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# **Tumour Suppressor Genes and Oncogenes**

**Dr Ana P. Costa-Pereira**

**Imperial College London  
Faculty of Medicine, Department of Oncology/SORA  
Molecular Oncology Section  
London, UK**

# Aims

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- **Become more insightful about cancer as a disease of cell biology**
- **Understand the difference between an oncogene and a tumour suppressor gene (TSG)**
- **Provide the basis to understand mechanisms underlying carcinogenesis**

# Learning Outcomes

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**By the end of this lecture you will be able to:**

- **Define gene, oncogene and tumour suppressor gene**
- **Give examples of different oncogenes and enumerate cancers in which they play key roles**
- **Understand how important it is for cells to 'communicate properly with each other'...**

# Today's Menu

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- **Proto-oncogenes and oncogenes**
- **Tumour suppressor genes**
- **Signal transduction pathways activated by oncogenes**
- **Cell cycle regulation by TSGs**

# Introduction

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- **1960s: viruses were shown to be “packets of the genetic material (DNA or RNA)**
  - \* **RSV = RNA**
  - \* **SV 40 = DNA**
- **Small number of genes (3 to 5 in tumour viruses)**
- **3 to 5 genes are enough to induce cancer!**

# How do viruses induce cancer?

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- How do so few genes 'impose' on our ~30,000 genes?

## Option 1

Virus enters the cell – viral genes irreversibly alter cell – virus (and its genes) leaves the cell

## Option 2

Virus enter cell – viral genes alter cell – viral genome integrates in cell genome and stays

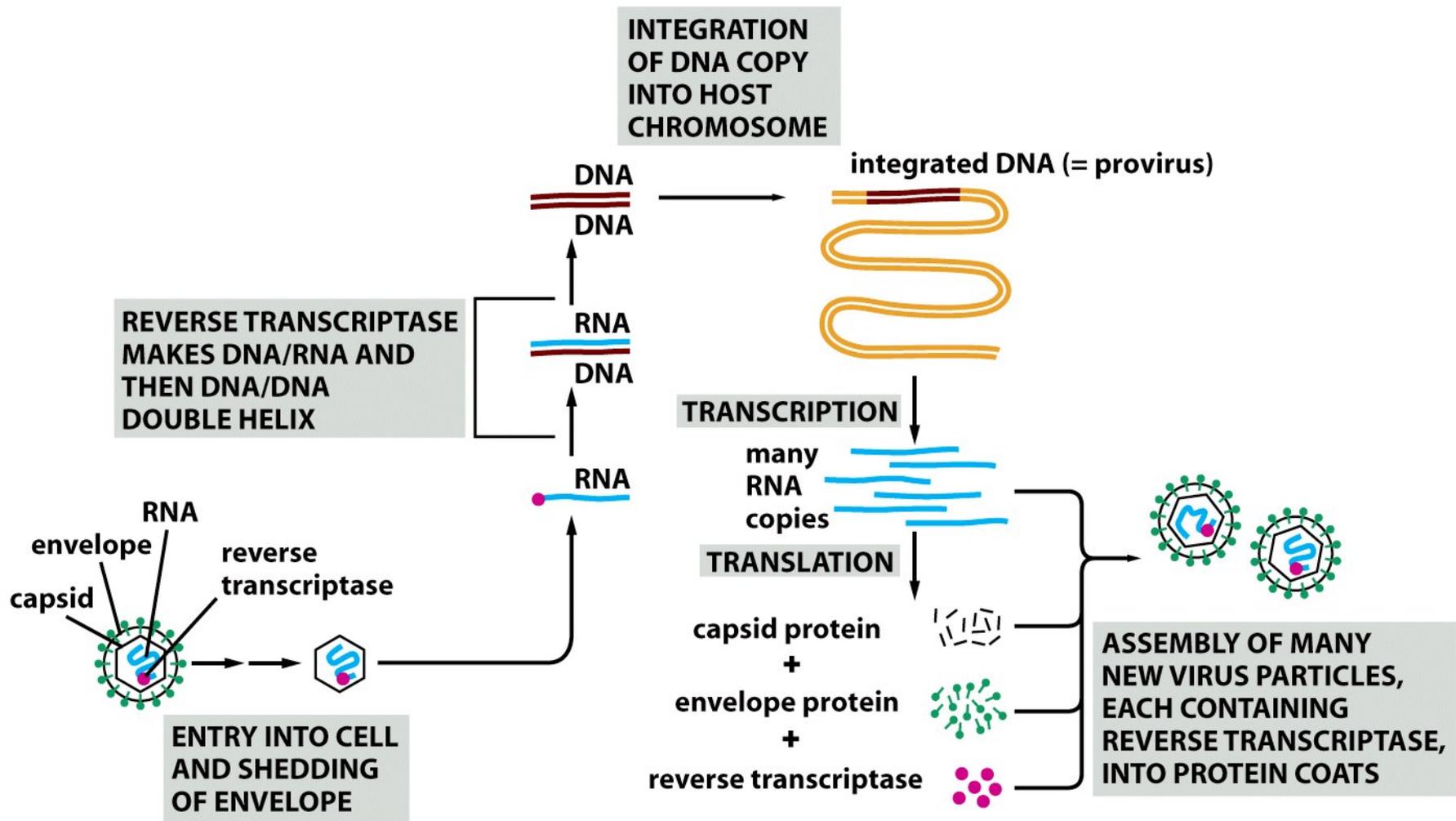


Figure 3-17 The Biology of Cancer (© Garland Science 2007)

## A bit of history...

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- **DNA structure was unveiled in 1953 – before that there was no way of knowing what a gene was...**
- **Tumour cells had “weird” chromosomes that could be seen under the light microscope – but which “bits” (genes) were “affected” (mutated)?**

# The early days...

- Inspection of chromosomes (using a light microscope, not fluorescence as shown here!)

\* each chr. 2,000-10,000 genes



Figure 1-11c The Biology of Cancer (© Garland Science 2007)

- Use of cancer-causing viruses from lab animals
  - isolated from most vertebrates, induce ≠ types of tumours and belong to ≠ virus families
  - \* RNA: retroviruses; DNA: polyomaviruses, papillomaviruses, adenoviruses, herpesviruses

**Table 4.3** Some frequently amplified chromosomal regions and the genes they are known to carry

Name of oncogene <sup>a</sup>	Human chromosomal location	Human cancers	Nature of protein
<i>erbB1</i>	7q12–13	glioblastomas (50%); squamous cell carcinomas (10–20%)	RTK
<i>cab1–erbB2–grb7</i>	17q12	gastric, ovarian, breast carcinomas (10–25%)	RTK, adaptor protein
<i>k-sam</i>	7q26	gastric, breast carcinomas (10–20%)	RTK
<i>FGF-R1</i>	8p12	breast carcinomas (10%)	RTK
<i>met</i>	7q31	gastric carcinomas (20%)	RTK
<i>K-ras</i>	6p12	lung, ovarian, bladder carcinomas (5–10%)	small G protein
<i>N-ras</i>	1p13	head and neck cancers (30%)	TF
<i>c-myc</i>	8q24	various leukemias, carcinomas (10–50%)	TF
<i>L-myc</i>	1p32	lung carcinomas (10%)	TF
<i>N-myc–DDX1</i>	2p24–25	neuroblastomas, lung carcinomas (30%)	TF
<i>akt-1</i>	14q32–33	gastric cancers (20%)	ser/thr kinase
<i>cyclin D1–exp1–hst1–ems1</i>	(11q13)	breast and squamous cell carcinomas (40–50%)	G1 cyclin
<i>cdk4–mdm2–sas–gli</i>	12q13	sarcomas (40%)	CDK, p53 antagonist
<i>cyclin E</i>	19q12	gastric cancers (15%)	cyclin
<i>akt2</i>	(19q13)	pancreatic, ovarian cancers (30%)	ser/thr kinase
<i>AIB1, BTAK</i>	(20q12–13)	breast cancers (15%)	receptor co-activator
<i>cdk6</i>	(19q21–22)	gliomas (5%)	CDK
<i>myb</i>	6q23–24	colon carcinoma, leukemias	TF
<i>ets-1</i>	11q23	lymphoma	TF
<i>gli</i>	12q13	glioblastomas	TF
<i>FGFR2</i>	10q26	breast carcinomas	RTK

<sup>a</sup>The listing of several genes indicates the frequent co-amplification of a number of closely linked genes; only the products of the most frequently amplified genes are described in the right column.

Courtesy of M. Terada, Tokyo, and adapted from G.M. Cooper, *Oncogenes*, 2nd ed. Boston and London: Jones and Bartlett, 1995.

Table 4-3 The Biology of Cancer (© Garland Science 2007)

# Proto-oncogenes and Oncogenes

**oncogene** |'ä ng kəjēn |

noun Medicine

a gene that dominates the behaviour of the cell in which it acts and that, in certain circumstances can transform a cell into a tumour cell.

- **What makes a gene become an oncogene?**
- **What genes serve as targets for mutations that predispose towards cancer?**
- **What are the normal functions of these targets?**

# The *src* Gene of Rous Sarcoma Virus

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- Initial experiments helped by a mutant *src* sensitive to temperature shifts
- RSV has 1 gene (*v-src*) whose protein (*src*) is required to maintain the transformed phenotype
- In 1970 it was shown that mammalian cells have a *v-src* homologue: *c-src*.

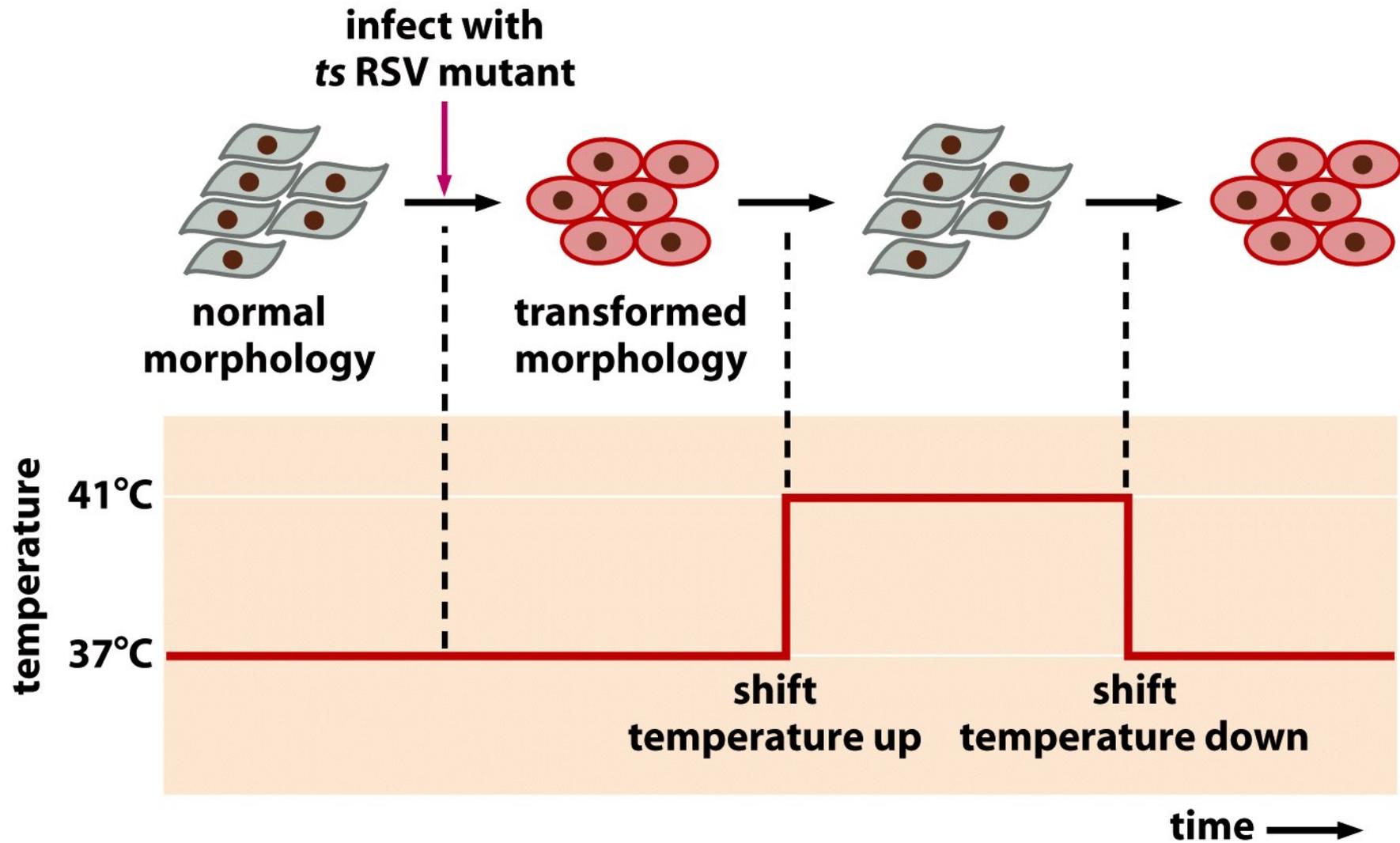


Figure 3-8 The Biology of Cancer (© Garland Science 2007)

## src

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- **Highly conserved so must be beneficial to the cell...**
- **Many other retroviruses carry oncogenes and each is also derived from a  $\neq$ , normal precursor**
  - \* MC29 virus – myeloid leukaemia in chickens – v-myc
  - \* MS virus – murine sarcoma – Ha-ras and Ki-ras

**Table 4.1** Examples of retrovirus-associated oncogenes that have been discovered in altered form in human cancers

Name of virus	Species	Oncogene	Type of oncoprotein	Homologous oncogene found in human tumors
Rous sarcoma	chicken	<i>src</i>	receptor TK	colon carcinoma <sup>a</sup>
Abelson leukemia	mouse	<i>abl</i>	nonreceptor TK	CML
Avian erythroblastosis	mouse	<i>erbB</i>	receptor TK	gastric, lung, breast <sup>b</sup>
McDonough feline sarcoma	cat	<i>fms</i>	receptor TK	AML <sup>c</sup>
H-Z feline	cat	<i>kit</i>	receptor TK <sup>d</sup>	gastrointestinal stromal
Murine sarcoma 3611	mouse	<i>raf</i>	Ser/Thr kinase <sup>e</sup>	bladder carcinoma
Simian sarcoma	monkey	<i>sis</i>	growth factor (PDGF)	many types <sup>f</sup>
Harvey sarcoma	mouse/rat	<i>H-ras</i> <sup>g</sup>	small G protein	bladder carcinoma
Kirsten sarcoma	mouse/rat	<i>K-ras</i> <sup>g</sup>	small G protein	many types
Avian erythroblastosis	chicken	<i>erbA</i>	nuclear receptor <sup>h</sup>	liver, kidney, pituitary
Avian myeloblastosis E26	chicken	<i>ets</i>	transcription factor	leukemia <sup>i</sup>
Avian myelocytoma	chicken	<i>myc</i> <sup>j</sup>	transcription factor	many types
Reticuloendotheliosis	turkey	<i>rel</i> <sup>k</sup>	transcription factor	lymphoma

<sup>a</sup>Mutant forms found in a small number of these tumors.

<sup>b</sup>Receptor for EGF; the related erbB2/HER2/Neu protein is overexpressed in 30% of breast cancers.

<sup>c</sup>Fms, the receptor for colony-stimulating factor (CSF-1), is found in mutant form in a small number of AMLs; the related Flt3 (Fms-like tyrosine kinase-3) protein is frequently found in mutant form in these leukemias.

<sup>d</sup>Receptor for stem cell factor.

<sup>e</sup>The closely related B-Raf protein is mutant in the majority of melanomas.

<sup>f</sup>Protein is overexpressed in many types of tumors.

<sup>g</sup>The related N-ras gene is found in mutant form in a variety of human tumors.

<sup>h</sup>Receptor for thyroid hormone.

<sup>i</sup>27 distinct members of the Ets family of transcription factors are encoded in the human genome. Ets-1 is overexpressed in many types of tumors; others are involved in chromosomal translocations in AML and in Ewing sarcomas.

<sup>j</sup>The related N-myc gene is overexpressed in pediatric neuroblastomas and small-cell lung carcinomas.

<sup>k</sup>Rel is a member of a family of proteins that constitute the NF- $\kappa$ B transcription factor, which is constitutively activated in a wide range of human tumors.

Adapted in part from J. Butel, *Carcinogenesis* 21:405–426, 2000; and G.M. Cooper, *Oncogenes*, 2nd ed. Boston and London: Jones and Bartlett, 1995.

**Table 4-1** The Biology of Cancer (© Garland Science 2007)

**Table 4.6** Viruses implicated in human cancer causation

Virus <sup>a</sup>	Virus family	Cells infected	Human malignancy	Transmission route
EBV	Herpesviridae	B cells oropharyngeal epithelial cells lymphoid	Burkitt's lymphoma nasopharyngeal carcinoma	saliva saliva
HTLV-I	Retroviridae	T cells	lymphoma <sup>b</sup> non-Hodgkin's lymphoma	Hodgkin's disease parenteral, venereal <sup>c</sup>
HHV-8 <sup>d</sup>	Herpesviridae	endothelial cells	Kaposi's sarcoma, body cavity lymphoma	venereal
HBV	Hepadnaviridae	hepatocytes	hepatocellular carcinoma	parenteral, venereal
HCV	Flaviviridae	hepatocytes	hepatocellular carcinoma	parenteral
HPV	Papovaviridae	cervical epithelial	cervical carcinoma	venereal
JCV <sup>e</sup>	Papovaviridae	central nervous system	astrocytoma, glioblastoma	?

<sup>a</sup>Most of the viruses carry one or more potent growth-promoting genes/oncogenes in their genomes. However, such genes have not been identified in the genomes of HBV and HCV.

<sup>b</sup>These tumors, which bear copies of EBV genomes, appear in immunosuppressed patients.

<sup>c</sup>Parenteral, blood-borne; venereal, via sexual intercourse.

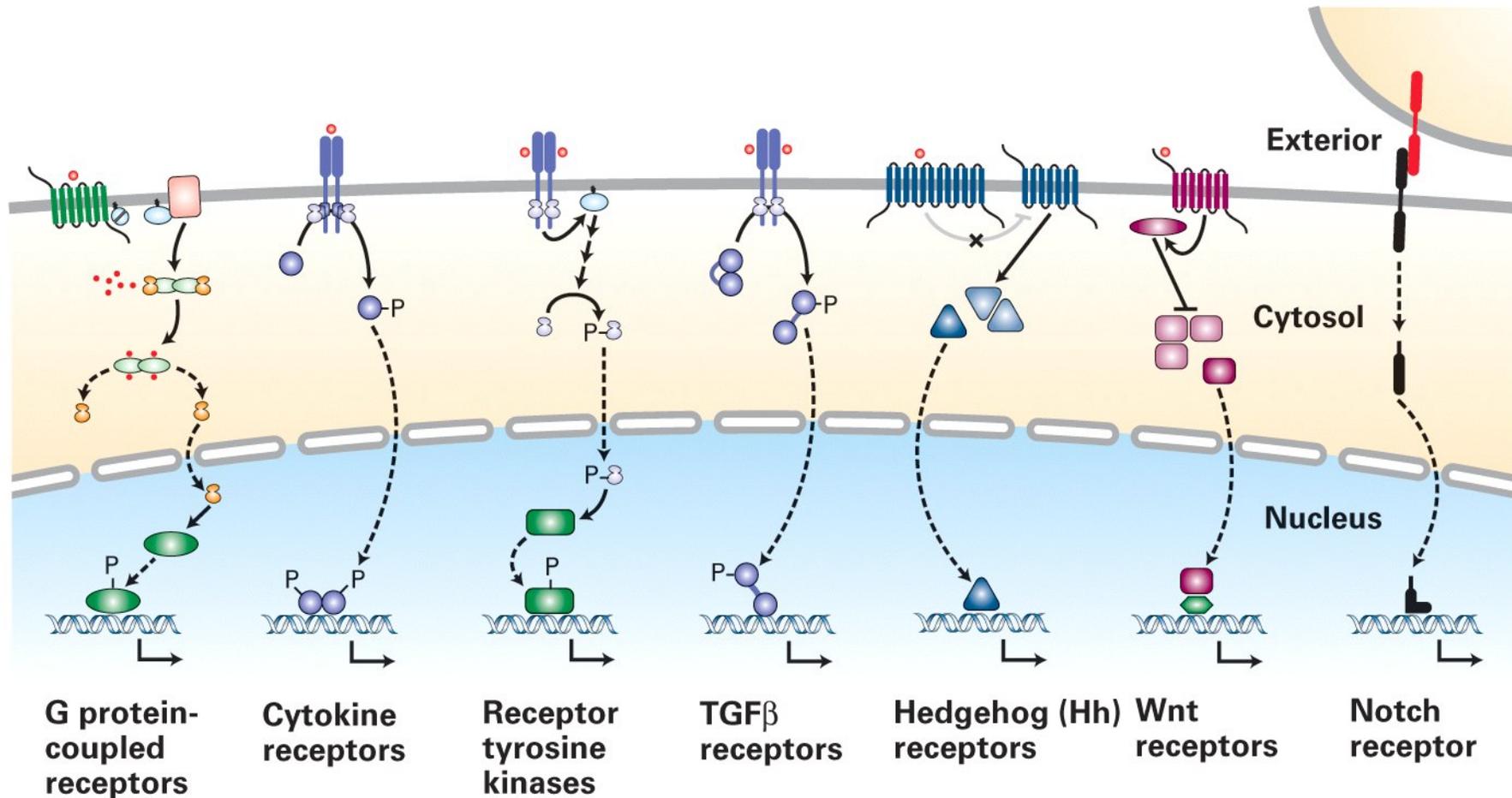
<sup>d</sup>Also known as KSHV, Kaposi's sarcoma herpesvirus.

<sup>e</sup>JCV (JC virus, a close relative of SV40) infects more than 75% of the population by age 15, but the listed virus-containing tumors are not common. Much correlative evidence supports the role of JCV in the transformation of human central nervous system cells but evidence of a causal role in tumor formation is lacking.

Adapted in part from J. Butel, *Carcinogenesis* 21:405–426, 2000.

**Table 4-6** The Biology of Cancer (© Garland Science 2007)

# Major Types of Cell Surface Receptors



**Table 5.1 Growth factors (GFs) and tyrosine kinase receptors that are often involved in tumor pathogenesis**

Name of GF	Name of receptor	Cells responding to GF
PDGF <sup>a</sup>	PDGF-R	endothelial, VSMCs, fibroblasts, other mesenchymal cells, glial cells
EGF <sup>b</sup>	EGF-R <sup>c</sup>	many types of epithelial cells, some mesenchymal cells
NGF	Trk	neurons
FGF <sup>d</sup>	FGF-R <sup>e</sup>	endothelial, fibroblasts, other mesenchymal cells, VSMCs, neuroectodermal cells
HGF/SF	Met	various epithelial cells
VEGF <sup>f</sup>	VEGF-R <sup>g</sup>	endothelial cells in capillaries, lymph ducts
IGF <sup>h</sup>	IGF-R1	wide variety of cell types
GDNF	Ret	neuroectodermal cells
SCF	Kit	hematopoietic, mesenchymal cells

<sup>a</sup>PDGF is represented by four distinct polypeptides, PDGF-A, -B, -C, and -D. The PDGF-Rs consist of at least two distinct species,  $\alpha$  and  $\beta$ , that can homodimerize or heterodimerize and associate with these ligands in different ways.

<sup>b</sup>The EGF family of ligands, all of which bind to the EGF-R (ErbB1) and/or heterodimers of erbB1 and one of its related receptors (footnote c), includes—in addition to EGF—TGF- $\alpha$ , HB-EGF, amphiregulin, betacellulin, and epiregulin.

<sup>c</sup>The EGF-R family of receptors consists of four distinct proteins, ErbB1 (EGF-R), ErbB2 (HER2, Neu), ErbB3 (HER3), and ErbB4 (HER4). They often bind ligands as heterodimeric receptors, for example, ErbB1 + ErbB3, ErbB1 + ErbB2, or ErbB2 + ErbB4; ErbB3 is devoid of kinase activity and is phosphorylated by ErbB2 when the two form heterodimers. ErbB3 and ErbB4 bind neuregulins, a family of more than 15 ligands that are generated by alternative splicing. Because ErbB3 has no intrinsic kinase activity, it becomes phosphorylated in heterodimeric complexes by ErbB2, which has no ligand of its own but does have strong tyrosine kinase activity.

<sup>d</sup>FGFs constitute a large family of GFs. The prototypes are acidic FGF (aFGF) and basic FGF (bFGF); in addition there are other known members of this family.

<sup>e</sup>There are four well-characterized FGF-Rs.

<sup>f</sup>There are four known VEGFs. VEGF-A and -B are involved in angiogenesis, while VEGF-C and -D are involved predominantly in lymphangiogenesis.

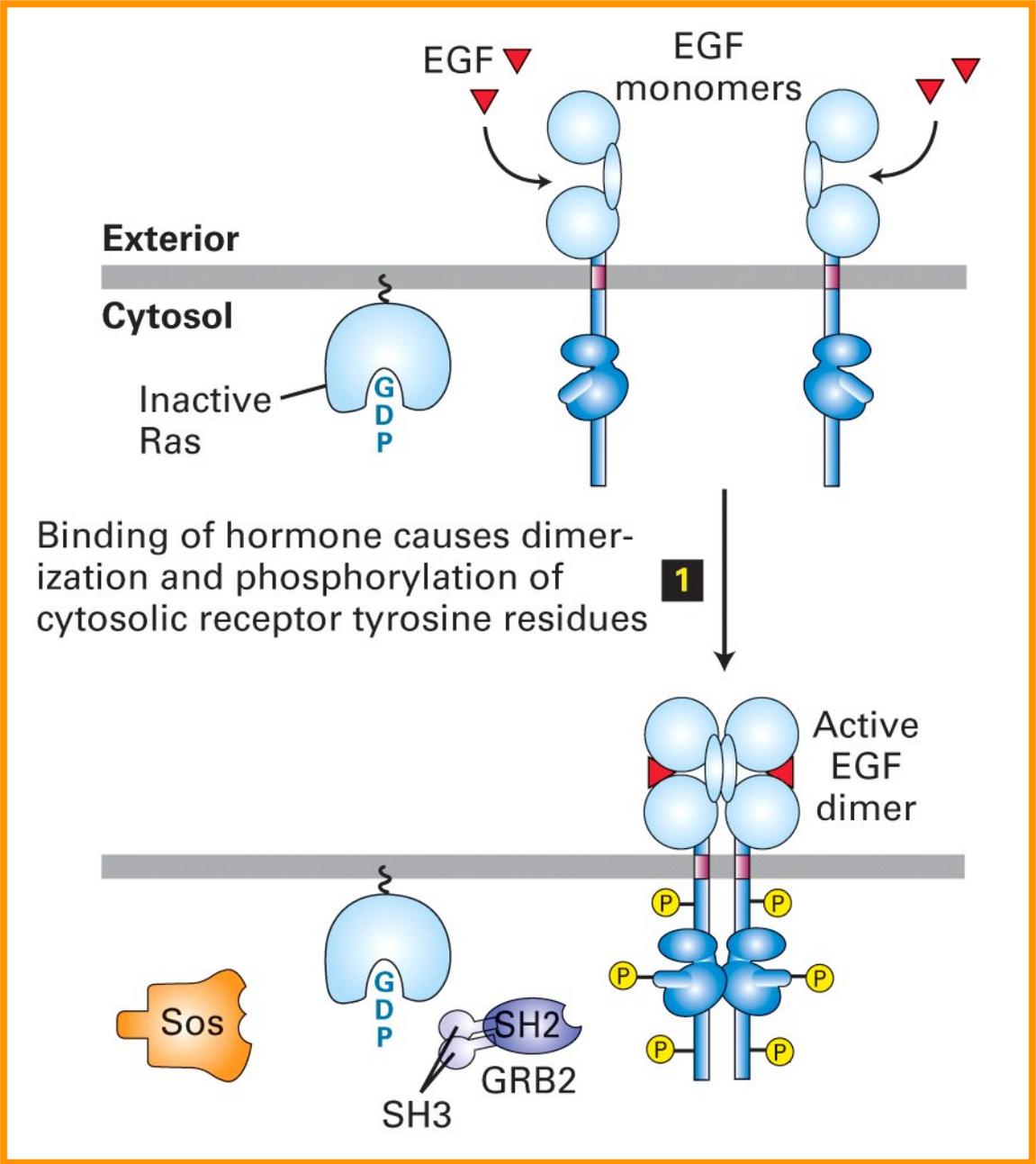
<sup>g</sup>There are three known VEGF-Rs: VEGF-R1 (also known as Flt-1) and VEGF-R2 (also known as Flk-1/KDR), involved in angiogenesis; and VEGF-R3, involved in lymphangiogenesis.

<sup>h</sup>The two known IGFs, IGF-1 and IGF-2, both related in structure to insulin, stimulate cell growth (i.e., increase in size) and survival; they also appear to be mitogenic.

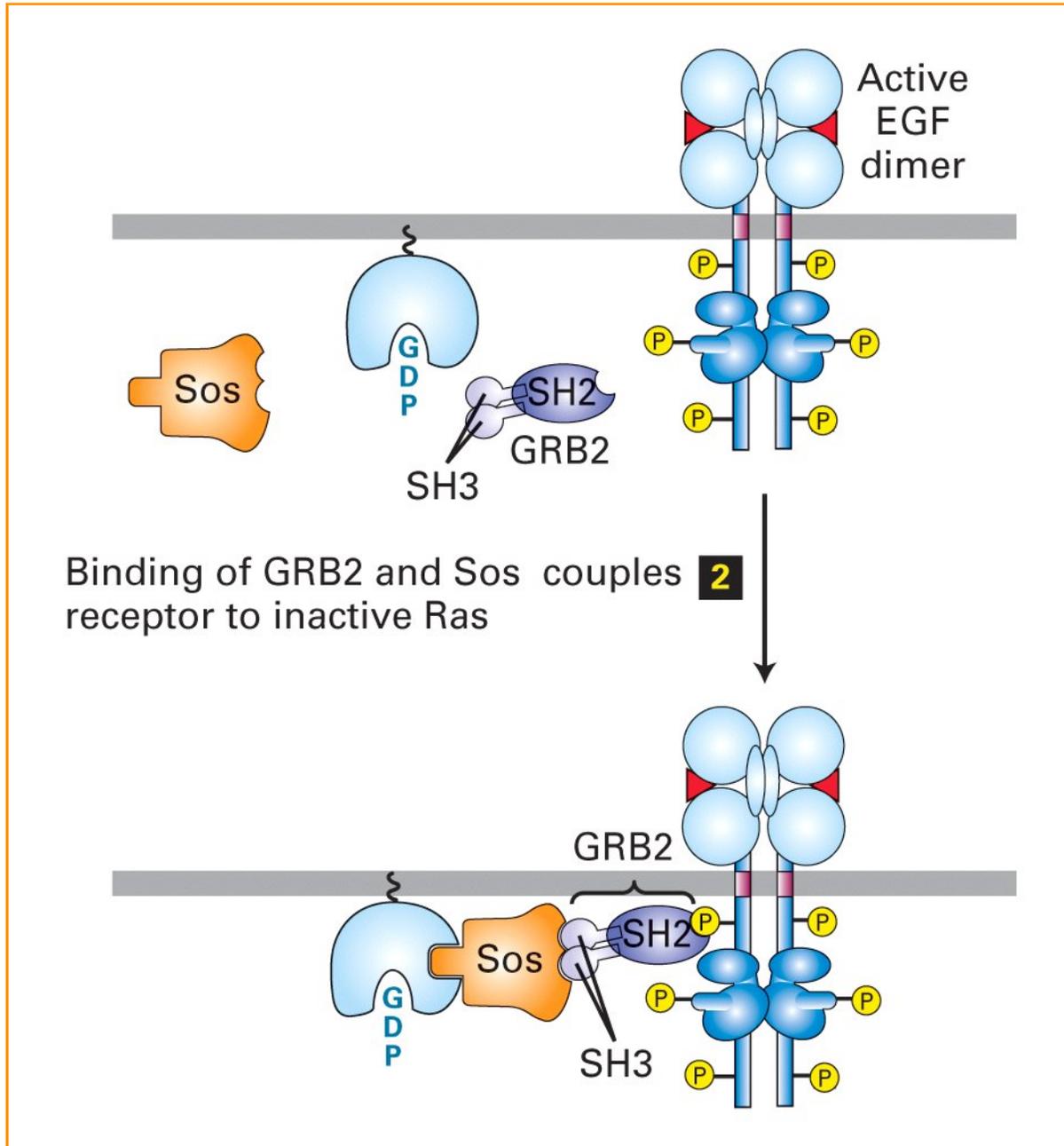
Abbreviation: VSMC, vascular smooth muscle cell.

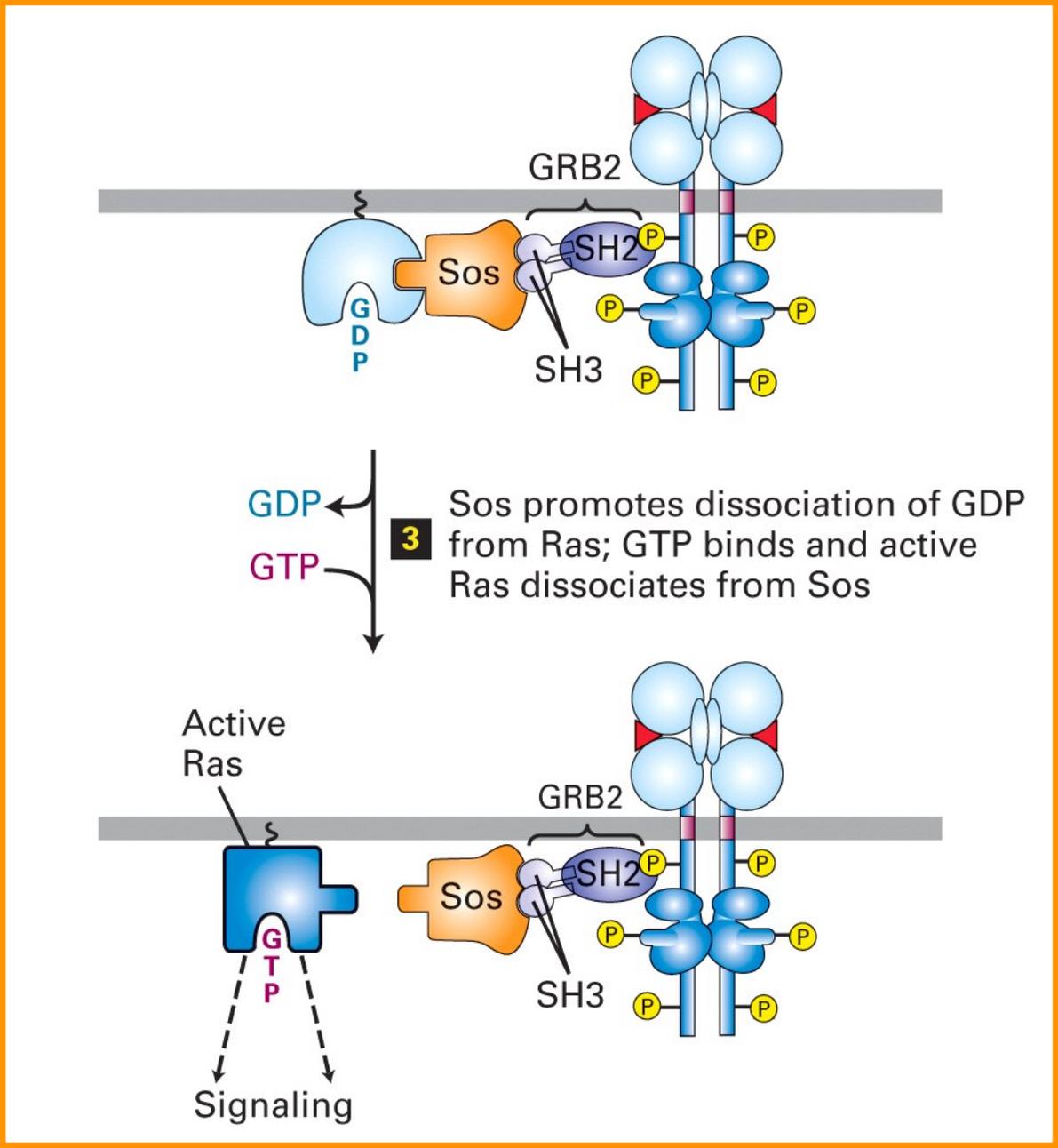
Adapted in part from B. Alberts et al., *Molecular Biology of the Cell*, 4th ed. New York: Garland Science, 2002.

**Table 5-1 The Biology of Cancer** (© Garland Science 2007)

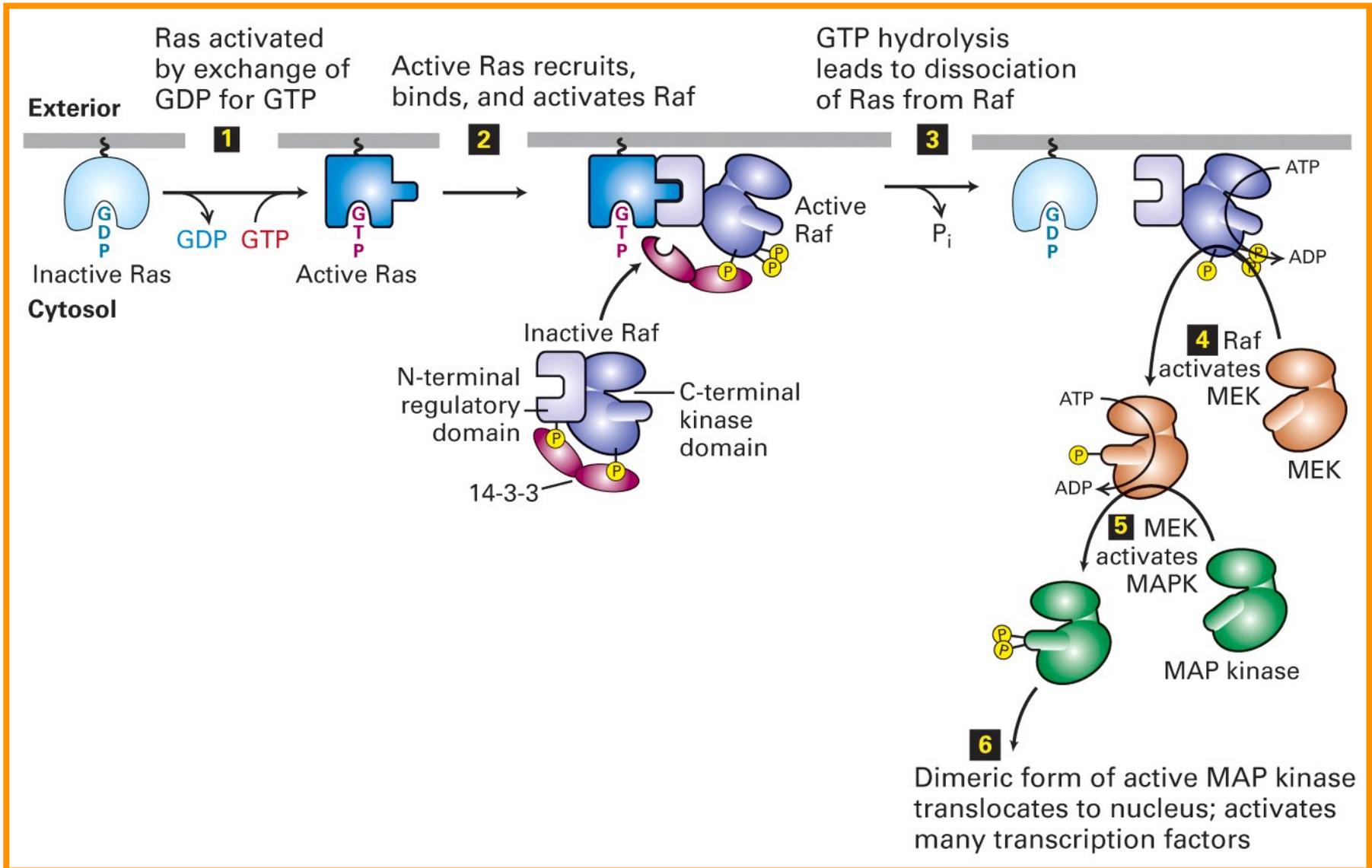


Lodish *et al.* (2004). *Molecular Cell Biology*, 5th ed, W.H. Freeman & Co., NY, USA.

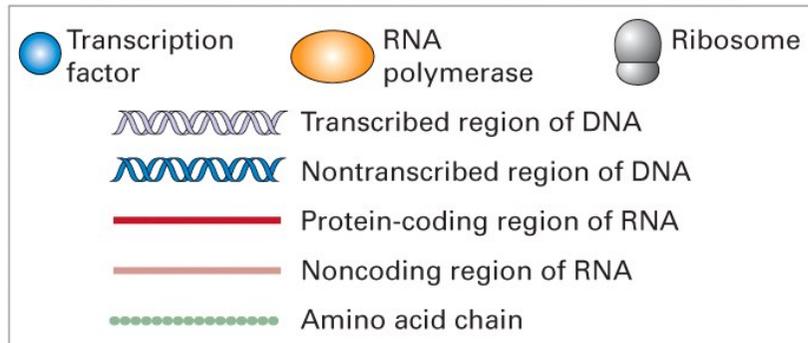
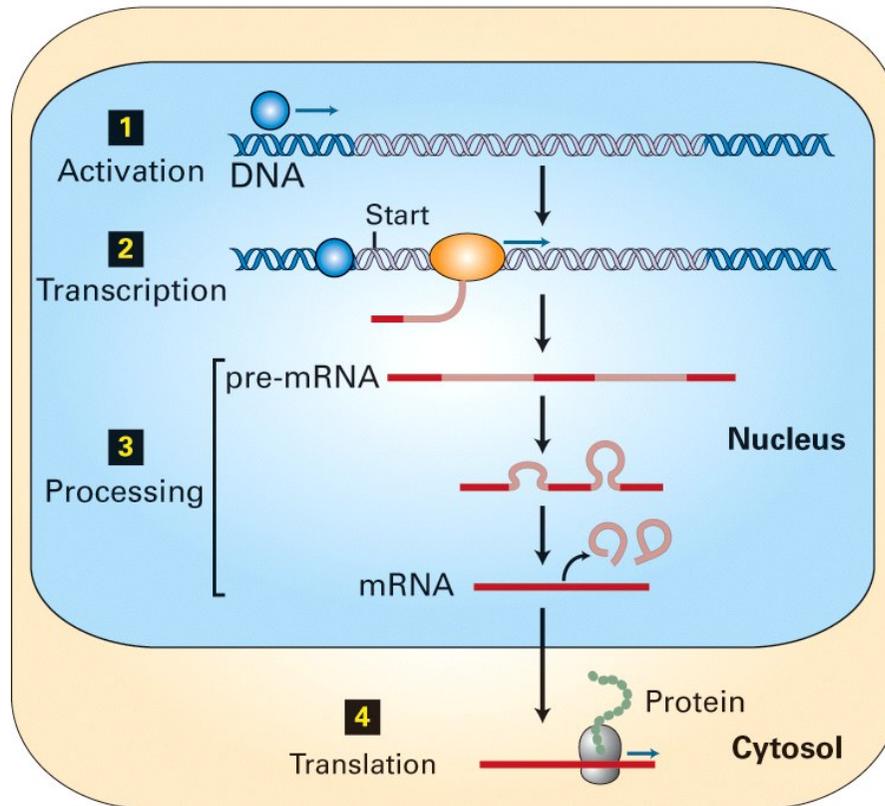




Lodish *et al.* (2004). *Molecular Cell Biology*, 5th ed, W.H. Freeman & Co., NY, USA.



# Gene Transcription



- Each cell has instructions to make all proteins
- Only a small subset is thought to be produced
- **Some genes are read; some are silenced**
- Different sets of genes are expressed in different cells
- Quantities expressed can vary by many fold

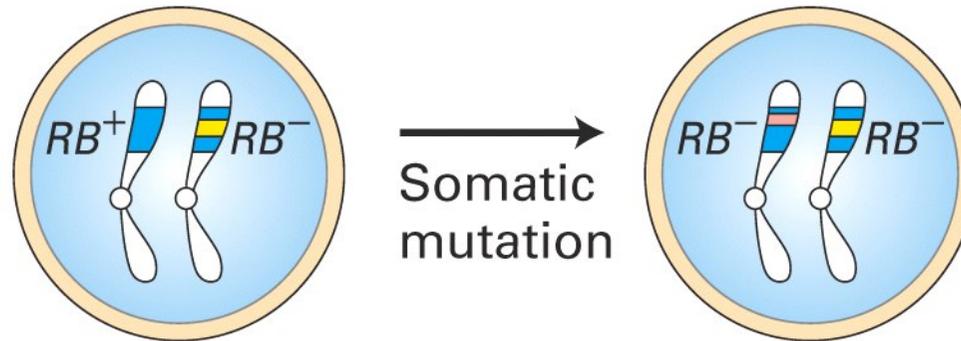
**Incredibly complex!!!**

# Tumour Suppressor Genes

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- **Cell growth must be tightly regulated**
  - \* limitation of mitogenic signals
  - \* Inhibitors of proliferation
- **The inhibitors and controllers of proliferation are the tumour suppressor genes (sometimes called anti-oncogenes)**
- **When inactivated can lead to cancer**

(a) Hereditary retinoblastoma



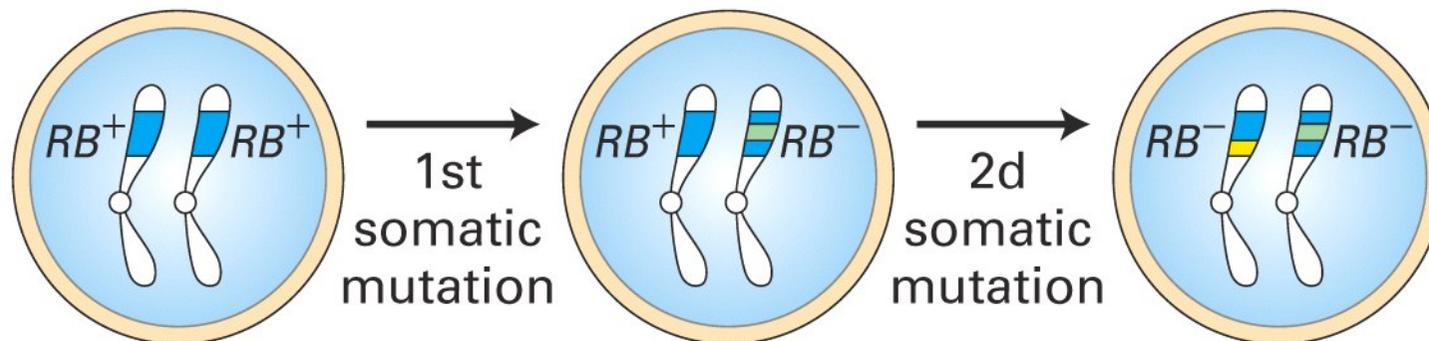
Somatic retinal cell

Homozygous cell gives rise to tumors in retina



Alfred Knudson  
1971

(b) Sporadic retinoblastoma

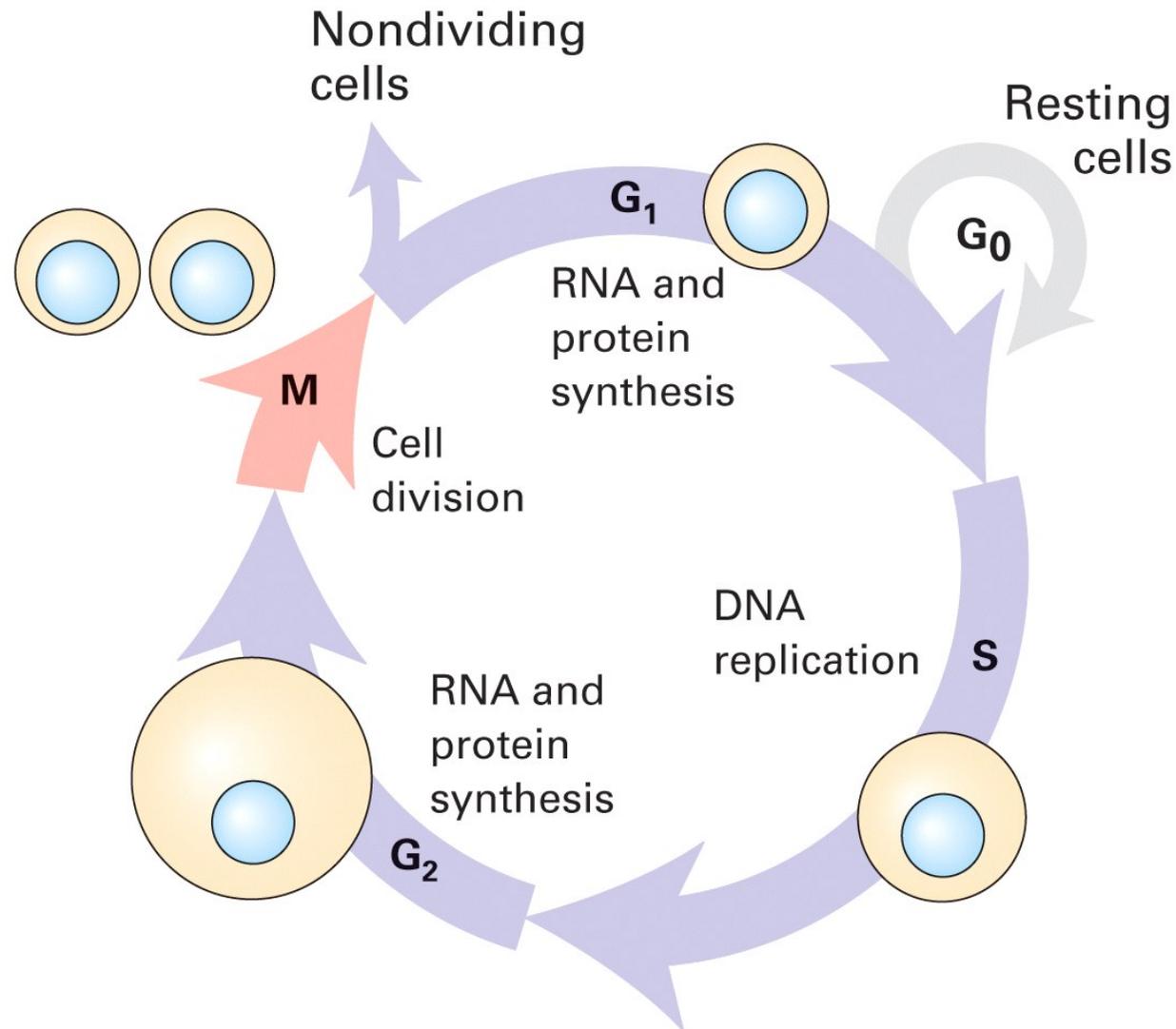


Somatic retinal cell

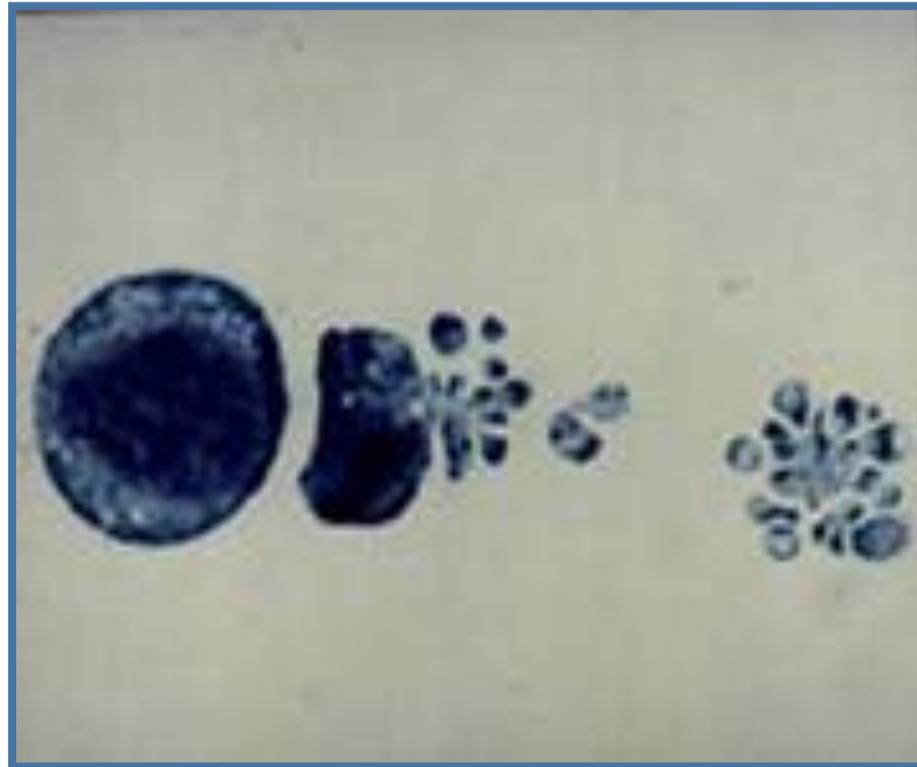
Homozygous cell gives rise to tumors in retina

Chr. 13, q14

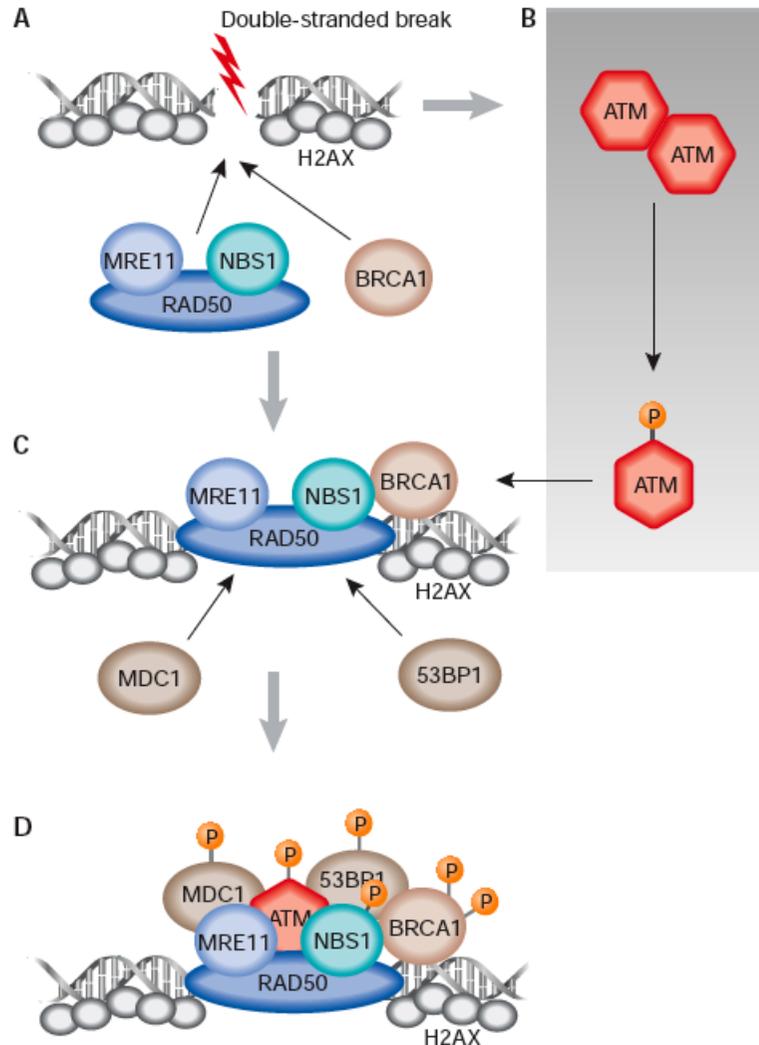
# TSGs Work During Cell Cycle



# TSGs Induce Apoptosis



# TSGs Are Involved in DNA Repair



## Ataxia Telangiectasia (telos+angeion+ektasis)

Degenerative disease

- Cerebellar degeneration
- Radiosensitivity
- Predisposition to cancer
- Immunodeficiency

**Table 7.1** Human tumor suppressor genes that have been cloned

Name of gene	Chromosomal location	Familial cancer syndrome	Sporadic cancer	Function of protein
<i>RUNX3</i>	1p36	—	gastric carcinoma	TF co-factor
<i>HRPT2</i>	1q25–32	parathyroid tumors, jaw fibromas	parathyroid tumors	chromatin protein
<i>FH</i>	1q42.3	familial leiomyomatosis <sup>a</sup>	—	fumarate hydratase
<i>FHIT</i>	3p14.2	—	many types	diadenosine triphosphate hydrolase
<i>RASSF1A</i>	3p21.3	—	many types	multiple functions
<i>TGFBR2</i>	3p2.2	HNPPC	colon, gastric, pancreatic carcinomas	TGF- $\beta$ receptor
<i>VHL</i>	3p25	von Hippel–Lindau syndrome	renal cell carcinoma	ubiquitylation of HIF
<i>hCDC4</i>	4q32	—	endometrial carcinoma	ubiquitin ligase
<i>APC</i>	5p21	familial adenomatous polyposis coli	colorectal, pancreatic, and stomach carcinomas; prostate carcinoma	$\beta$ -catenin degradation
<i>NKX3.1</i>	8p21	—	prostate carcinoma	homeobox TF
<i>p16<sup>INK4A</sup></i> <sup>b</sup>	9p21	familial melanoma	many types	CDK inhibitor
<i>p14<sup>ARF</sup></i> <sup>c</sup>	9p21	—	all types	p53 stabilizer
<i>PTC</i>	9q22.3	nevoid basal cell carcinoma syndrome	medulloblastomas	receptor for hedgehog GF
<i>TSC1</i>	9q34	tuberous sclerosis	—	inhibitor of mTOR <sup>f</sup>
<i>BMPR1</i>	10q21–22	juvenile polyposis	—	BMP receptor
<i>PTEN</i> <sup>d</sup>	10q23.3	Cowden's disease, breast and gastrointestinal carcinomas	glioblastoma; prostate, breast, and thyroid carcinomas	PIP <sub>3</sub> phosphatase
<i>WT1</i>	11p13	Wilms tumor	Wilms tumor	TF
<i>MEN1</i>	11p13	multiple endocrine neoplasia	—	histone modification, transcriptional repressor

<sup>a</sup>Familial leiomyomatosis includes multiple fibroids, cutaneous leiomyomas, and renal cell carcinoma. The gene product is a component of the tricarboxylic cycle.

<sup>b</sup>Also known as *MTS1*, *CDKN2*, and *p16*.

<sup>c</sup>The human homolog of the murine *p19<sup>ARF</sup>* gene.

<sup>d</sup>Also called *MMAC* or *TEP1*.

<sup>e</sup>*SDHS* encodes the succinate–ubiquinone oxidoreductase subunit D, a component of the mitochondrial respiratory chain complex II.

<sup>f</sup>mTOR is a serine/threonine kinase that controls, among other processes, the rate of translation and activation of Akt/PKB. TSC1 (hamartin) and TSC2 (tuberin) control both cell size and cell proliferation.

<sup>g</sup>The *CBP* gene is involved in chromosomal translocations associated with AML. These translocations may reveal a role of a segment of CBP as an oncogene rather than a tumor suppressor gene.

<sup>h</sup>Also termed Carney complex.

<sup>i</sup>Encodes the Smad4 TF associated with TGF- $\beta$  signaling; also known as *MADH4* and *SMAD4*.

<sup>j</sup>The human SNF5 protein is a component of the large Swi/Snf complex that is responsible for remodeling chromatin in a way that leads to transcriptional repression through the actions of histone deacetylases. The rhabdoid predisposition syndrome involves susceptibility to atypical teratoid/rhabdoid tumors, choroid plexus carcinomas, medulloblastomas, and extra-renal rhabdoid tumors.

Adapted in part from E.R. Fearon, *Science* 278:1043–1050, 1997; and in part from D.J. Marsh and R.T. Zori, *Cancer Lett.* 181:125–164, 2002.

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**Table 7.1** Human tumor suppressor genes that have been cloned

Name of gene	Chromosomal location	Familial cancer syndrome	Sporadic cancer	Function of protein
<i>BWS/CDKN1C</i>	11p15.5	Beckwith–Wiedemann syndrome	—	p57 <sup>Kip2</sup> CDK inhibitor
<i>SDHD</i>	11q23	familial paraganglioma	pheochromocytoma	mitochondrial protein <sup>e</sup>
<i>RB</i>	13q14	retinoblastoma, osteosarcoma	retinoblastoma; sarcomas; bladder, breast, esophageal, and lung carcinomas	transcriptional repression; control of E2Fs
<i>TSC2</i>	16p13	tuberous sclerosis	—	inhibitor of mTOR <sup>f</sup>
<i>CBP</i>	16p13.3	Rubinstein–Taybi	AML <sup>g</sup>	TF co-activator
<i>CYLD</i>	16q12–13	cylindromatosis	—	deubiquitinating enzyme
<i>CDH1</i>	16q22.1	familial gastric carcinoma	invasive cancers	cell–cell adhesion
<i>BHD</i>	17p11.2	Birt–Hogg–Dube syndrome	kidney carcinomas, hamartomas	unknown
<i>TP53</i>	17p13.1	Li–Fraumeni syndrome	many types	TF
<i>NF1</i>	17q11.2	neurofibromatosis type 1	colon carcinoma, astrocytoma	Ras–GAP
<i>BECN1</i>	17q21.3	—	breast, ovarian, prostate	autophagy
<i>PRKAR1A</i>	17.q22–24	multiple endocrine neoplasia <sup>h</sup>	multiple endocrine tumors	subunit of PKA
<i>DPC4<sup>i</sup></i>	18q21.1	juvenile polyposis	pancreatic and colon carcinomas	TGF-β TF
<i>LKB1/STK11</i>	19p13.3	Peutz–Jegher syndrome	hamartomatous colonic polyps	serine/threonine kinase
<i>RUNX1</i>	21q22.12	familial platelet disorder	AML	TF
<i>SNF5<sup>j</sup></i>	22q11.2	rhabdoid predisposition syndrome	malignant rhabdoid tumors	chromosome remodeling
<i>NF2</i>	22q12.2	neurofibroma-position syndrome	schwannoma, meningioma; ependymoma	cytoskeleton–membrane linkage

<sup>a</sup>Familial leiomyomatosis includes multiple fibroids, cutaneous leiomyomas, and renal cell carcinoma. The gene product is a component of the tricarboxylic cycle.

<sup>b</sup>Also known as *MTS1*, *CDKN2*, and *p16*.

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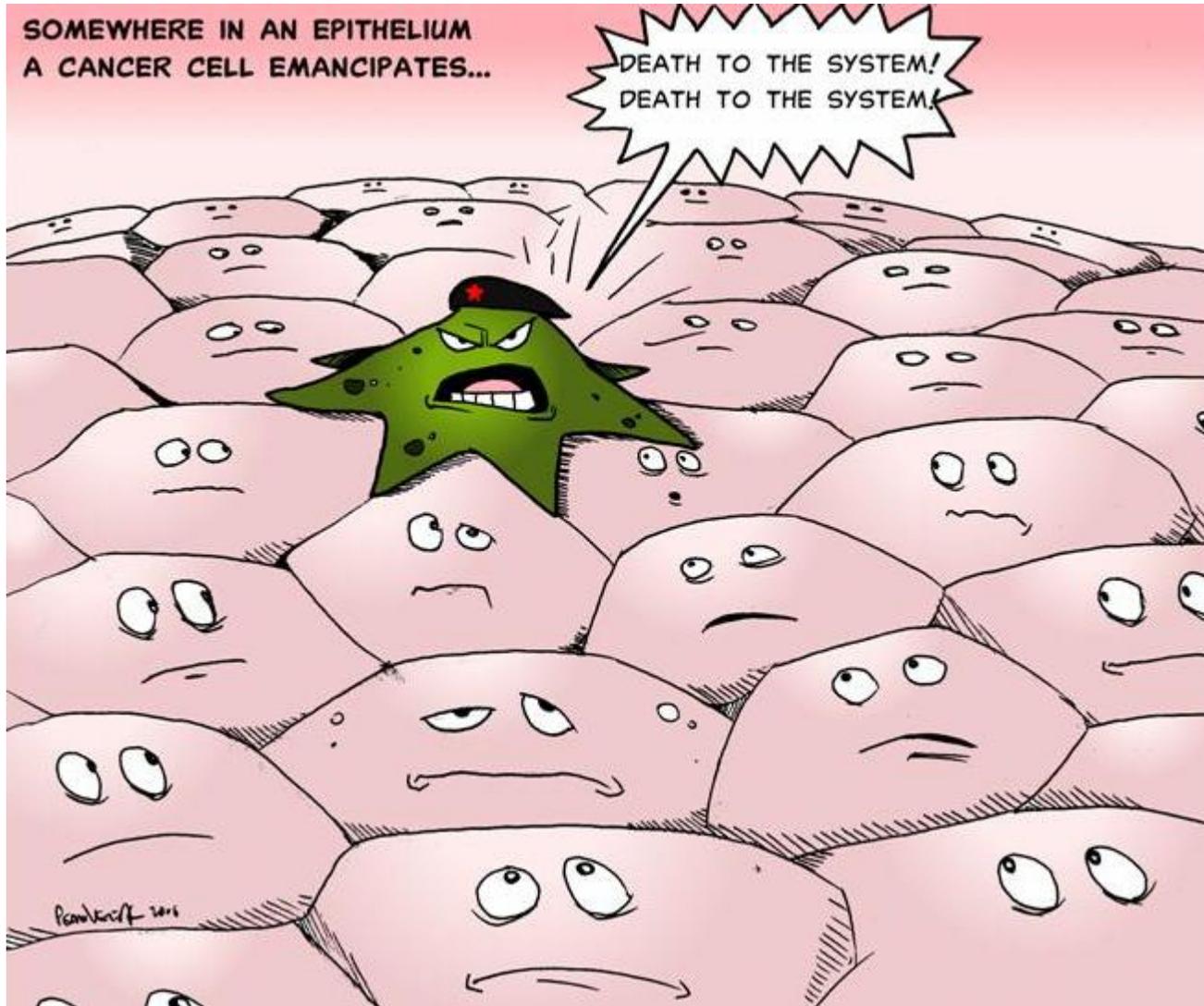
# Conclusions

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- **Proto-oncogenes can lead a cell astray**
- **Oncogenes dominate the WT gene**
- **TSGs protect cells from uncontrolled growth**
- **Only 1 copy of the TSG is required – 2 exist as a safeguard – thus need 2 hits on both TSGs for a cell to become cancerous**

SOMEWHERE IN AN EPITHELIUM  
A CANCER CELL EMANCIPATES...

DEATH TO THE SYSTEM!  
DEATH TO THE SYSTEM!



# Bibliography

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