

Photothermal Attenuation of Cancer Cell Stemness, Chemoresistance, and Migration Using CD44-Targeted MoS₂ Nanosheets

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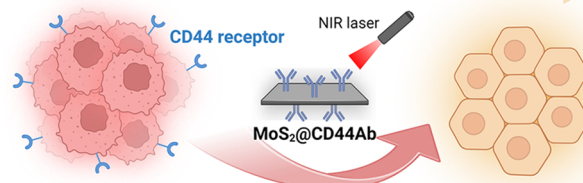


Supporting Information

ABSTRACT: Cancer stem-like cells (CSCs) play key roles in chemoresistance, tumor metastasis, and clinical relapse. However, current CSC inhibitors lack specificity, efficacy, and applicability to different cancers. Herein, we introduce a nanomaterial-based approach to photothermally induce the differentiation of CSCs, termed “photothermal differentiation”, leading to the attenuation of cancer cell stemness, chemoresistance, and metastasis. MoS₂ nanosheets and a moderate photothermal treatment were applied to target a CSC surface receptor (i.e., CD44) and modulate its downstream signaling pathway. This treatment forces the more stem-like cancer cells to lose the mesenchymal phenotype and adopt an epithelial, less stem-like state, which shows attenuated self-renewal capacity, more response to anticancer drugs, and less invasiveness. This approach could be applicable to various cancers due to the broad availability of the CD44 biomarker. The concept of using photothermal nanomaterials to regulate specific cellular activities driving the differentiation of CSCs offers a new avenue for treating refractory cancers.

KEYWORDS: MoS₂ nanosheets, CD44, photothermal differentiation, cancer cell stemness, chemoresistance

Photothermal differentiation of cancer stem cells



Chemoresistance, metastasis, and recurrence pose major challenges in cancer therapy.^{1,2} Cancer stem-like cells (CSCs) are responsible for these challenges owing to their self-renewal property, aggressive invasiveness, and ability to resist chemotherapeutic drugs.^{3,4} To date, two major routes have been taken to tackle CSCs. The first route is to develop agents that exert preferential cytotoxicity toward CSCs.^{5,6} Despite its promise, nonspecificity and inadequate understanding of the CSC-specific apoptotic pathway remain the main obstacles.⁷ More importantly, non-CSCs can spontaneously gain stemness and transform into CSCs, further reducing the effectiveness of this approach.^{8–10} The second route, termed the “differentiation strategy”, has recently received substantial attention, as it converts CSCs from a dedifferentiated, high-stemness state to a differentiated, low-stemness state by using small molecules such as second messengers and retinoic acid.^{11–13} Such induced differentiation places cancer cells in a less stem-like state, where they show more sensitivity to anticancer drugs.^{14,15} However, this strategy also suffers from non-specificity and requires the sophisticated design of a targeted delivery system, along with the limited efficacy and applicability to different cancers.^{11,16} To this end, a refined “differentiation strategy” with high specificity to CSCs and broad applicability to various cancers is greatly needed.

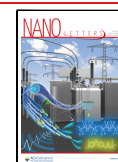
CD44, a transmembrane adhesion receptor, is recognized as a key biomarker for CSCs.¹⁷ It is highly expressed on breast,¹⁸

prostate,¹⁹ ovarian,²⁰ pancreatic,²¹ colon,²² and liver cancers.²³ Clinical data show that a high level of CD44 correlates to a poor prognosis for patients.²⁴ It was found that CD44 induces a phenotypic change in cancer cells, a cellular process named an epithelial–mesenchymal transition (EMT), during which cancer cells lose the original epithelial phenotype and acquire a mesenchymal phenotype with enhanced stemness, chemoresistance, and invasiveness.²⁵ Conversely, knock-down of CD44 attenuates the mesenchymal phenotype, slows cancer progression, and weakens therapeutic resistance.^{26,27} Therefore, CD44 is a promising therapeutic target to attenuate cancer stemness, chemoresistance, and metastasis.^{28,29} However, existing efforts have so far mostly utilized CD44 as a surface receptor for targeting CSCs, for instance, using hyaluronan-functionalized nanodelivery systems to target CSCs,^{12,13} while the functional roles of CD44 in gaining mesenchymal phenotype and maintaining cancer stemness have not been fully exploited.

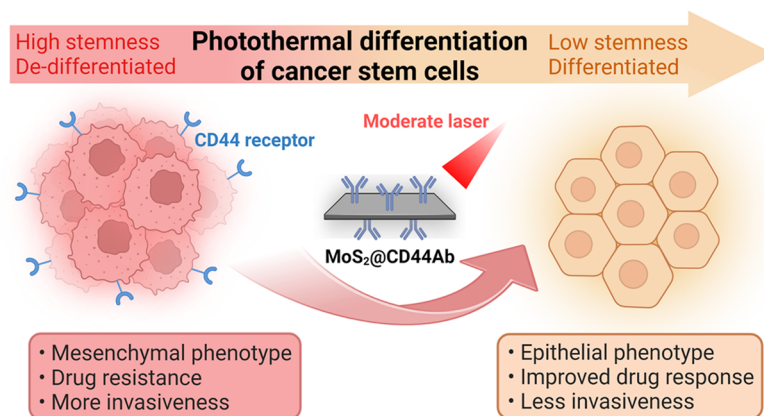
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Scheme 1. Concept of “Photothermal Differentiation” of Cancer Stem Cells Using CD44-Targeted MoS₂ Nanosheets to Attenuate Cancer Cell Stemness, Drug Resistance, and Invasiveness^a



^aUnlike conventional photothermal therapy, this approach applies a moderate photothermal effect to modulate CD44-regulated signaling activities and convert mesenchymal/stem-like cancer cells to an epithelial/less stem-like phenotype.

Here, we present a nanomaterial-based approach using CD44-targeted MoS₂ nanosheets to photothermally attenuate cancer stemness by modulating CD44-regulated signaling activities and converting mesenchymal/stem-like cancer cells to an epithelial/less stem-like phenotype. Unlike conventional photothermal therapy in which cancer cells are ablated by elevated local temperature,^{30–36} this approach applies a moderate photothermal effect (43 °C) to modulate specific cellular activities involving the differentiation of CSCs. We coin this approach “photothermal differentiation” (Scheme 1). MoS₂ nanosheets are chosen as photothermal nanotransducers owing to their excellent biocompatibility, photothermal conversion efficacy, and ease of surface functionalization.^{37–41} We demonstrate the feasibility of this approach on triple-negative breast cancer and malignant prostate cancer cell lines; both cells are CD44-overexpressed, are enriched with features associated with stem-like/mesenchymal phenotypes, and have the worst prognosis.^{42,43} By driving the phenotypic change and differentiation of CSCs, this approach attenuates cancer cell stemness, drug resistance, and migration/invasion. Importantly, the molecular mechanism by which this approach drives the phenotypic transition and stemness attenuation is determined.

MoS₂ nanosheets were prepared using a liquid exfoliation method.⁴⁴ To endow the nanosheets with CD44-targeting ability, the surface of nanosheets was first coated with a layer of protein A (PA) mixed with bovine serum albumin (BSA) (i.e., MoS₂@PA) via strong hydrophobic interactions,⁴⁵ followed by a subsequent conjugation with CD44 antibodies (i.e., MoS₂@PA@CD44Ab) (Figure 1A). Here, each PA molecule contains several binding sites for the Fc domain of antibodies, ensuring the optimal orientation of surface antibodies with Fab domains facing outward,⁴⁶ whereas BSA serves as a spacer to control the density of PA and antibodies on the nanosheet surface, preventing the steric crowding of Fab domains from neighboring antibodies.⁴⁷

Transmission electron microscopy (TEM) showed that the lateral dimensions of as-synthesized MoS₂@PA@CD44Ab are 162.4 ± 33.5 nm in length and 103.1 ± 21.9 nm in width (Figure 1B and Figure S1), whereas the pristine MoS₂ nanosheets have a smaller lateral size (Figure S2). Atomic force microscopy (AFM) indicated a progressive increase in the thickness of MoS₂ nanosheets following each step of

functionalization (Figure 1C): bare MoS₂ (5 nm), MoS₂@PA (8 nm), and MoS₂@PA@CD44Ab (13 nm). The successful functionalization was further evident from the increased hydrodynamic size of the nanosheets (increasing from 137.4 to 147.1 and 165.3 nm, Figure 1D) and gradually elevated ζ potential (Figure 1E). The excellent coating and colloidal stability of MoS₂@PA@CD44Ab were manifested by the negligible change in the hydrodynamic size when it was dispersed in different media for 1 week (Figure S3). The absorbance spectrum of MoS₂@PA@CD44Ab covers the near-infrared region, making it an effective photothermal agent (Figure S4). As shown in Figure 1F, after 5 min exposure under an 808 nm laser (0.35 W/cm²), the aqueous solution dispersed with 200 μg/mL MoS₂@PA@CD44Ab elevated its temperature from 22 to 43 °C, whereas pure water only slightly increased its temperature. The photothermal stability of MoS₂@PA@CD44Ab nanosheets was further validated by monitoring the temperature of a nanosheet suspension during several laser ON/OFF cycles, while the temperature profile of the nanosheet suspension did not exhibit an observable change (Figure 1G). These results suggest the successful preparation of CD44-targeted MoS₂ nanosheets, hereafter referred to as MoS₂@CD44Ab.

To track and quantify the cell uptake of MoS₂ nanosheets, a triple-negative breast cancer cell line (i.e., MDA-MB-231) with a relatively higher degree of stemness, invasiveness, and CD44 expression was selected.⁴⁸ The abundance of cell surface CD44 was validated by immunofluorescence imaging (Figure S5). An equal amount of FITC-BSA was coated onto the surface of nanosheets when preparing the nontargeted MoS₂@BSA and CD44-targeted MoS₂ (i.e., MoS₂@CD44Ab). As shown in Figure 1H and Figure S6, compared to untreated cells and cells incubated with nontargeted MoS₂@BSA, MDA-MB-231 cells incubated with MoS₂@CD44Ab displayed higher fluorescence intensity, suggesting the surface functionalization of the CD44 antibody facilitated the cell uptake of nanosheets. This was further reinforced through a receptor-blocking experiment. It was found that most cell-internalized nanosheets were entrapped in the lysosomal degradative compartments, as manifested by the fluorescence overlap between the nanosheets and Lysotracker dye (Figure 1I and Figure S7). The biocompatibility of MoS₂ nanosheets and laser treatment were evaluated through a panel of cytotoxicity assays (Figure

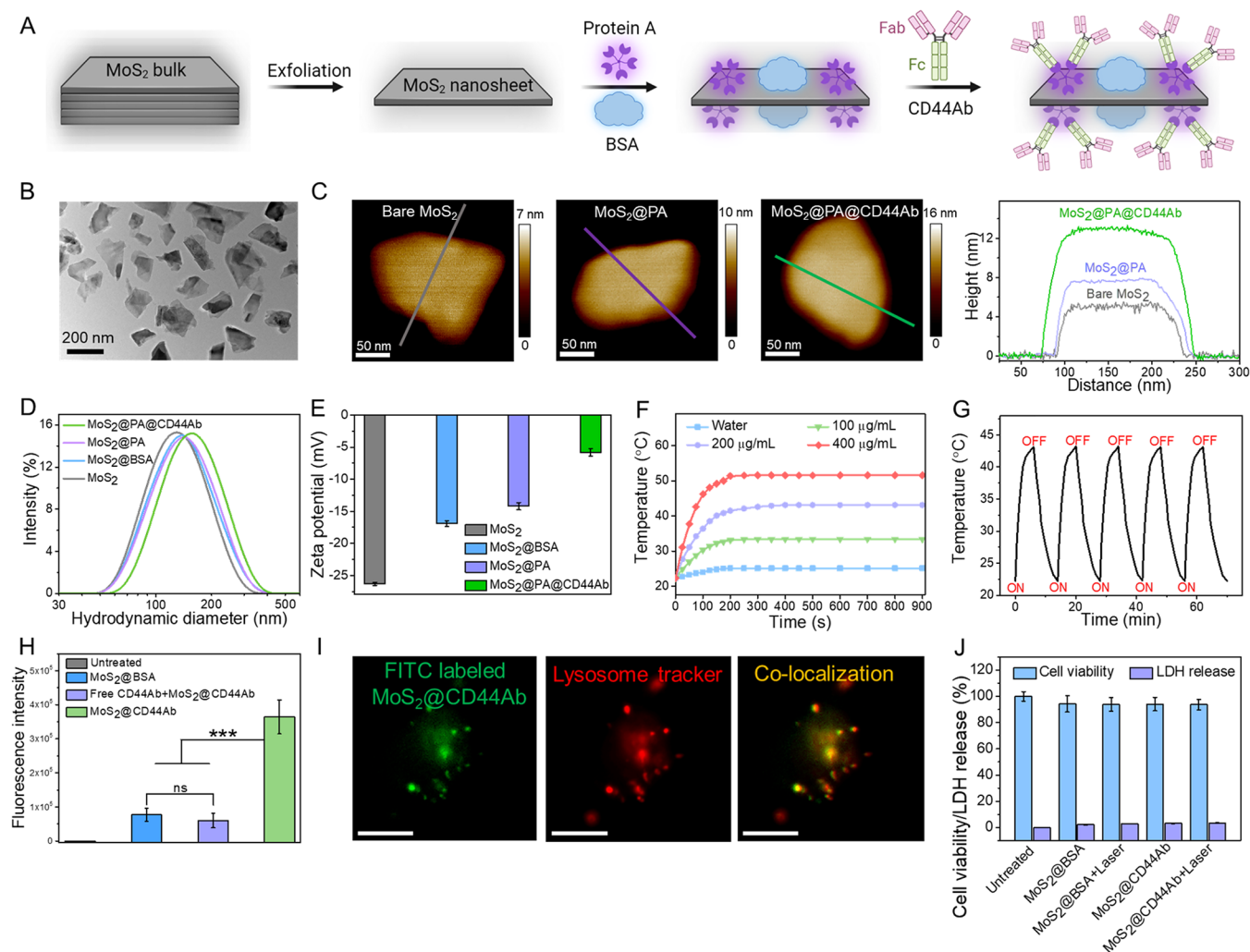


Figure 1. Preparation and characterization of CD44-targeted MoS₂ nanosheets. (A) Steps used for preparing CD44-antibody-functionalized MoS₂ nanosheets. (B) Transmission electron microscopy image of MoS₂@PA@CD44Ab. (C) Atomic force microscopy thickness measurement of MoS₂ nanosheets after every step of surface functionalization. (D, E) Dynamic light scattering and ζ potential of MoS₂, MoS₂@BSA, MoS₂@PA, and MoS₂@PA@CD44Ab. Error bars: SD, $n = 5$. (F) Temperature of an MoS₂@PA@CD44Ab suspension excited by an 808 nm laser. (G) Temperature of a MoS₂@PA@CD44Ab suspension (200 $\mu\text{g/mL}$) over five times of ON/OFF laser irradiation cycles. (H) Fluorescence images of MDA-MB-231 cells incubated with FITC-labeled MoS₂ nanosheets. Error bars: SD, $n = 20$. One-way ANOVA, ns = no significant difference, *** $P < 0.001$. (I) Intracellular localization of FITC-labeled MoS₂ nanosheets in MDA-MB-231 cells. Scale bars: 20 μm . (J) Cell viability and lactate dehydrogenase (LDH) assays of MDA-MB-231 cells following different treatments. Error bars: SD, $n = 5$.

1J and S8). Together, these assays suggest negligible cytotoxicity of MoS₂ nanosheets and laser treatment at the selected doses, which set the stage for the evaluation of their influence on the cancer cell stemness, drug resistance, and migration.

In cancer cells, the ability to form mammospheres has been used as a measure of cancer cell stemness and self-renewal capacity, which dictates the tumor-regenerative potential.^{49,50} Therefore, mammosphere formation assays were utilized to investigate the effect of MoS₂@CD44Ab and the moderate laser treatment on the stemness-high MDA-MB-231 cells. Prior to treatment, MDA-MB-231 cells were cultivated to either adherent monolayers (i.e., 2D-cultured model) or mammospheres (i.e., 3D-cultured model intended to enrich CSCs) (Figure 2A). The cells after different treatments were collected and seeded into ultralow-attachment plates to observe the mammosphere formation. For the untreated cells, both 2D- and 3D-cultured cells formed significant amounts of mammospheres after 7 days of culture under the

suspension condition, while the 3D-cultured cells led to a larger size and number of mammospheres due to the enrichment of CSCs.⁵¹ MoS₂@BSA and MoS₂@BSA+Laser treatments did not significantly change the mammosphere-forming ability. Importantly, MoS₂@CD44Ab diminished the number and size of mammospheres for both 2D- and 3D-cultured cells, while MoS₂@CD44Ab+Laser further reduced the number and size of mammospheres to a minimal level (Figure 2B and Figures S9 and S10). A quantitative analysis indicates that MoS₂@CD44Ab+Laser treatment almost eliminated the larger-sized mammospheres (>150 μm) and decreased the number of smaller-sized mammospheres (70–150 μm) by more than 70% for both 2D- and 3D-cultured cell models (Figure 2C). At the molecular level, the expressions of cancer stemness markers Oct4, Sox2, and Nanog were evaluated by Western blotting. The results showed that MDA-MB-231 cells treated by MoS₂@CD44Ab reduced the expressions of Oct4, Sox2, and Nanog by 40–60%, whereas the cells treated by MoS₂@CD44Ab+Laser lowered the expres-

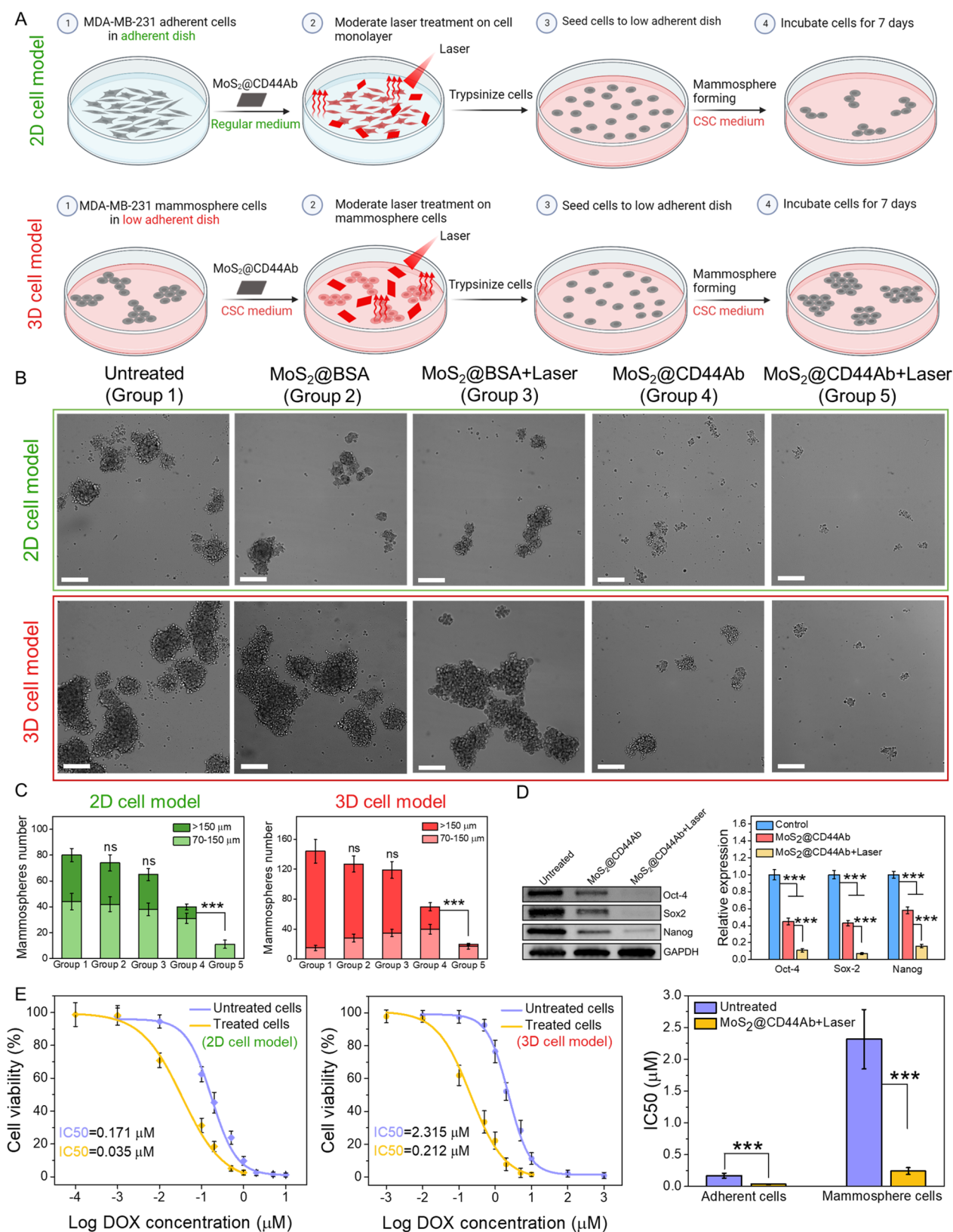


Figure 2. $\text{MoS}_2\text{:CD44Ab}$ and laser treatment attenuate cancer cell stemness and drug resistance. (A) Schematic illustrating the process of conducting mammosphere formation assays using 2D-cultured and 3D-cultured cell models. (B) Mammosphere formation of MDA-MB-231 adherent and mammosphere cells subjected to various treatments. Scale bar: 200 μm . (C) Quantification of the mammospheres under 2D and 3D cell models (SD, $n = 5$). (D) Immunoblot analyses of stemness markers in MDA-MB-231 cells after treatment by $\text{MoS}_2\text{:CD44Ab}$ and $\text{MoS}_2\text{:CD44Ab+Laser}$ (SD, $n = 3$). (E) Dose-dependent cytotoxicity induced by DOX and IC₅₀ values of DOX on MDA-MB-231 adherent and mammosphere cells with or without $\text{MoS}_2\text{:CD44Ab+Laser}$ treatment (SD, $n = 3$). One-way ANOVA, *** $P < 0.001$.

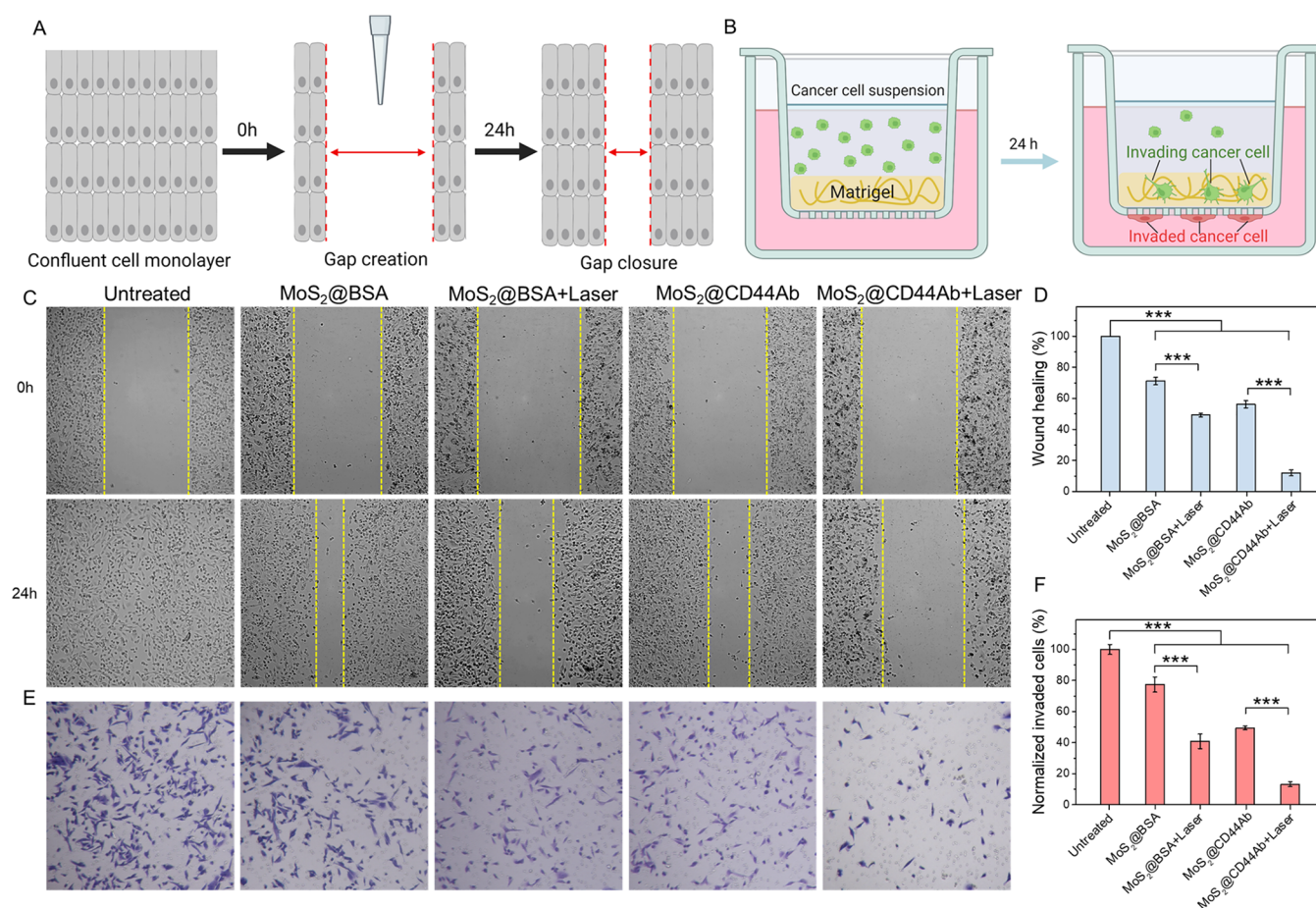


Figure 3. MoS₂@CD44Ab and laser treatment inhibit cancer cell migration and invasion. (A, B) Working principles of (A) wound-healing and (B) transwell invasion assays. (C, D) Percentage of gap closure in wound healing assays demonstrating that the migration ability of MDA-MB-231 cells was significantly impeded after treatment with MoS₂@CD44Ab+Laser. (E, F) Quantification of invaded MDA-MB-231 cells in transwell invasion assays demonstrating that the invasion ability of MDA-MB-231 cells was significantly impeded after treatment by MoS₂@CD44Ab+Laser. Error bars: SD, $n = 4$. One-way ANOVA, *** $P < 0.001$.

sions of these markers by 80–90% (Figure 2D). These results demonstrate that MoS₂@CD44Ab and the moderate laser treatment synergistically attenuate the self-renewal capacity and stemness of MDA-MB-231 cells.

Apart from the self-renewal capacity, drug resistance is another important feature associated with cancer cell stemness.^{52,53} Given that MoS₂@CD44Ab+Laser showed the best efficacy to attenuate stemness of MDA-MB-231 cells, the effect of this treatment on the response of cells to a traditional chemotherapeutic drug, doxorubicin (DOX), was investigated. Previous research showed that MDA-MB-231 cells possess intrinsic doxorubicin resistance due to their high stemness and mesenchymal phenotype.⁵⁴ 2D- and 3D-cultured MDA-MB-231 cells, with or without MoS₂@CD44Ab+Laser treatment, were subjected to a series of concentrations of DOX to identify the half-maximum inhibitory concentration (IC₅₀). As shown in Figure 2E, for the untreated cells, the 3D-cultured cells showed 13 times more resistance to DOX compared to the 2D-cultured cells (IC₅₀: 2.315 μ M versus 0.171 μ M), due to the enrichment of CSCs in the 3D-cultured model. However, after MoS₂@CD44Ab+Laser treatment, both 2D- and 3D-cultured cells displayed more sensitivity to DOX: the 2D-cultured adherent cells became 5 times as sensitive to killing by DOX (i.e., lower IC₅₀ from 0.171 to 0.035 μ M), while the 3D-cultured mammosphere cells became 10 times as sensitive to

DOX (i.e., lower IC₅₀ from 2.315 to 0.212 μ M). These results suggest that MoS₂@CD44Ab and laser treatment can sensitize the intrinsically drug-resistant cancer cells to conventional anticancer drugs and potentially improve the therapeutic outcome of chemotherapy.

Molecular studies found that high CD44 expression correlates with tumor metastasis.^{55,56} Therefore, the effect of MoS₂@CD44Ab and moderate laser treatment on the motility of MDA-MB-231 cells was assessed (Figure 3A,B). In the wound-healing assays, the percentage of gap closure within a given time window serves as an indicator of migration ability. For the untreated cells, we observed a complete gap closure (100%) within 24 h, indicating the potent migration ability of this cell line. The cells treated by MoS₂@BSA and MoS₂@BSA+Laser showed a modest gap closure. Remarkably, the cells treated by MoS₂@CD44Ab and MoS₂@CD44Ab+Laser displayed 60% and 10% gap closures, respectively (Figure 3C,D). Notably, the cells barely moved after being treated by MoS₂@CD44Ab+Laser, where the addition of laser irradiation following the MoS₂@CD44Ab treatment inhibited the cell migration to a higher extent, in comparison to treating cells with MoS₂@CD44Ab alone. As a control, a simple heating process by placing cells at 43 °C did not stop the cell migration (Figure S12). The same trend was present in the transwell invasion assays (Figure 3E,F), wherein only a few cells treated

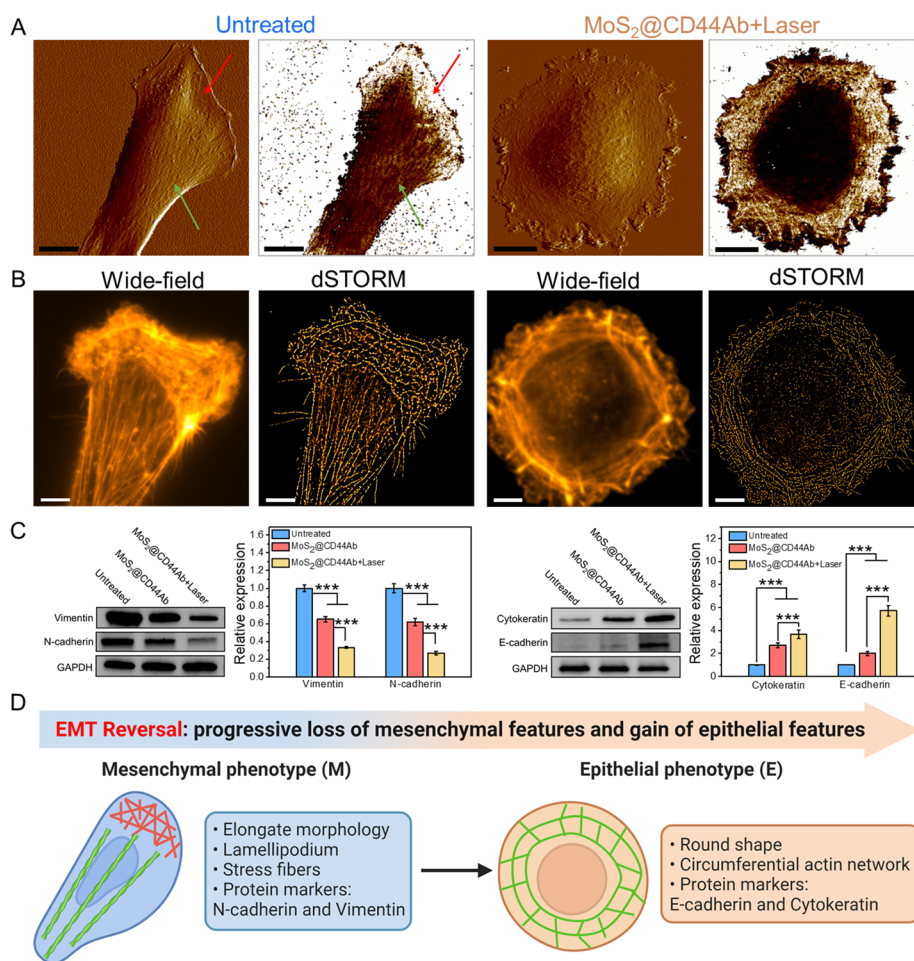


Figure 4. MoS₂@CD44Ab+Laser treatment mediates a phenotypic change of cancer cells. (A) Nanomechanical AFM imaging of untreated and MoS₂@CD44Ab+Laser-treated MDA-MB-231 cells. Correlated topography and modulus images are collected simultaneously. Live cells were probed by a spherical indenter, and the elastic modulus of each pixel was generated via fitting the corresponding force curve to a Hertz model. Green arrows mark the actin stress fibers, and red arrows point to the lamellipodium. Scale bars: 10 μ m. (B) Wide-field and dSTORM images of single cells with and without MoS₂@CD44Ab+Laser treatment. dSTORM offers drastically improved imaging resolution by stochastically activating small numbers of fluorophores at a time. Scale bars: 5 μ m. (C) Western blot analyses of EMT-related molecular markers. GAPDH was used as the housekeeping protein. Error bars: SD, $n = 3$. One-way ANOVA, *** $P < 0.001$. (D) Schematic summarizing the reversed EMT process in cancer cells.

by MoS₂@CD44Ab+Laser managed to invade across the Matrigel (a mimic for the extracellular matrix in a tumor microenvironment),^{57,58} suggesting their significantly inhibited invasion ability. Reproducible results of migration/invasion assays are presented in Figures S11–S17. Together, these results demonstrate that MoS₂@CD44Ab and the moderate laser treatment synergistically and significantly inhibit the migration and invasion of MDA-MB-231 cells. We also tested the effect of these treatments on a CD44-overexpressed prostate cancer cell line, PC3-EMT (Figures S18 and S19). Similarly, our results showed that MoS₂@CD44Ab+Laser can stop the migration and invasion and attenuate the stemness and drug resistance of PC3-EMT cells, suggesting that this approach could be applicable to treat various cancers with high levels of CD44 biomarker.

Mounting evidence established a direct relation between the EMT and the stemness properties of cancer cells, both contribute to chemoresistance and metastasis.^{59,60} The switch from epithelial to mesenchymal phenotype leads to high stemness of cancer cells, implying that EMT causes dedifferentiation.^{61,62} In many cancers, the mesenchymal traits

parallel the stemness-high cancer cells in which CD44 is highly expressed.²⁵ Therefore, we next determined to find whether MoS₂@CD44Ab+Laser treatment attenuates the stemness and promotes differentiation of MDA-MB-231 cells by altering the EMT process. We characterized the morphological change of single cells using nanomechanical AFM and direct stochastic optical reconstruction microscopy (dSTORM). Nanomechanical AFM measures the local elastic modulus of live cells to identify the actin filaments located in the top layer of cells.^{63–65} Figure 4A shows the correlated surface topography and modulus images of single cells with or without MoS₂@CD44Ab+Laser treatment. Without treatment, MDA-MB-231 cells possessed an elongated cell shape with well-aligned actin stress fibers (green arrows) through the cell length and a lamellipodium (red arrows) on the leading edge of the cells; both are morphological characteristics of a mesenchymal phenotype.^{66–68} In contrast, after treatment by MoS₂@CD44Ab+Laser, the cells noticeably transformed from an elongated shape into a cobblestone morphology (a typical feature of the epithelial phenotype),⁶⁹ accompanied by the loss of actin stress fibers and the gain of a thin peripheral

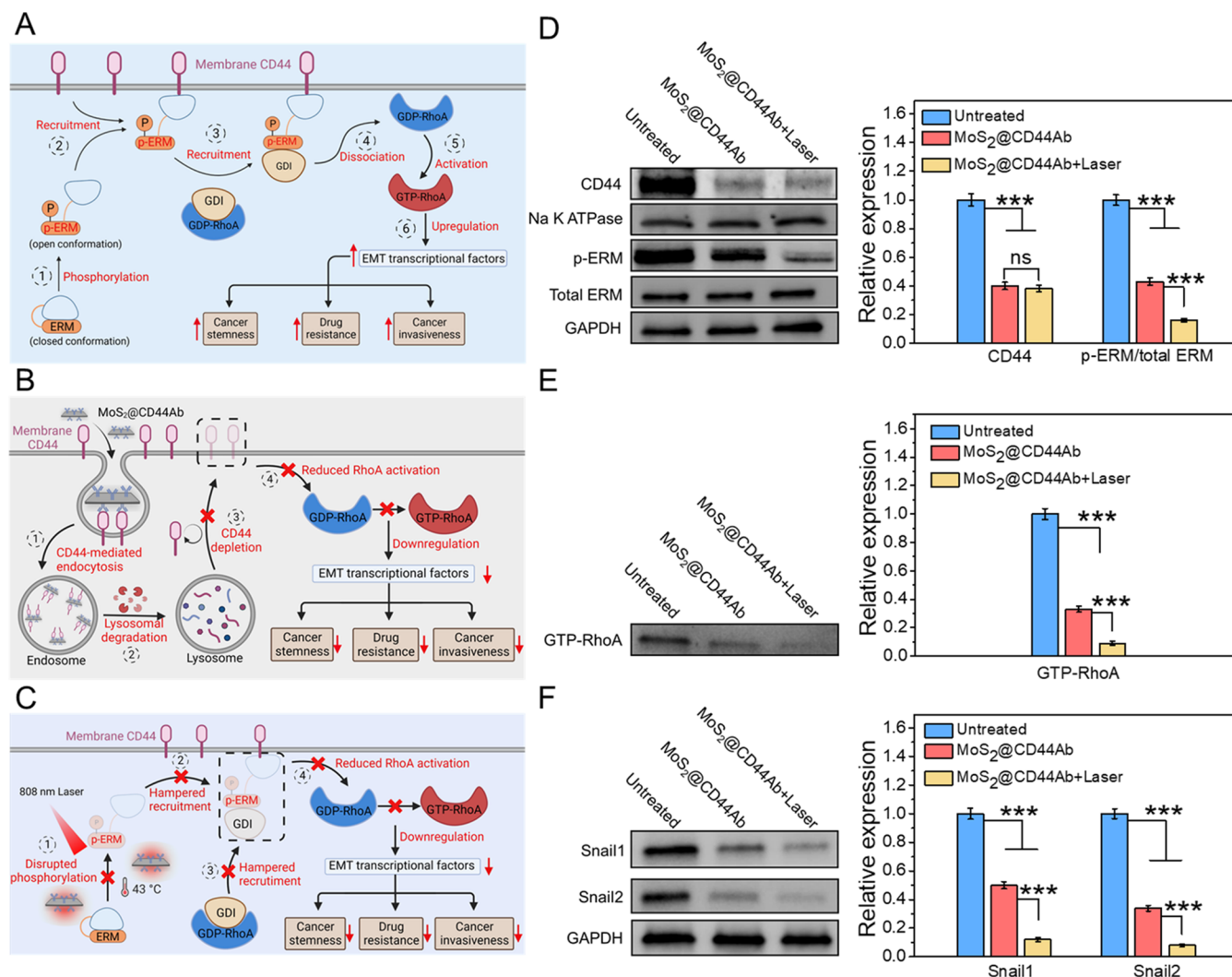


Figure 5. Molecular mechanism of reversed EMT and attenuated stemness. (A–C) Schematic illustrating the mechanism of how MoS₂@CD44Ab + Laser treatment affects the CD44-regulated EMT signaling pathway, thus causing the attenuation of stemness, drug resistance, and invasiveness. (D, E) Western blot quantification of membrane CD44, cytoplasmic p-ERM, total ERM, and GTP-RhoA in MDA-MB-231 cells after treatment by MoS₂@CD44Ab or MoS₂@CD44Ab + Laser. Na K ATPase and GAPDH serve as the housekeeping proteins for membrane protein and cytoplasmic protein, respectively. (F) Western blot analyses of Snail1 and Snail2 in MDA-MB-231 cells after treatment by MoS₂@CD44Ab or MoS₂@CD44Ab + Laser. Error bars: SD, $n = 3$. One-way ANOVA, *** $P < 0.001$, ns = no significant difference.

membrane. The aspect ratio of single cells reduced from 2.87 ± 0.21 to 1.22 ± 0.17 ($n = 10$) after the MoS₂@CD44Ab + Laser treatment. The average Young's modulus of the cellular body also decreased because of the loss of stress fibers (Figure S20). The morphological and cytoskeletal changes of MDA-MB-231 cells were further investigated using a super-resolution imaging tool, dSTORM.^{70–72} Unlike AFM, dSTORM resolves the actin cytoskeleton in the bottom layer of cells using total internal reflection illumination. As shown in Figure 4B, the untreated cells presented typical mesenchymal traits, including an elongated cell shape, stress fibers parallel with the cell length, and an actin network within the lamellipodium, in accordance with our AFM observation. This also justifies the strong migratory/invasive propensity of MDA-MB-231 cells, which use lamellipodium to direct cell protrusion and stress fibers to generate contraction force to move the cell forward.⁷³ However, after treatment by MoS₂@CD44Ab + Laser, all the mesenchymal traits disappeared, including the loss of stress fibers and lamellipodium, and the cells shape became rounded with an actin network surrounding the full circumference

(typical features of the epithelial phenotype).^{74,75} Reproducible AFM and dSTORM results are presented in Figures S21–S24. Together, nanomechanical AFM and dSTORM highlight the morphological change of MDA-MB-231 cells after our treatment. Notably, the disappearance of mesenchymal traits along the gain of epithelial features are signatures of the reversed EMT process.

To further substantiate the cellular phenotypic change at the molecular level, we investigated EMT-related molecular markers using Western blotting (Figure 4C). The untreated cells expressed dominant levels of vimentin and N-cadherin, both known as mesenchymal markers.⁷⁶ On the other hand, the expressions of two corresponding epithelial markers, cytokeratin and E-cadherin, remained low in the untreated cells. However, the cells treated by MoS₂@CD44Ab alone showed an ~40% decrease in both mesenchymal markers and ~2-fold increase in both epithelial markers. More significantly, the cells treated by MoS₂@CD44Ab + Laser showed an ~70% drop in both mesenchymal markers and 4–6-fold increase in both epithelial markers, suggesting a more complete transition

from a mesenchymal to an epithelial phenotype. Collectively, these data demonstrate that MoS₂@CD44Ab+Laser treatment attenuates the stemness of MDA-MB-231 cells by inducing a reversed EMT process and converting the cells from a mesenchymal to an epithelial phenotype (Figure 4D). Considering EMT in cancer has been depicted as a dedifferentiation event (increasing stemness),⁶² the reversed EMT here suggests a differentiation process (attenuation of stemness) of the cancer cells.

So far, we have demonstrated that MoS₂@CD44Ab+Laser treatment attenuates the stemness of cancer cells via reversing the EMT process, while the molecular mechanism by which MoS₂@CD44Ab+Laser reverses the EMT remained undefined. Therefore, we finally examined how MoS₂@CD44Ab+Laser treatment reversed EMT and thus attenuated stemness at the molecular level. Previous research established the functional roles of CD44 in the regulation of the EMT-related signaling pathway.^{77–79} As illustrated in Figure 5A, transmembrane CD44 first recruits phosphorylated ezrin/radixin/moesin (p-ERM) from the cytosol to form a CD44-p-ERM complex, which further recruits Rho guanine nucleotide dissociation inhibitor alpha (RhoGDI α , an endogenous inhibitor for RhoA), promoting the release of GDP-RhoA (inactive form of RhoA) for the subsequent activation to GTP-RhoA. The upregulation of GTP-RhoA (active form of RhoA) mediates the EMT process by upregulating EMT transcriptional factors such as Snail1 and Snail2, favoring cancer stemness, migration/invasion, and drug resistance.⁷⁶ Based on these findings and our earlier results, we proposed to test the following hypothesis: CD44-targeted MoS₂ nanosheets and the moderate photothermal effect can deplete membrane CD44 and impede ERM phosphorylation, respectively, where both factors would synergistically contribute to the downregulation of RhoA activation, leading to the reversed EMT and attenuated cancer stemness (Figure 5B,C).

Western blotting was used to quantify the molecular markers along the CD44-regulated EMT signaling pathway. Figure 5D shows that the amount of membrane CD44 decreased by ~60% for both MoS₂@CD44Ab- and MoS₂@CD44Ab+Laser-treated MDA-MB-231 cells. As illustrated in Figure 5B, the downregulation of membrane CD44 can be attributed to the cell uptake of CD44-targeted MoS₂, depleting membrane CD44 into lysosomal degradative compartments, which is supported by our FITC/Lysotracker colocalization assay. For the cells treated by MoS₂@CD44Ab alone, the downregulation of membrane CD44 consistently led to a ~60% reduction of ERM phosphorylation (p-ERM) and RhoA activation (GTP-RhoA), due to the indispensable role of CD44 in the regulation of ERM phosphorylation (Figure 5D,E).⁸⁰ As anticipated, the downstream EMT transcriptional factors (i.e., Snail1, Snail2) showed a 50–60% decrease (Figure 5F), which explains our earlier results that MoS₂@CD44Ab alone partially suppressed mammosphere formation, expressions of stemness and mesenchymal markers, and migration/invasion of cancer cells. This is also in agreement with previous reports suggesting that knock-down of CD44 partially converts the cells from a mesenchymal to an epithelial phenotype.^{26,56} Notably, in the cells treated by MoS₂@CD44Ab+Laser, both p-ERM and GTP-RhoA levels showed a larger decrease (by ~80–90%) compared to those cells treated by MoS₂@CD44Ab alone (only by ~60%), which implied the additional impact of photothermal treatment on the ERM phosphorylation (Figure 5D,E). This is reasonable considering the

disruptive effect of elevated temperature on the intracellular protein phosphorylation as reported previously in a variety of cell types.^{81–83} Herein, we reason that the increase of intracellular temperature induced by the photothermal effect of cell-internalized MoS₂@CD44Ab could disrupt the ERM phosphorylation, thus impeding the activation of GDP-RhoA to GTP-RhoA (as illustrated by Figure 5C). As a result, the downstream EMT transcriptional factors (i.e., Snail1, Snail2) showed a consistent ~90% decrease (Figure 5F). The decrease in EMT transcriptional factors has been shown to drive cancer cells from a mesenchymal to an epithelial state, along with stemness attenuation.^{84–86} Together, these results reveal a molecular mechanism by which MoS₂@CD44Ab and laser treatment reverse the EMT process in a sequential and synergistic manner: First, cell uptake of MoS₂@CD44Ab depletes the membrane CD44 and reduces the formation of CD44-p-ERM complex to recruit RhoA inhibitor (RhoGDI α), leading to the downregulated RhoA activation. Subsequently, the moderate photothermal effect disrupts the phosphorylation of ERM and thus decreases the availability of p-ERM for the formation of CD44-p-ERM complex, further hampering the RhoGDI α recruitment and RhoA activation. Such a collective negative effect on the RhoA activation results in the downregulation in EMT transcriptional factors, leading to a reversed EMT process.

In summary, we have demonstrated a “photothermal differentiation” approach to induce the differentiation of cancer stem cells, leading to attenuation of cancer cell stemness, chemoresistance, and metastasis. After treatment by CD44-targeted MoS₂ nanosheets and a moderate photothermal effect, CD44-overexpressed, high-stemness breast and prostate cancer cells exhibited attenuated mammosphere-forming ability, improved response to a chemotherapeutic drug (doxorubicin), and inhibited migration and invasion. The attenuation of cancer cell stemness was in parallel with a cellular change from a mesenchymal to an epithelial phenotype, suggesting that a reversed EMT process was induced by the treatment. Further molecular studies revealed the mechanism by which this approach effectively modulated the CD44-regulated EMT signaling pathway, causing a reversed EMT process and attenuated stemness in cancer cells. Overall, this work presents a unique concept, via the use of rationally designed nanomaterials, to address cancer stemness-associated challenges. From a clinical perspective, this approach could be applicable to treat multiple cancers due to the high levels of the CD44 biomarker on various cancers. This method holds great potential in complementing conventional surgical resection and chemotherapy, where pretreating tumors with this approach could impede cancer cell migration and make refractory cancer cells more sensitive to anticancer drugs, thereby increasing the effectiveness of surgical resection and chemotherapy and minimizing the likelihood of metastasis and relapse.

■ ASSOCIATED CONTENT

Supporting Information

The Supporting Information is available free of charge at <https://pubs.acs.org/doi/10.1021/acs.nanolett.3c00089>.

Experimental section, list of antibodies, TEM images of MoS₂@PA@CD44Ab and bare MoS₂, hydrodynamic size and UV–vis spectra of MoS₂@PA@CD44Ab, immunofluorescence staining of surface CD44, cellular

uptake and intracellular localization of MoS₂, live and dead staining assay, mammosphere formation assay, wound-healing and transwell invasion assays, Young's modulus of single cells, and AFM and dSTORM images of single cells, uncropped Western blot images (PDF)

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