), cancer cells with 744 different states of aggressiveness coexist and interact via TNTs. Aggressive cancer 745 cells (in dark blue) display higher interconnection rates than their less aggressive counterparts (in light blue). Cancer cells are surrounded by stromal cells (red) to 746 747 which they also communicate through TNTs. The homotypic or heterotypic connections between these cell types can be used to share oncogenic content 748 (green circle) or to get rid of material to degrade (red circle). (B) shows a 749 750 magnification of oncogenic cargoes travelling along the connection providing pro-751 tumoral features in the receiving cell and healthy lysosomes. Acquisition of mitochondria can promote chemoresistance, invasiveness and provide metabolic 752 help in stress-induced conditions. Transfer of miRNA can drive modifications in the 753 phenotype of the recipient cells, leading to a more aggressive phenotype. Moreover, 754

cellular vesicle content can impact on the proteomic profile of the receiving cells and
change their ability to respond to treatments. (C) shows different materials discarded
by a cell through TNTs. Organelles used for degradation of damaging content, such
as autophagosomes and lysosomes, might be transferred via TNTs as a clearing
mechanism. TNTs could also be used as a route for the redistribution of drugs, which
would otherwise be toxic in high concentration.

761

762 **Figure 3.** Schematic of GBM network and different types of intercellular connections. GBM cells (in blue) interconnect forming a functional network composed of different 763 764 types of connections. Thick (>1 µm) protrusions (TMs) connect GBM cells and 765 contain both Cx43 and GAP43 which regulate Ca<sup>2+</sup> flux along the network. Thinner (<1 µm) TNT-like connections are present between GBM cells and may allow 766 transfer of material. GBM cells also form TMs that do not contact other cells and are 767 768 able to drive cell invasion in a GAP43-dependent manner. Pre-synaptic neurons (in orange) extend axons which appose onto the TMs and regulate the Ca<sup>2+</sup> flux along 769 the GBM network, promoting cell invasion and cell proliferation. Astrocytes (in 770 yellow) of the tumoral brain environment can communicate with GBM cells through 771 TNT-like connections and transfer mitochondria to the tumoral cells, eventually 772 affecting the behavior (e.g., proliferation and response to treatments) of the receiving 773 774 cells.

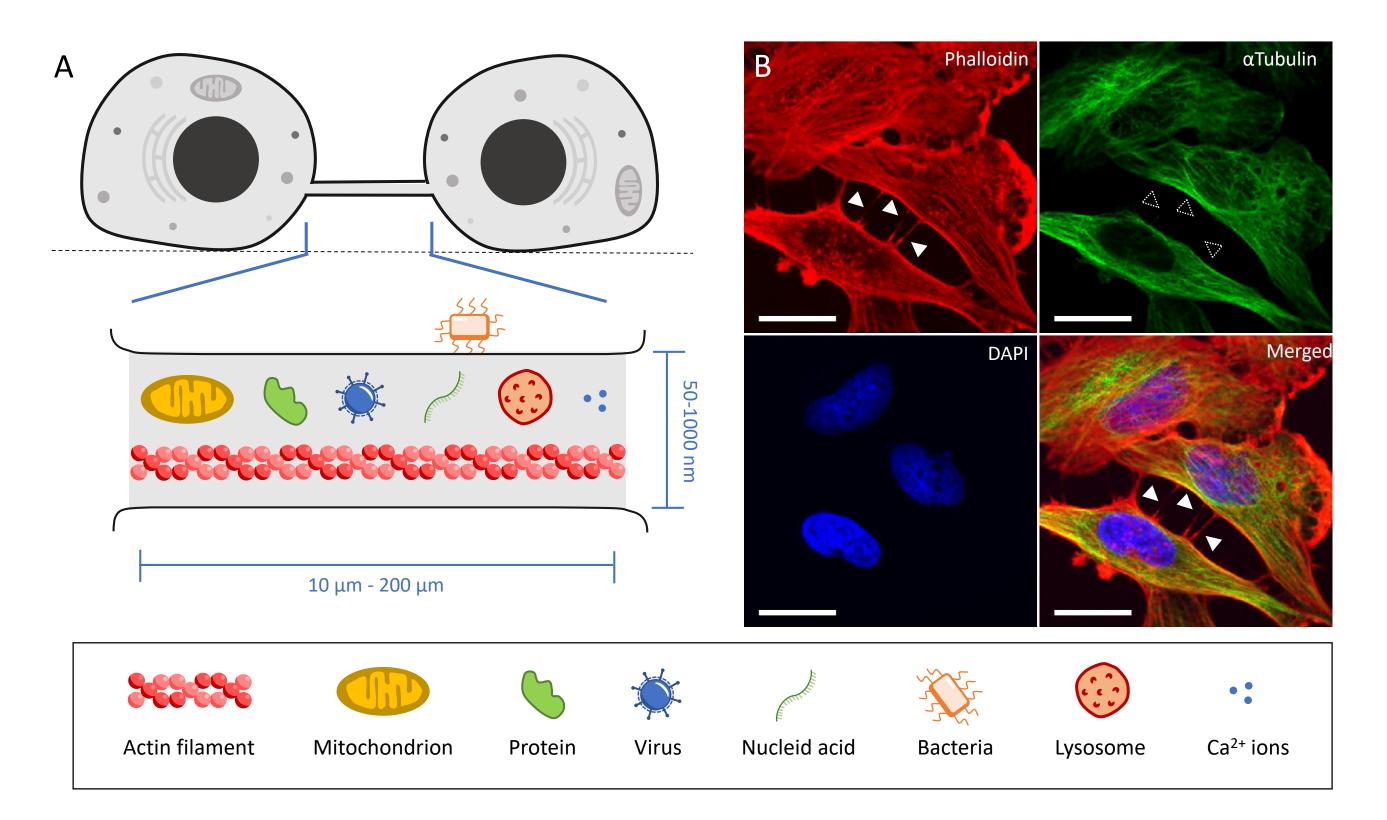


Figure 2

