

# The HGF/SF-MET receptor complex a complex interaction

*by Hugo de Jonge*

# Acknowledgements

## Department of Molecular Medicine Unit of Immunology and General Pathology

- Prof Ermanno Gherardi
- Dr Luisa Iamele
- *current and past students*

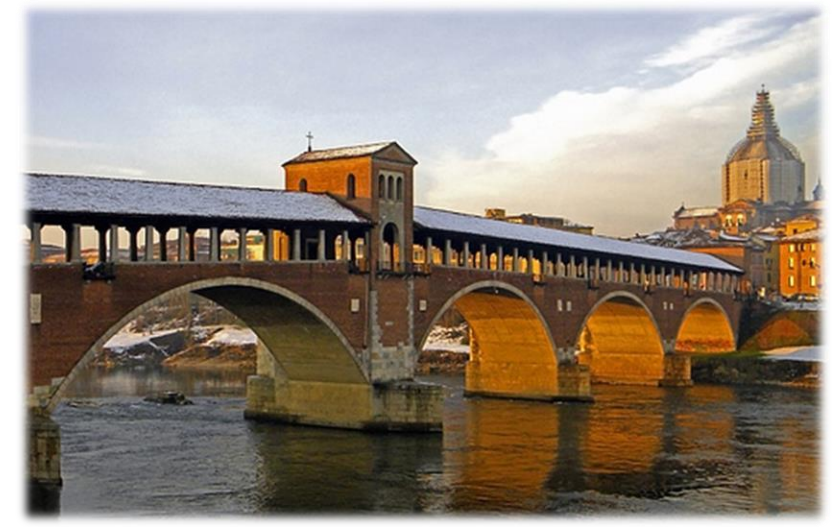
## Leiden Medical Centre (LUMC), The Netherlands

- Dr Cornelis Sier

**Many people from former lab  
in Cambridge, UK**

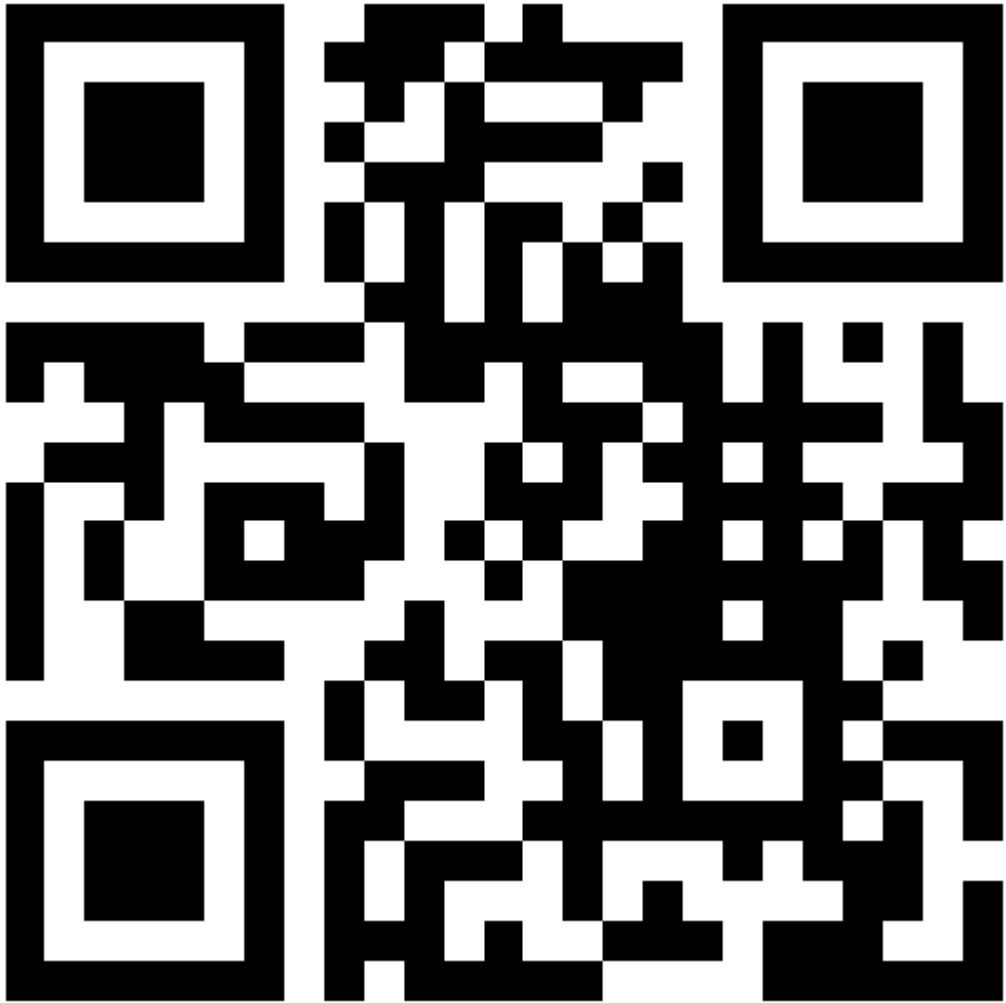


## University of Pavia



**The importance of being able to  
“see” a tumour-related protein in  
(developing) a treatment**

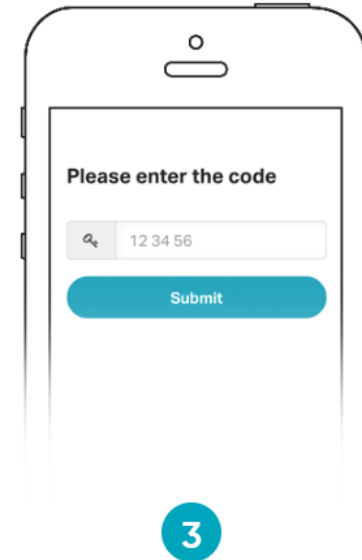
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2

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3

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# The discovery of a new protein



*Proc. Natl. Acad. Sci. USA*  
Vol. 83, pp. 6489–6493, September 1986  
Cell Biology

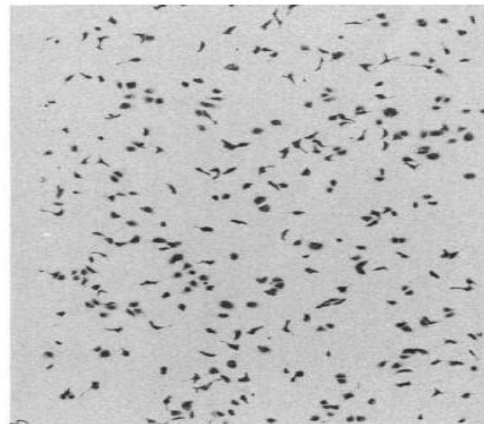
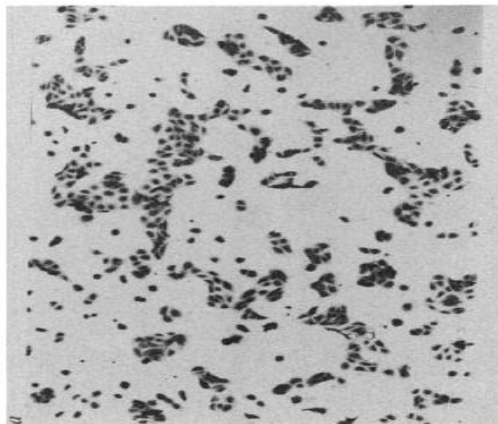
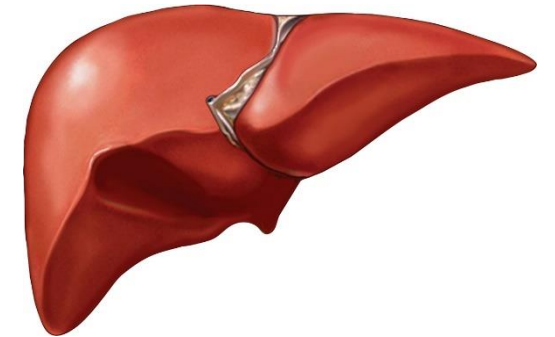
## Purification and characterization of a growth factor from rat platelets for mature parenchymal hepatocytes in primary cultures

(hepatocyte growth factor/hepatotropic factor/liver regeneration)

TOSHIKAZU NAKAMURA, HIDEO TERAMOTO, AND AKIRA ICHIHARA

Institute for Enzyme Research, School of Medicine, University of Tokushima, Tokushima 770, Japan

Communicated by Van Rensselaer Potter, May 19, 1986



NATURE VOL. 327 21 MAY 1987

## Scatter factor is a fibroblast-derived modulator of epithelial cell mobility

Michael Stoker, Ermanno Gherardi,  
Marion Perryman & Julia Gray

Department of Pathology, University of Cambridge,  
Cambridge CB2 1QP, UK and Imperial Cancer Research Fund,  
PO Box 123, Lincoln's Inn Fields, London WC2A 3PX, UK



# Both the SAME protein!



The EMBO Journal vol.10 no.10 pp.2867-2878, 1991

## Scatter factor and hepatocyte growth factor are indistinguishable ligands for the MET receptor

Luigi Naldini, K. Michael Weidner<sup>1</sup>, Elisa Vigna, Giovanni Gaudino, Alberto Bardelli, Carola Ponzetto, Radha P. Narsimhan, Guido Hartmann<sup>1</sup>, Reza Zarnegar<sup>2</sup>, George K. Michalopoulos<sup>2</sup>, Walter Birchmeier<sup>1</sup> and Paolo M. Comoglio

Department of Biomedical Sciences and Oncology, University of Torino, School of Medicine, 10126 Torino, Italy; <sup>1</sup>Institut für Zellbiologie (Tumorforschung), Universitätsklinikum, D-4300 Essen, FRG and <sup>2</sup>Department of Pathology, Duke University, Durham, NC 27710, USA

Communicated by P.M. Comoglio

Scatter Factor (SF) is a fibroblast-secreted protein which promotes motility and matrix invasion of epithelial cells. Hepatocyte Growth Factor (HGF) is a powerful mitogen for hepatocytes and other epithelial tissues. SF and HGF, purified according to their respective biological activities, were interchangeable and equally effective in assays for cell growth, motility and invasion. Both bound with the identical affinities to the same sites in target cells. The identical affinities to the same sites in target cells and of the MET oncogene by: (i) ligand binding and coprecipitation in immunocomplexes; (ii) chemical cross-linking to the Met  $\beta$  subunit; (iii) transfer of binding activity in insect cells by a baculovirus carrying the MET cDNA; (iv) ligand-induced tyrosine phosphorylation of the Met  $\beta$  subunit. SF and HGF cDNA clones from human fibroblasts, placenta and liver had virtually identical sequences. We conclude that the same molecule (SF/HGF) acts as a growth or motility factor through a single receptor in different target cells.

**Key words:** growth factor receptor/hepatocyte growth factor/MET oncogene/scatter factor/tyrosine kinase

### Introduction

Scatter Factor (SF) is a secretory product of fibroblasts which dissociates epithelial cells increasing their motility and invasiveness (Stoker *et al.*, 1987; Rosen *et al.*, 1990; Weidner *et al.*, 1990). It was reported to be chemotactic and not mitogenic for target cells (Gherardi *et al.*, 1989). SF might be involved in the progression of carcinoma cells to a more malignant invasive phenotype (Weidner *et al.*, 1990) and might play a role in epithelial-mesenchymal transitions during early embryonic development (Stern *et al.*, 1990). Hepatocyte Growth Factor (HGF) is a powerful mitogen for hepatocytes in primary cultures. It was isolated from several sources including rat platelets (Nakamura *et al.*, 1986), serum of human patients with hepatic failure (Gohda *et al.*, 1988), and rabbit serum (Zarnegar *et al.*, 1988), and rabbit serum (Zarnegar *et al.*, 1988). HGF is considered a major mediator of liver regeneration *in vivo* (Michalopoulos, 1990).

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Recently, HGF was shown to stimulate the growth of other epithelial tissues, such as kidney tubular epithelium and keratinocytes (Kan *et al.*, 1991), endothelial cells and melanocytes (Rubin *et al.*, 1991).

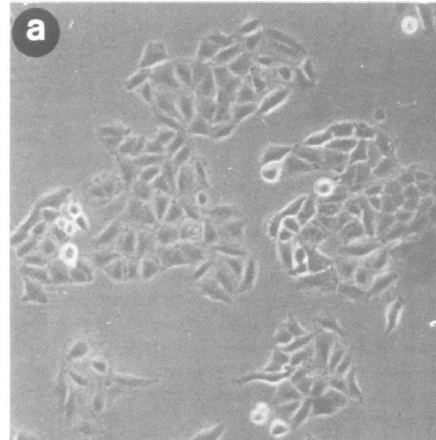
While the biological activities of SF and HGF are apparently unrelated, purification of the molecules revealed a surprising degree of structural similarity. Both HGF and SF are disulphide-linked heterodimers of a heavy ( $\alpha$ ) subunit of 55-65 kDa and a light ( $\beta$ ) subunit of 32 or 36 kDa. The  $\alpha$  and  $\beta$  subunits of SF were ascribed to differences in glycosylation (Weidner *et al.*, 1990). The  $\alpha$  and  $\beta$  subunits of HGF originate from proteolytic cleavage of a single 92 kDa precursor, as indicated by the sequence of cloned human and rat HGF cDNAs (Miyazawa *et al.*, 1989; Nakamura *et al.*, 1989; Tashiro *et al.*, 1990). When the primary sequence of several tryptic peptides derived from purified SF was compared to the deduced amino acid sequence of HGF, all the identified residues could be matched (Gherardi and Stoker, 1990; Weidner *et al.*, 1990; 1991).

Previous work by Naldini *et al.* (1991a) and that of another laboratory (Bottaro *et al.*, 1991) has recently suggested that the HGF receptor is the product of the MET oncogene, a transmembrane protein endowed with tyrosine kinase activity (Cooper *et al.*, 1984; Park *et al.*, 1986, 1987). The structure of the Met protein has been investigated in a cell line of the Met gene which is amplified and overexpressed (GTL16, where the gene is amplified and overexpressed (Giordano *et al.*, 1989a). The protein is a 190 kDa heterodimer (p190<sup>MET</sup>) made of a 50 kDa subunit ( $\alpha$ ) disulphide-linked to a 145 kDa subunit ( $\beta$ ). The molecule undergoes co-translational glycosylation. Disulphide rearrangements and proteolytic cleavage lead to the mature two-chain 190 kDa heterodimer (Giordano *et al.*, 1989b). The  $\alpha$  chain and the N-terminal portion of the  $\beta$  chain of the mature protein are exposed at the cell surface (Giordano *et al.*, 1988). The C-terminal portion of the  $\beta$  chain is cytoplasmic and includes a tyrosine kinase domain (Dean *et al.*, 1985; Tempest *et al.*, 1986; Gonzatti *et al.*, 1988) and phosphorylation sites involved in regulation of its activity and phosphorylation sites involved in regulation of its activity (Ferracini *et al.*, 1991). The kinase activity is positively regulated by autophosphorylation on tyrosine (Naldini *et al.*, 1991b), and it is negatively regulated by protein kinase-C (Gandino *et al.*, 1990) or transient increases of intracellular  $Ca^{2+}$  concentrations (Gandino *et al.*, 1991). Stimulation of the tyrosine phosphorylation of the  $\beta$  subunit of the Met protein after exposure to HGF was observed both in intact cells and *in vitro* with partially purified Met protein (Bottaro *et al.*, 1991; Naldini *et al.*, 1991a). Chemical cross-linking of the Met protein of a molecule smaller than HGF (M, 28 kDa) but with similar binding properties was also reported (Bottaro *et al.*, 1991).

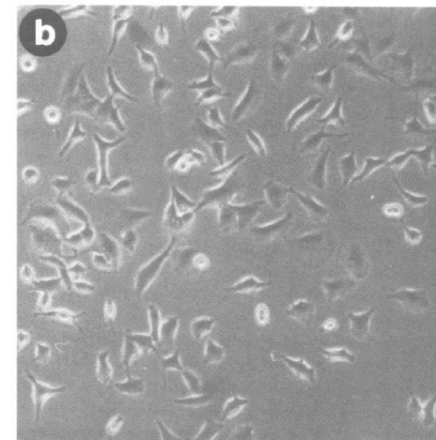
In this work we have investigated the structural and functional relationships between SF and HGF. Nucleotide sequence analysis of cDNA clones from fibroblasts, placenta

2867

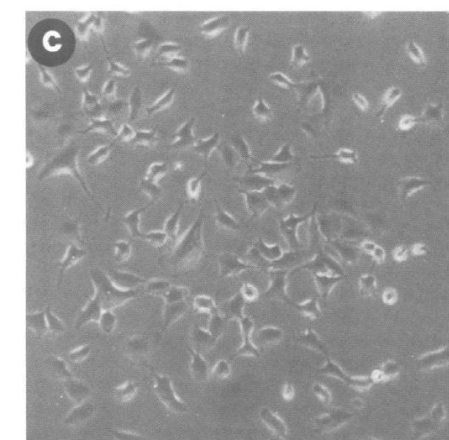
control



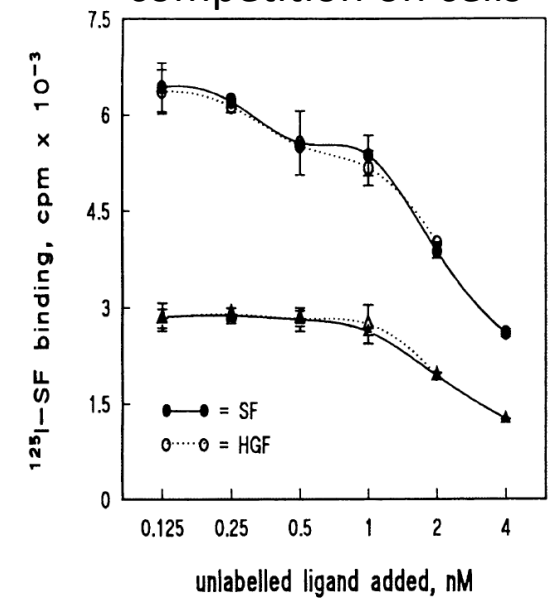
scatter factor (SF)



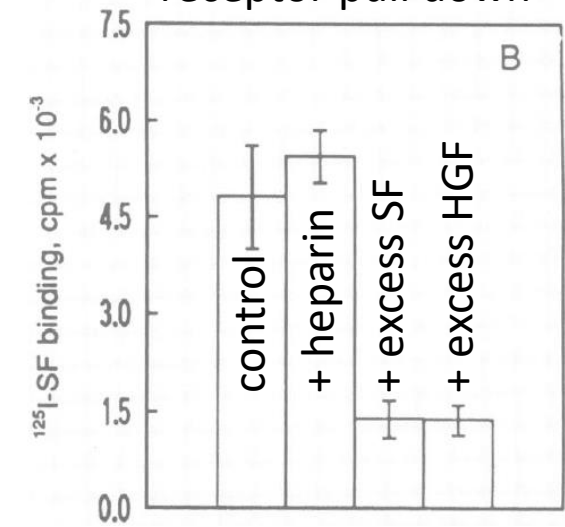
HGF



competition on cells



receptor pull down



# Why did it take so long?

Go to [www.menti.com](http://www.menti.com) and use the code 22 52 86

**no communication  
technology**

not enough bibliography

no great technology

so far

liver

lungs

skin



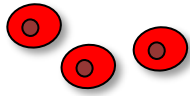
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Activate

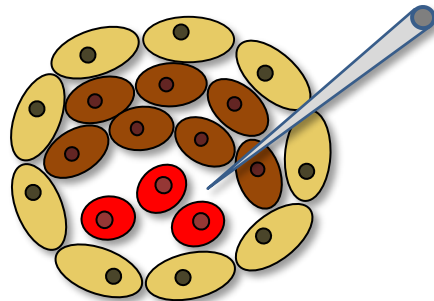
 11

# Demonstrating protein function: the “knock-out” mouse

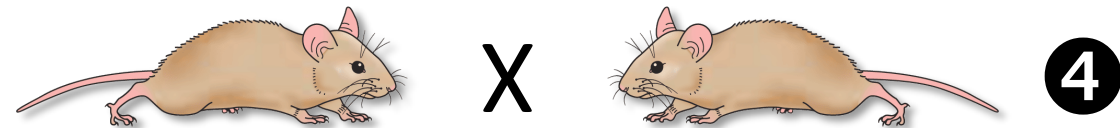
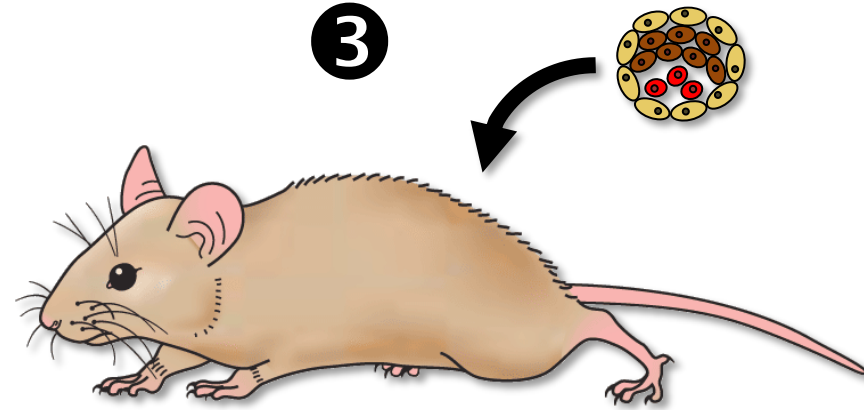
**1** **delete** HGF/SF in embryonic stem cells



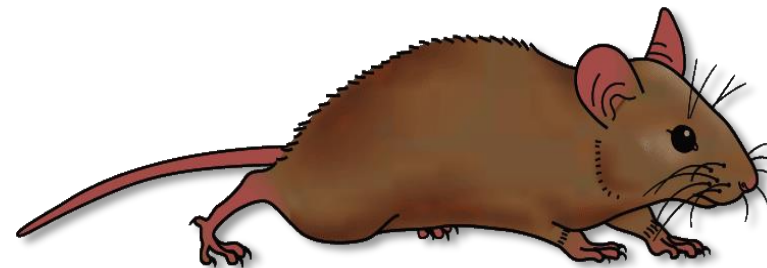
**2** inject into blastocyst



**3**



**4**



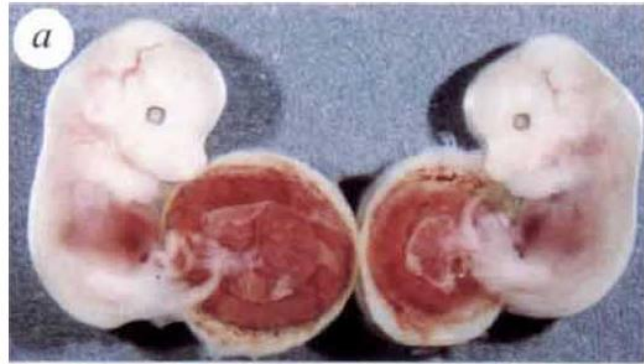
**5**

mouse with “knocked-out” HGF/SF gene

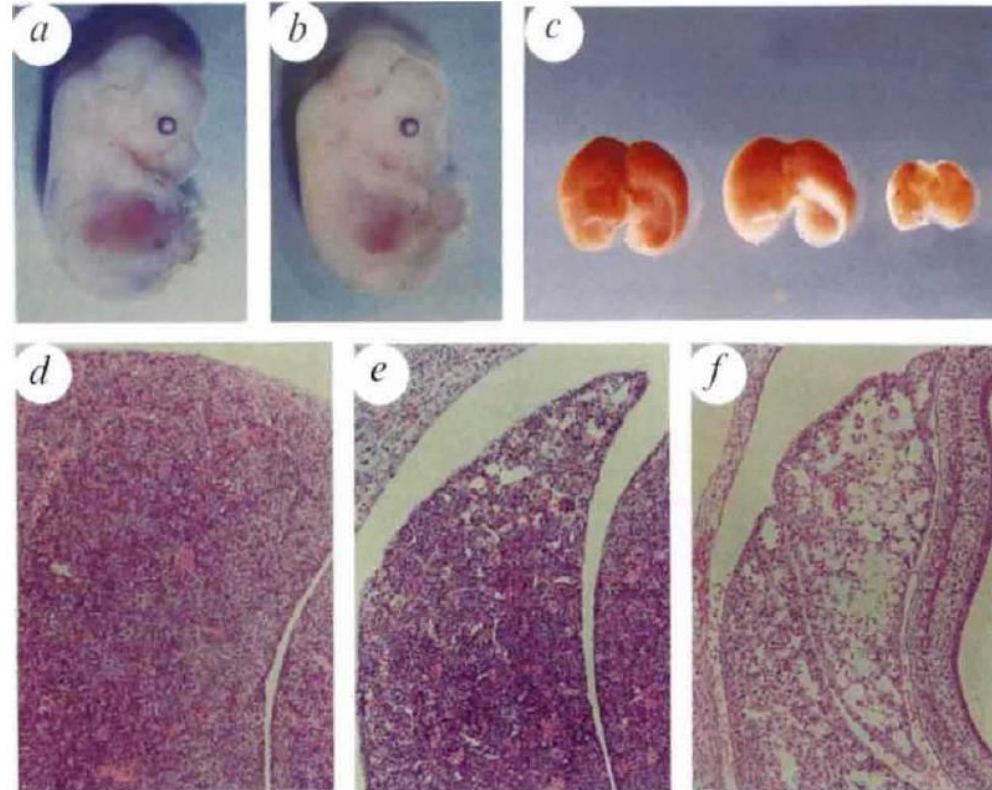


# The importance of HGF/SF during embryogenesis

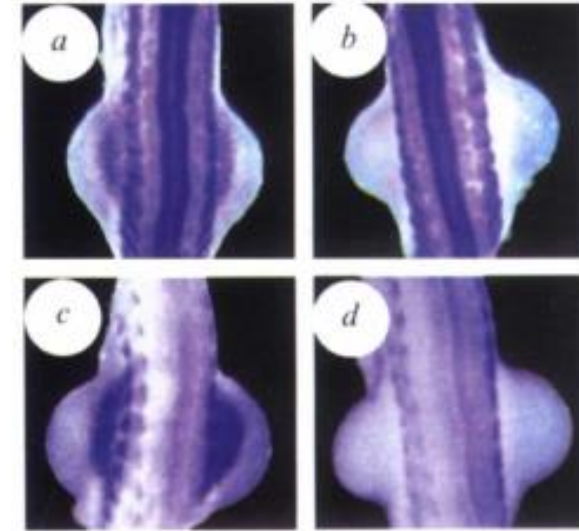
placenta



liver



myogenesis

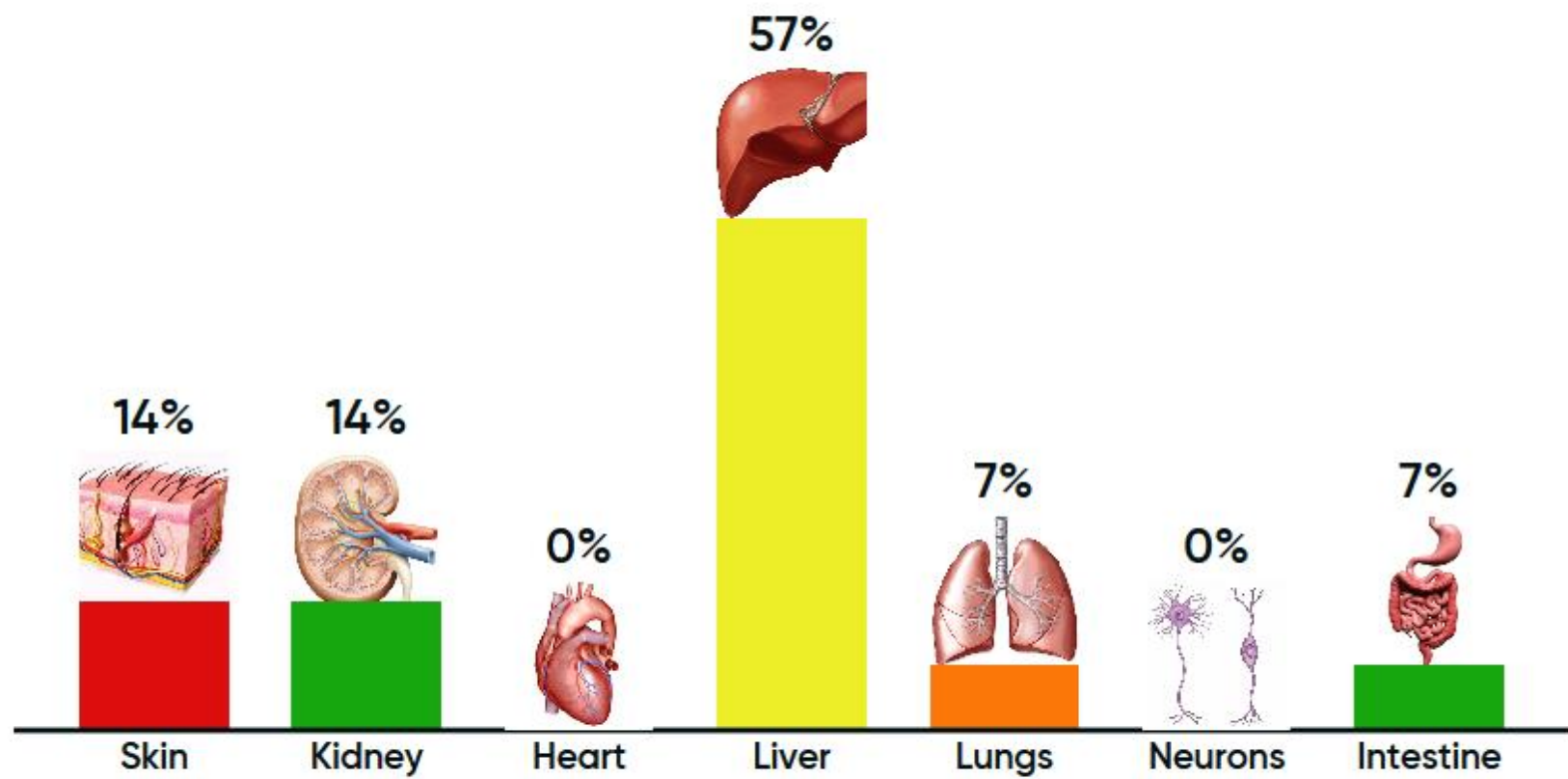


- Schmidt C, Bladt F, Goedecke S, Brinkmann V, Zschiesche W, Sharpe M, Gherardi E, Birchmeier C. Nature. 1995 373, 699-702
- Uehara Y, Minowa O, Mori C, Shiota K, Kuno J, Noda T, Kitamura N. Nature. 1995 373, 702-705
- Bladt F, Riethmacher D, Isenmann S, Aguzzi A, Birchmeier C. Nature. 1995 376, 768-771
- Huh CG, Factor VM, Sánchez A, Uchida K, Conner EA, Thorgeirsson SS. PNAS 2004 101 4477-4482

# What about HGF/SF in adult life?



# Tissue and organ regeneration after injury



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# How?

proliferation

differentiation

**I NEED THAT !**

motility/migration

morphogenic

angiogenic

anti-apoptotic



**Regeneration**



**Cancer**

# Thousands of papers on HGF/SF in cancer

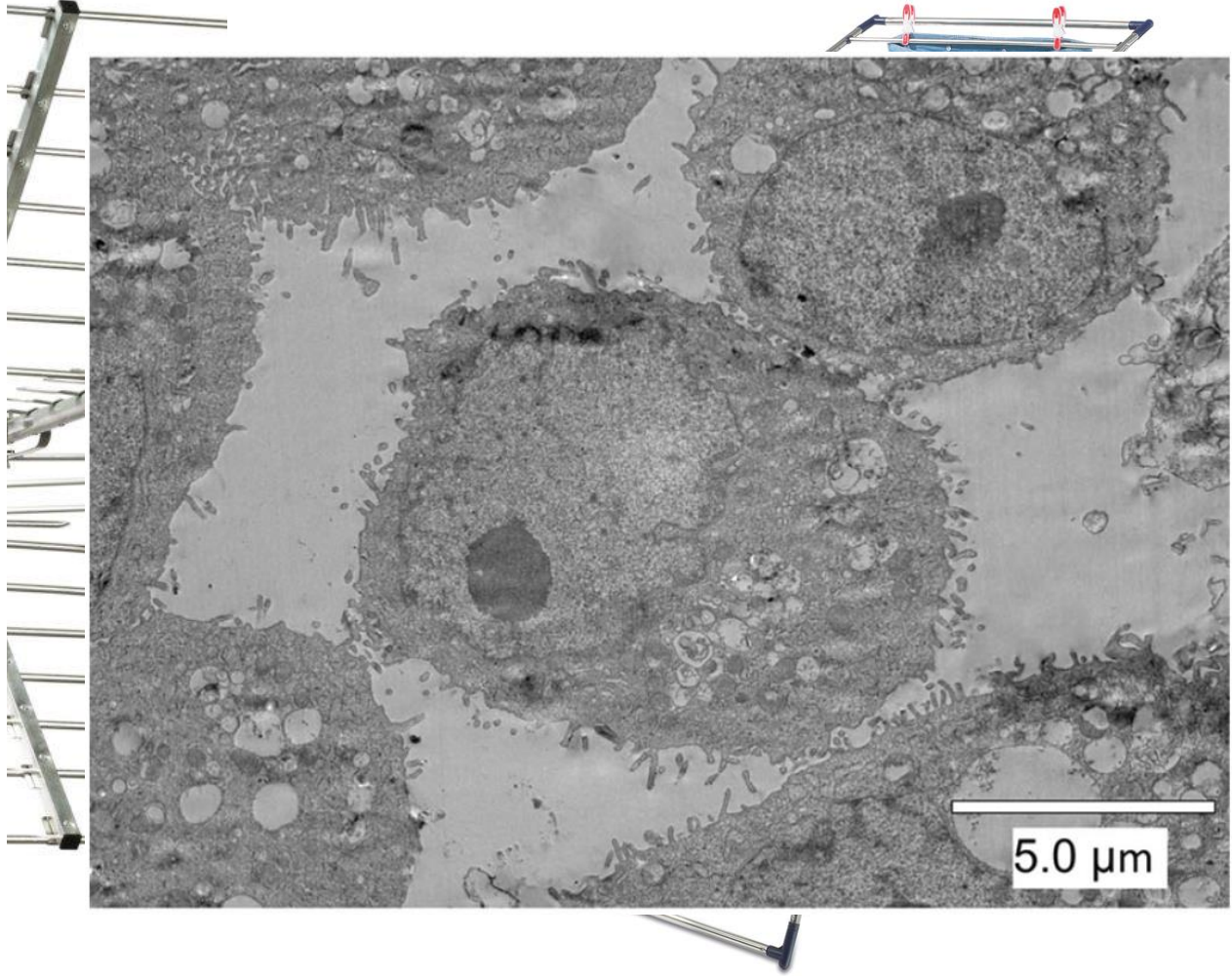
<https://resources.vai.org/Met/Index.aspx>

Category	Cancer Type
<b>Carcinomas</b>	Bladder
	Breast
	Cervical
	Cholangiocarcinoma
	Colorectal
	Endometrial
	Esophageal
	Gastric
	Head and Neck
	Kidney
	Liver
	Lung
	Nasopharyngeal
	Ovarian
	Pancreas/Gall Bladder
	Prostate
	Thyroid
	<b>Musculoskeletal sarcomas</b>
Rhabdomyosarcoma	
Synovial Sarcoma	
<b>Soft tissue sarcomas</b>	Kaposi's Sarcoma
	Leiomyosarcoma
	MFH/Fibrosarcoma
<b>Hematopoietic Malignancies</b>	Acute Myelogenous Leukemia
	Adult T Cell Leukemia
	Chronic Myeloid Leukemia
	Lymphomas
	Multiple Myeloma
<b>Other Neoplasms</b>	Glioblastomas/Astrocytomas
	Melanoma
	Mesothelioma
	Wilms' Tumor

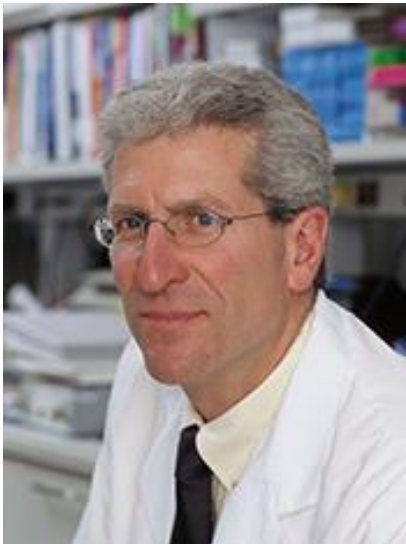
Category	Cancer Type	HGF/SF expression	Met expression	Poor Prognosis	Mutation of Met	In vitro studies	Animal models	Therapeutic Development	Reviews
<b>Carcinomas</b>		*	*	*	*	*	*	*	*
	Bladder	•	•	•	•	•	•	•	•
	Breast	•	•	•	•	•	•	•	•
	Cervical	•	•	•	•	•	•	•	•
	Cholangiocarcinoma	•	•	•	•	•	•	•	•
	Colorectal	•	•	•	•	•	•	•	•
	Endometrial	•	•	•	•	•	•	•	•
	Esophageal	•	•	•	•	•	•	•	•
	Gastric	•	•	•	•	•	•	•	•
	Head and Neck	•	•	•	•	•	•	•	•
	Kidney	•	•	•	•	•	•	•	•
	Liver	•	•	•	•	•	•	•	•
	Lung	•	•	•	•	•	•	•	•
	Nasopharyngeal	•	•	•	•	•	•	•	•
	Ovarian	•	•	•	•	•	•	•	•
	Pancreas/Gall Bladder	•	•	•	•	•	•	•	•
	Prostate	•	•	•	•	•	•	•	•
	Thyroid	•	•	•	•	•	•	•	•
<b>Musculoskeletal sarcomas</b>		*	*			*			
	Osteosarcoma	•	•	•	•	•	•	•	•
	Rhabdomyosarcoma	•	•	•	•	•	•	•	•
	Synovial Sarcoma	•	•	•	•	•	•	•	•
<b>Soft tissue sarcomas</b>			*		*		*	*	
	Kaposi's Sarcoma	•	•	•	•	•	•	•	•
	Leiomyosarcoma	•	•	•	•	•	•	•	•
	MFH/Fibrosarcoma	•	•	•	•	•	•	•	•
<b>Hematopoietic Malignancies</b>									
	Acute Myelogenous Leukemia	•	•	•	•	•	•	•	•
	Adult T Cell Leukemia	•	•	•	•	•	•	•	•
	Chronic Myeloid Leukemia	•	•	•	•	•	•	•	•
	Lymphomas	•	•	•	•	•	•	•	•
	Multiple Myeloma	•	•	•	•	•	•	•	•
<b>Other Neoplasms</b>		*							
	Glioblastomas/Astrocytomas	•	•	•	•	•	•	•	•
	Melanoma	•	•	•	•	•	•	•	•
	Mesothelioma	•	•	•	•	•	•	•	•
	Wilms' Tumor	•	•	•	•	•	•	•	•



# Every signal needs an antenna; a receptor



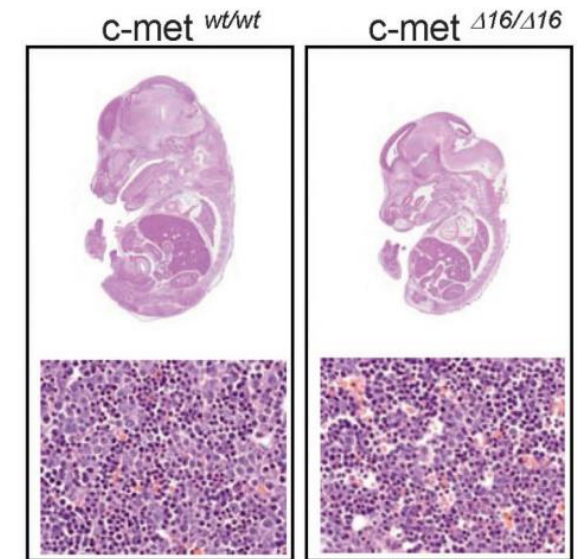
# The “antenna” for HGF/SF



## Identification of the Hepatocyte Growth Factor Receptor as the *c-met* Proto-Oncogene Product

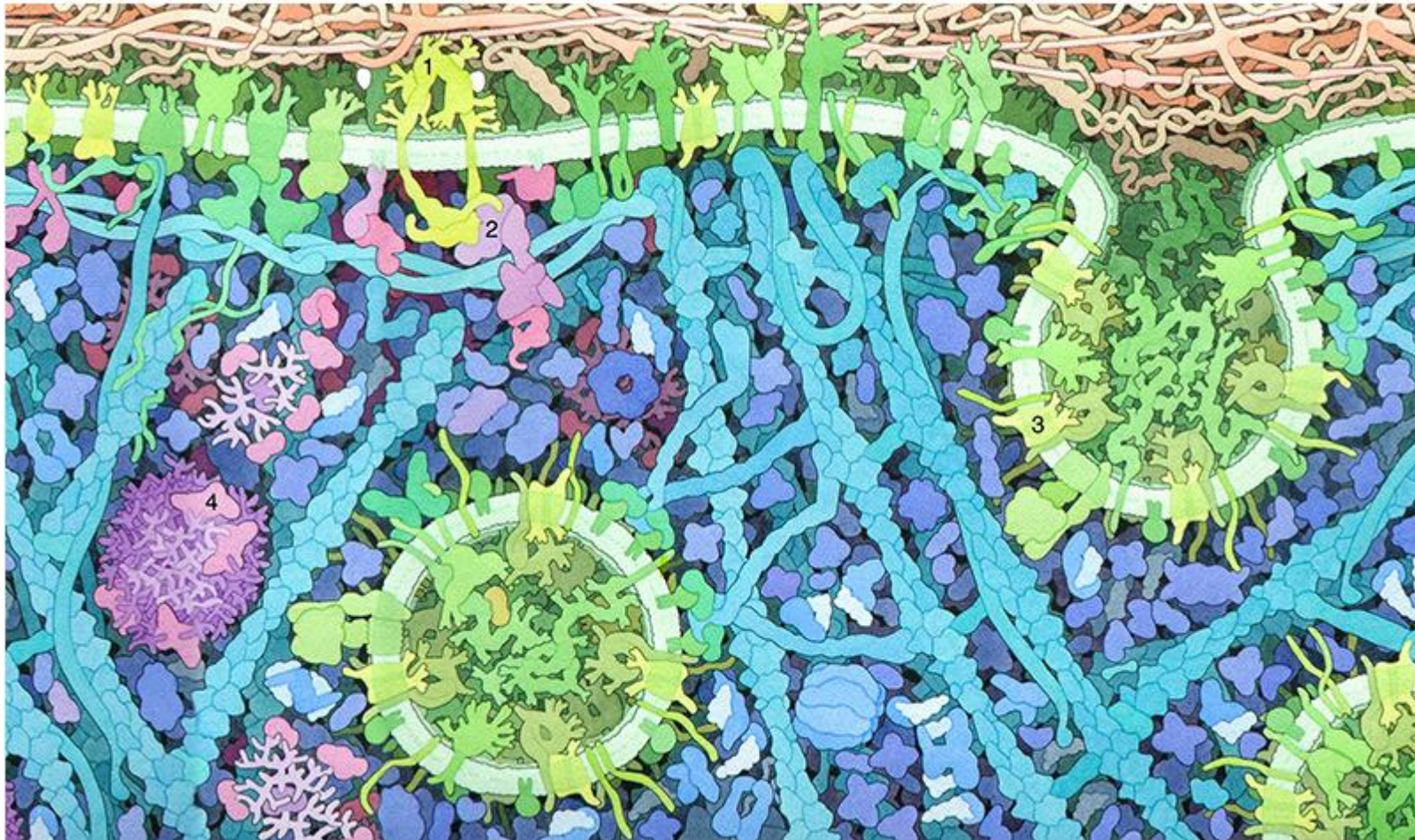
DONALD P. BOTTARO, JEFFREY S. RUBIN, DONNA L. FALETTO,  
ANDREW M.-L. CHAN, THOMAS E. KMIECIK, GEORGE F. VANDE WOUDE,  
STUART A. AARONSON

Hepatocyte growth factor (HGF) is a plasminogen-like protein thought to be a humoral mediator of liver regeneration. A 145-kilodalton tyrosyl phosphoprotein observed in rapid response to HGF treatment of intact target cells was identified by immunoblot analysis as the  $\beta$  subunit of the *c-met* proto-oncogene product, a membrane-spanning tyrosine kinase. Covalent cross-linking of  $^{125}\text{I}$ -labeled ligand to cellular proteins of appropriate size that were recognized by antibodies to *c-met* directly established the *c-met* product as the cell-surface receptor for HGF.

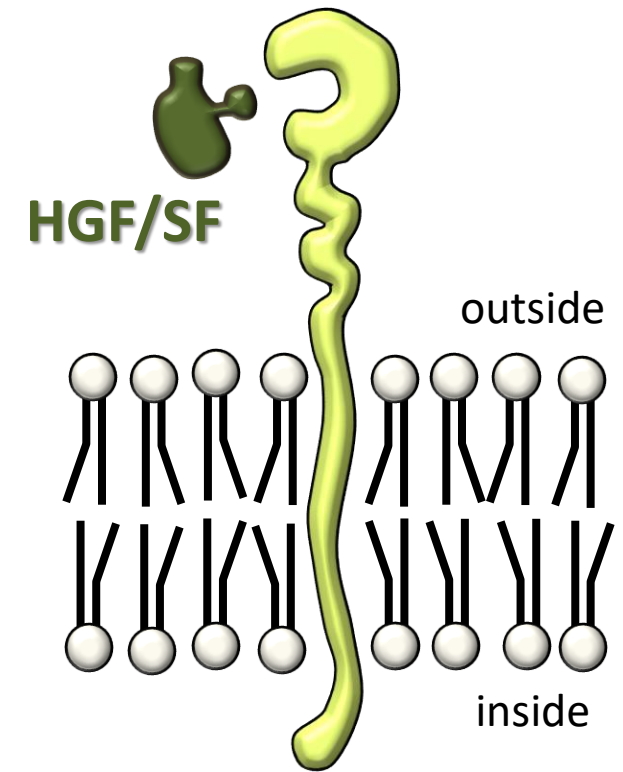


Science 15 Feb 1991:Vol. 251, Issue 4995, pp. 802-804

# The main players



## MET receptor





# Using this knowledge wisely



like you not I do

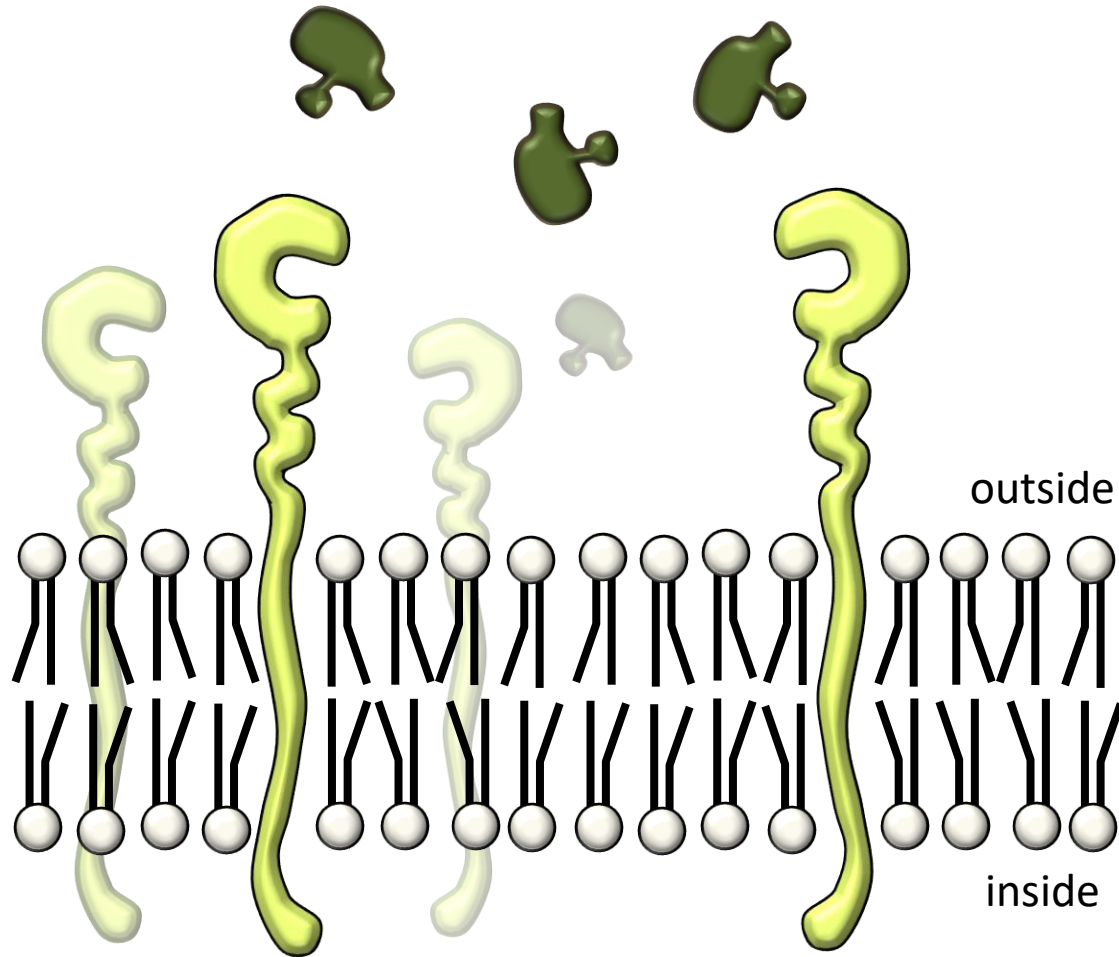
fight me if you dare



**Regeneration**

**Cancer**

# How does it work?



binding  
binding

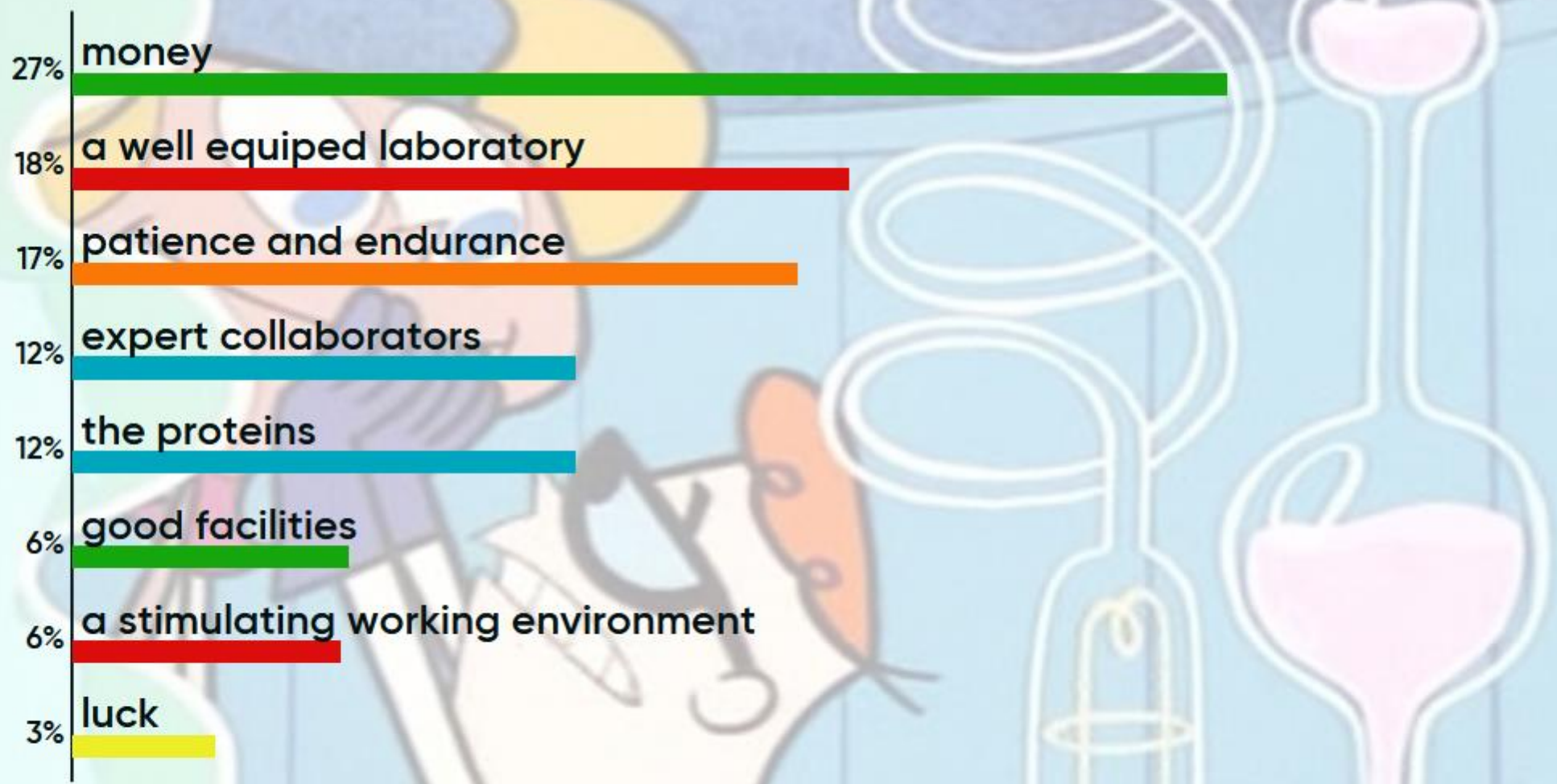
receptor ligand interactions  
protein interactions



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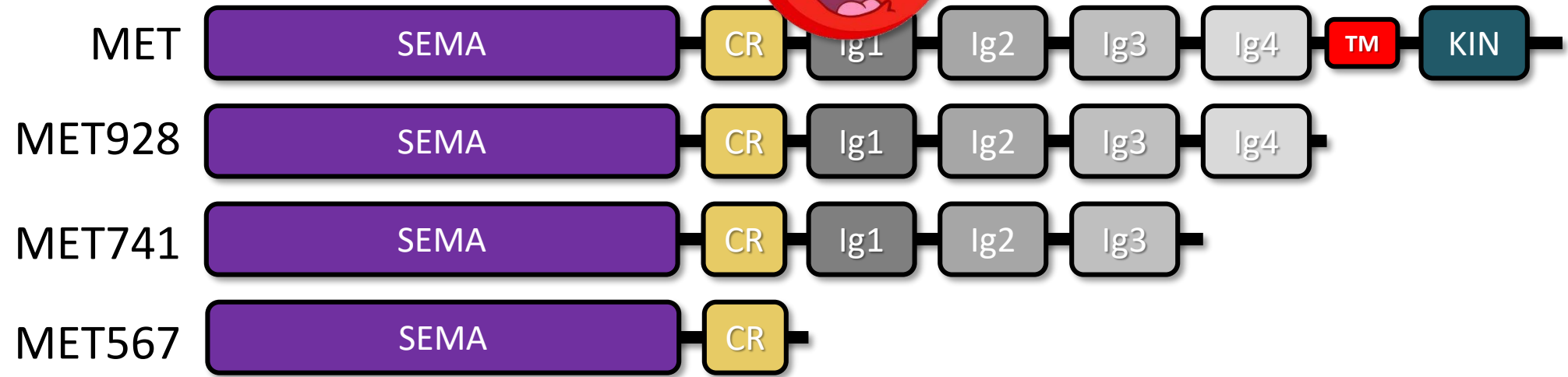
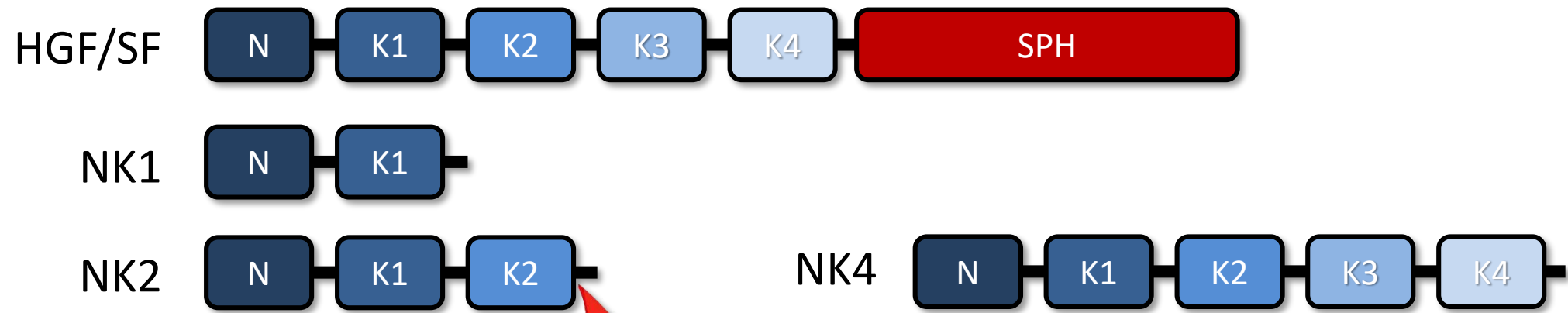
Activate

# Requirements to investigate how it works



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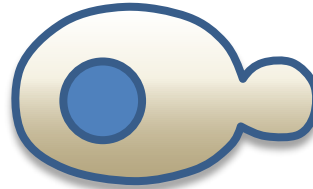
# Importance of stable RAS of RECOMBINANT protein



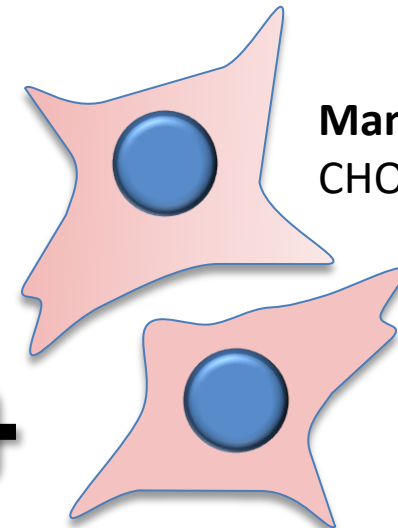
# SOURCE: RECOMBINANT PROTEIN PRODUCTION



**Bacteria:** *E. coli* BL21, SHuffleT7



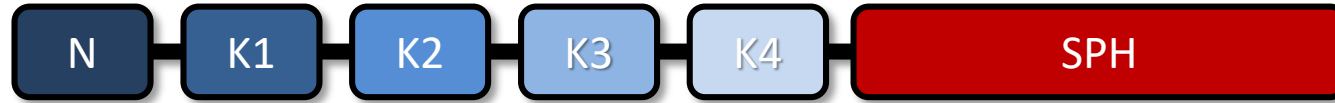
**Yeast:** *Pichia pastoris*



**Mammalian cells:**  
CHO, HEK293, NS0

# Example: recombinant protein production of NK1 in yeast

HGF/SF

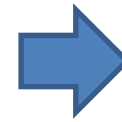
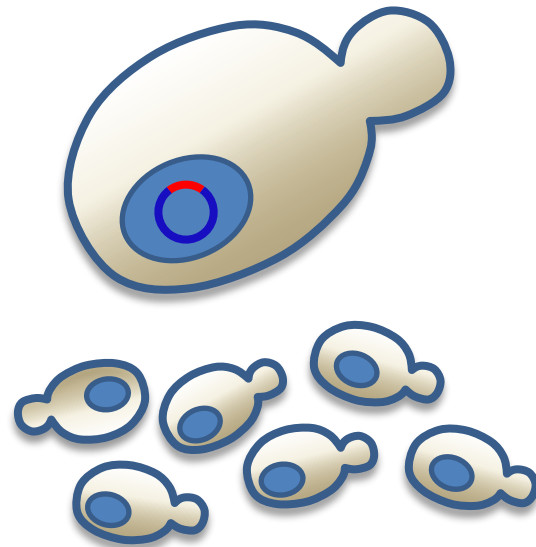
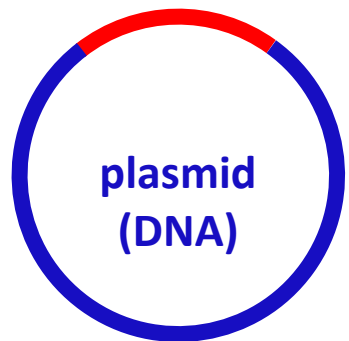


NK1:

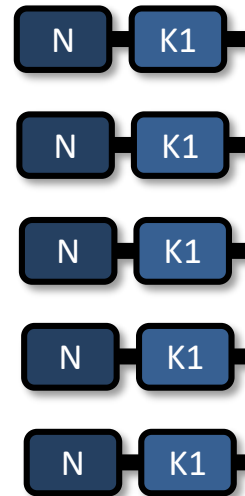


EGQ...CSEVE (protein) = gagggacaa...cagaagttgaa (DNA)

coding sequence



purification



## Protein structure (alone and in complex)

- x-ray crystallography
- small-angle scattering (SAXS)
- cryo-electron microscopy

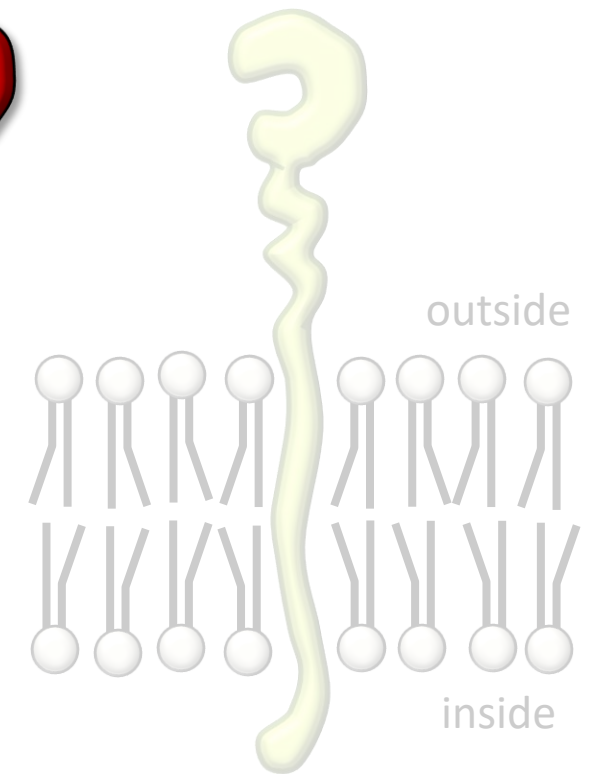


## Protein function

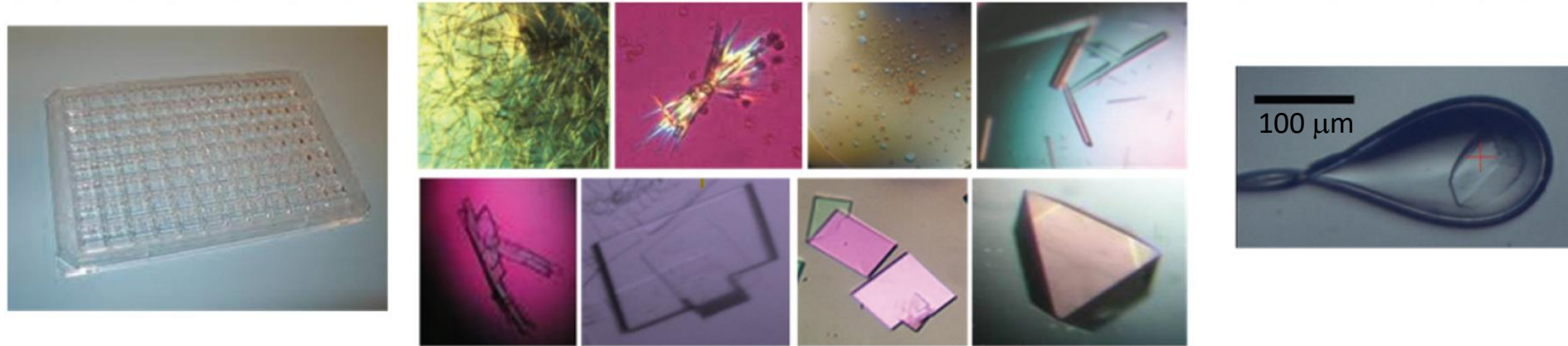
- mutational screening
- biological assays (*in vitro*)
- *in vivo* studies
- biochemical analysis (e.g. SPR)

## Protein engineering

- design of ligand-based activators and inhibitors
- development of antibodies



# Understanding the structure – x-ray diffraction



## Requirements:

- A lot of very pure protein (many milligrams!)
- As many crystallisation conditions as possible (liquid handling robots)
- Patience...lots of patience
- Luck...lots of luck
- Some of the most complex and expensive facilities in the world



# European Synchrotron Radiation Facility (ESRF)

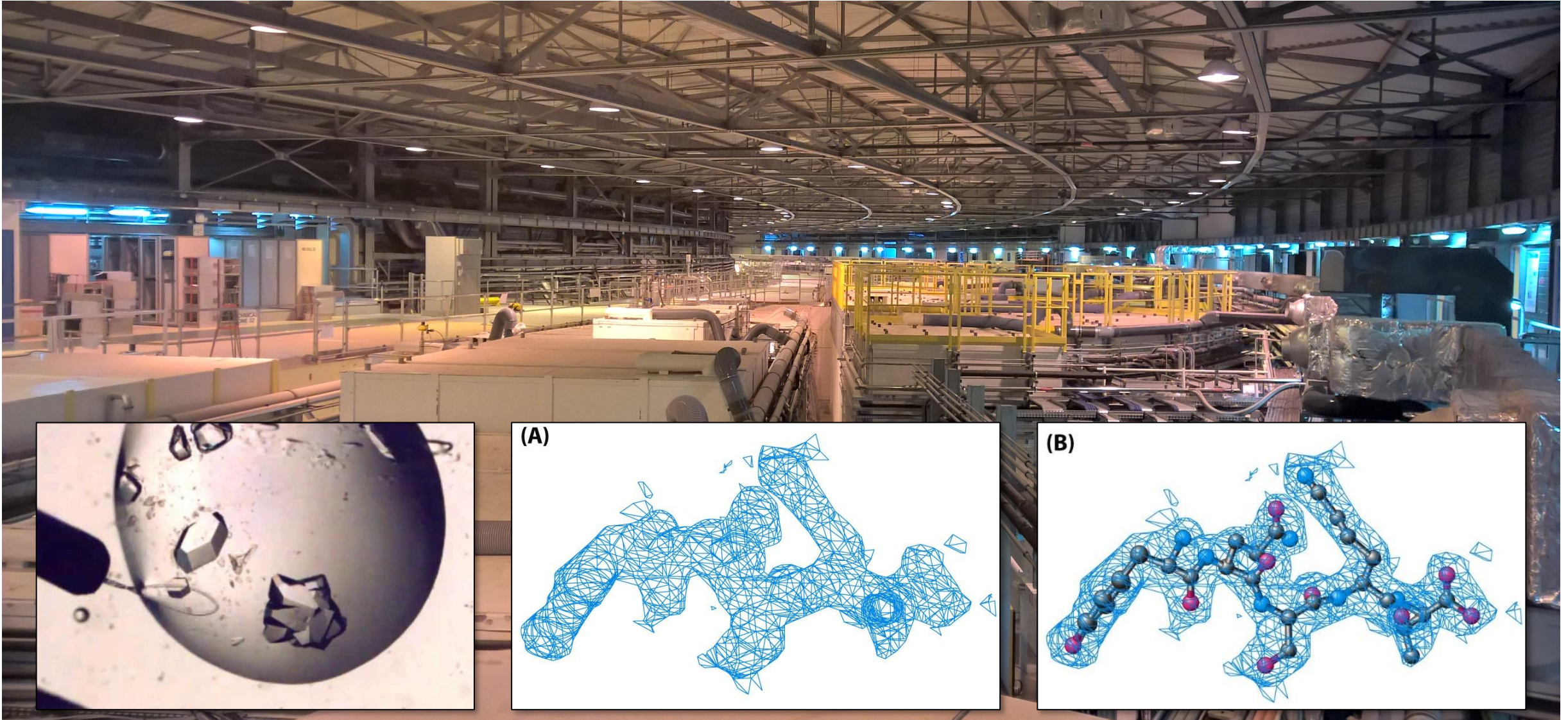


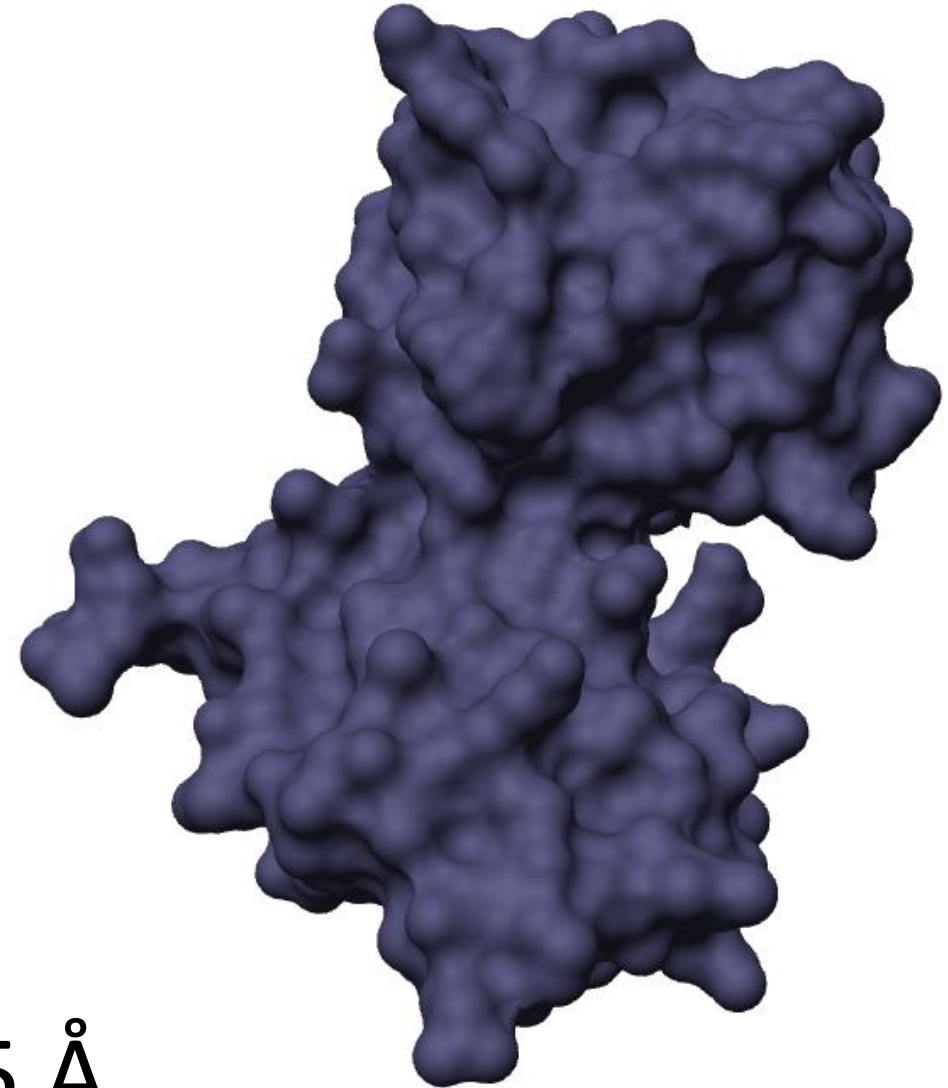
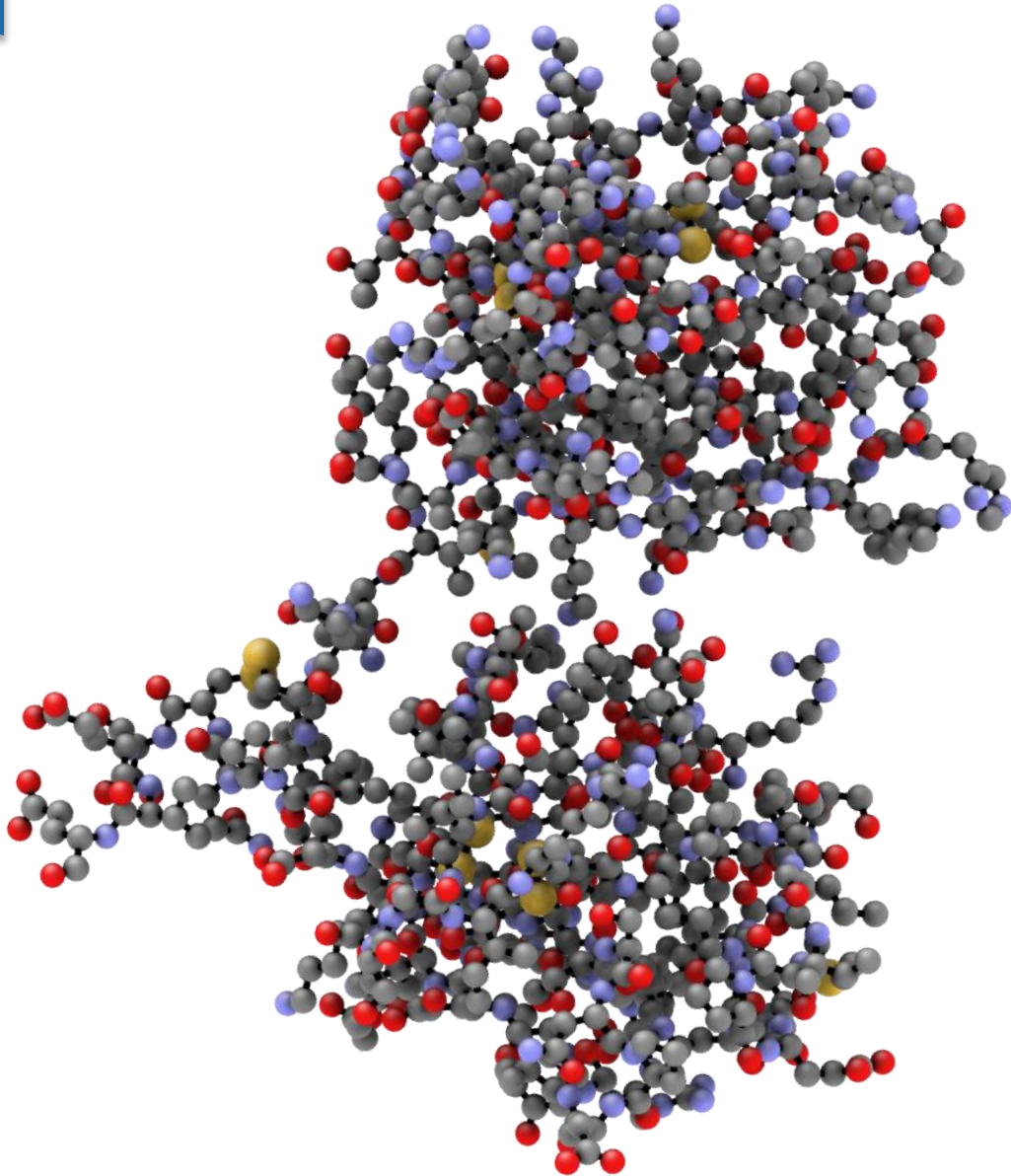
Supported by 22 countries:  
13 member countries:  
France, Germany, Italy, UK, Spain,  
Switzerland, Belgium, The Netherlands,  
Denmark, Finland, Norway, Sweden, and  
Russia

and

9 associate countries:  
Austria, Portugal, Israel, Poland, Czech  
Republic, Hungary, Slovakia, India and  
South Africa

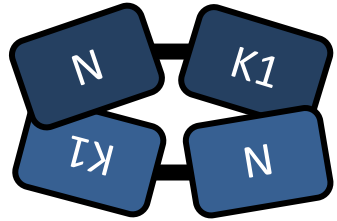
# Using X-rays on protein crystals



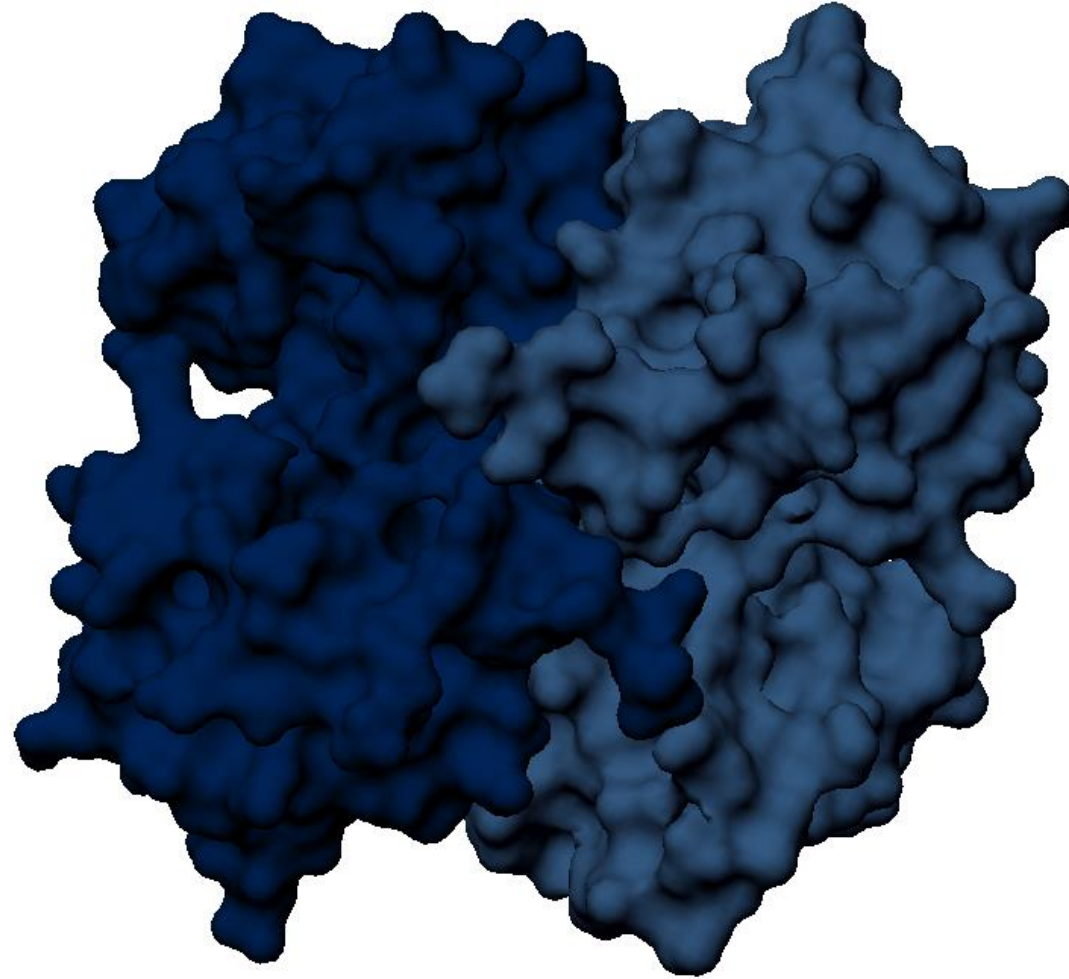


$< 2.5 \text{ \AA}$

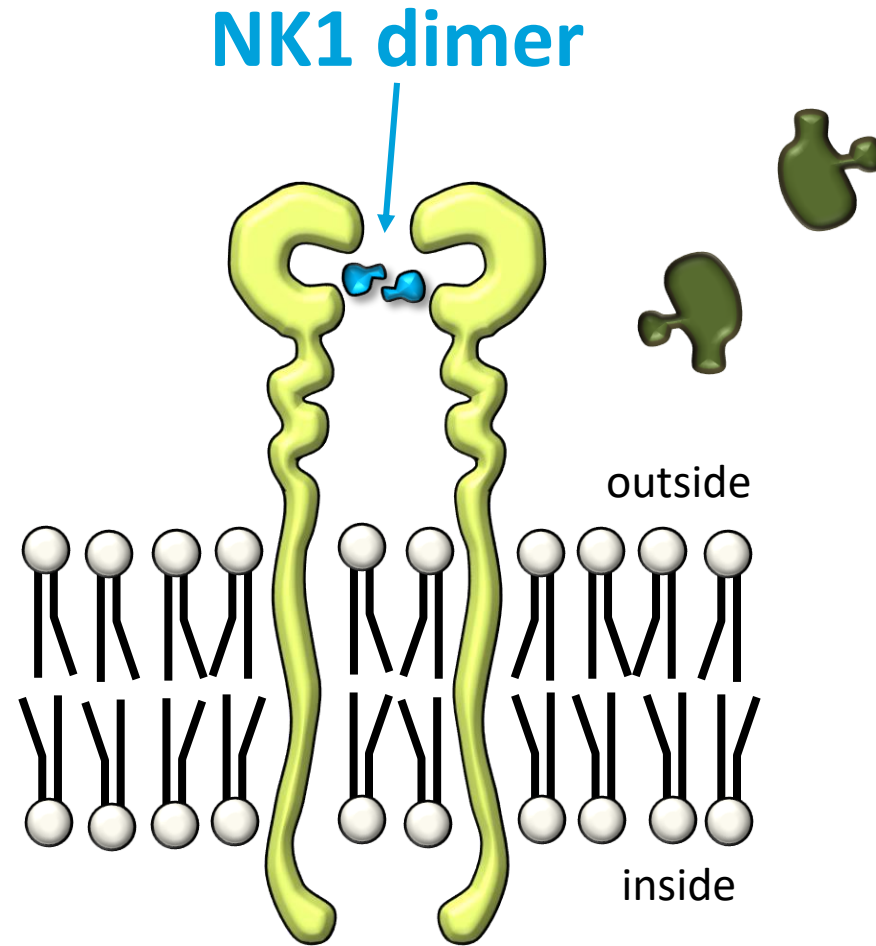
# We got “more than we expected”



**NK1 dimer**

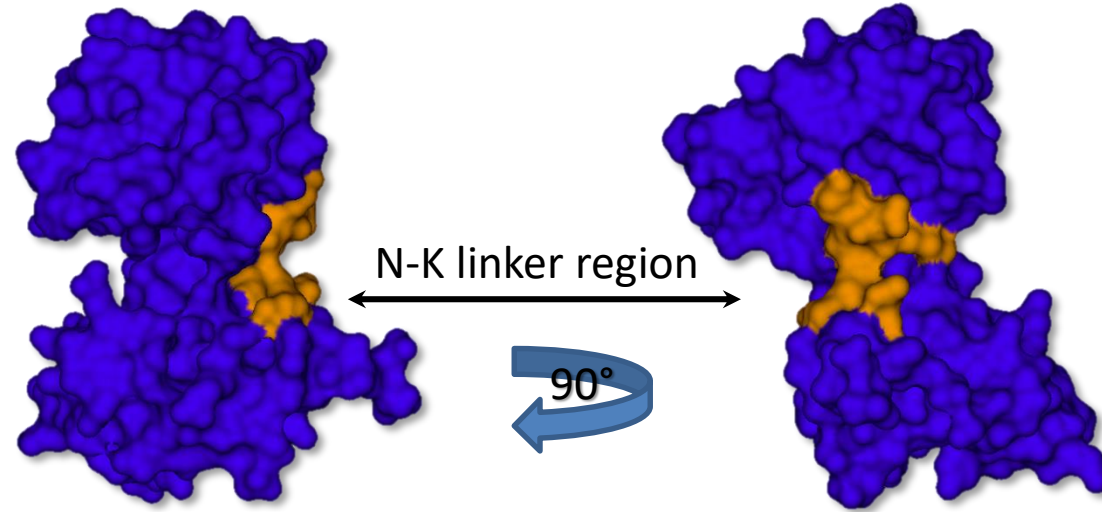


# The NK1 dimer; biologically relevant?

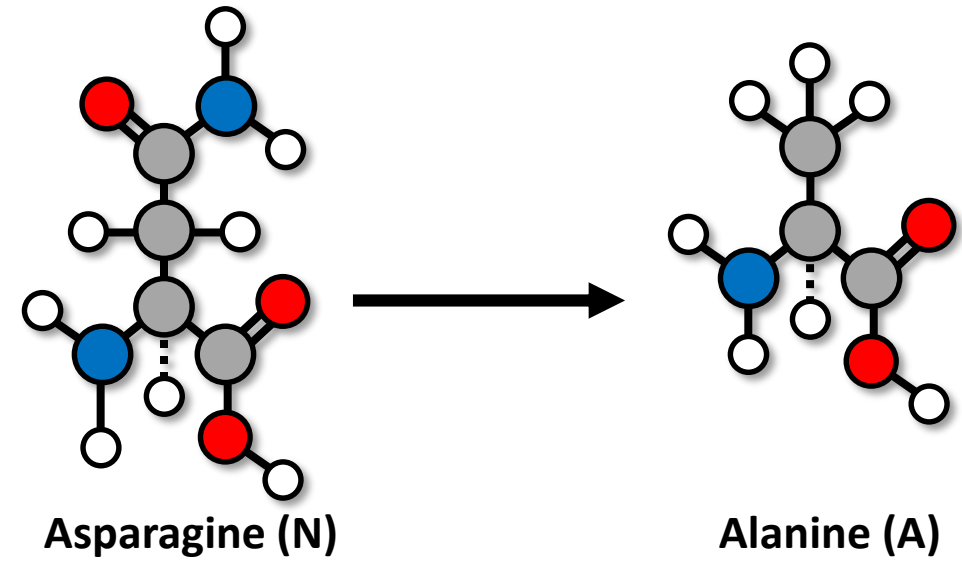


Inducing a MET receptor dimer?

# Can interface mutation induce antagonism?

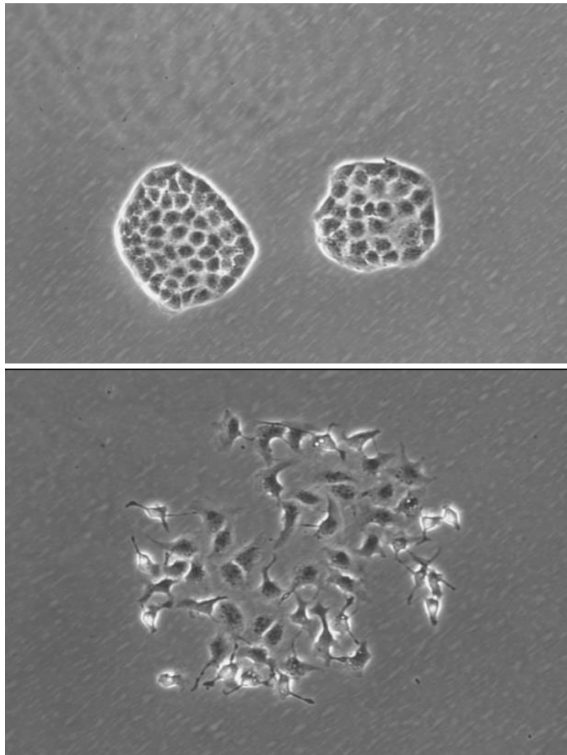


NK1 interface mutants
Y124A
N127A
Y124A, N127A
N127A, V140A
Y124A, N127A, V140A

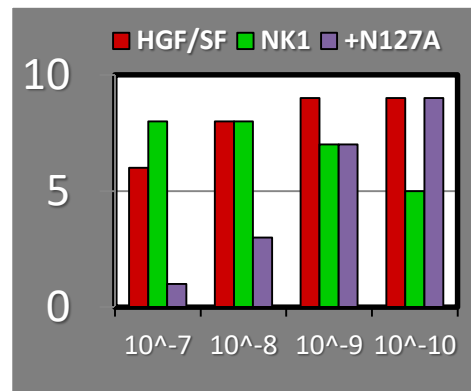
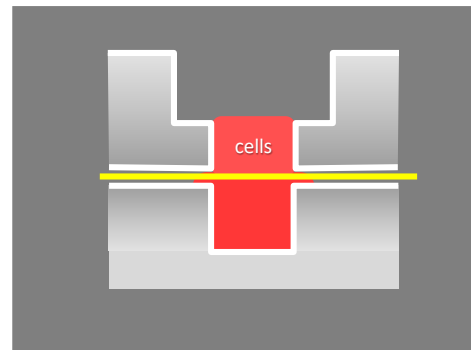


# functional assays and “tools”

## MDCK scatter assay

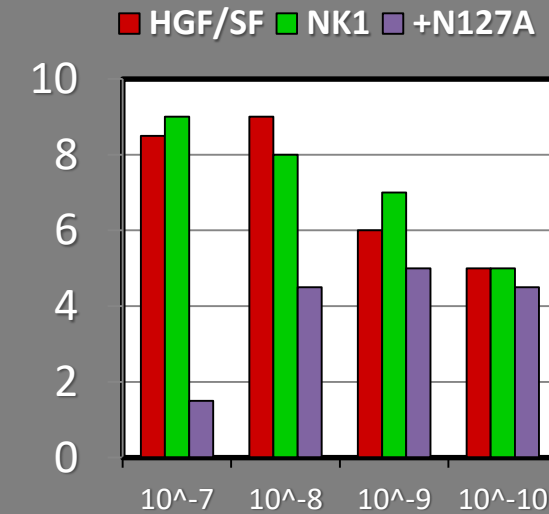


## migration assay



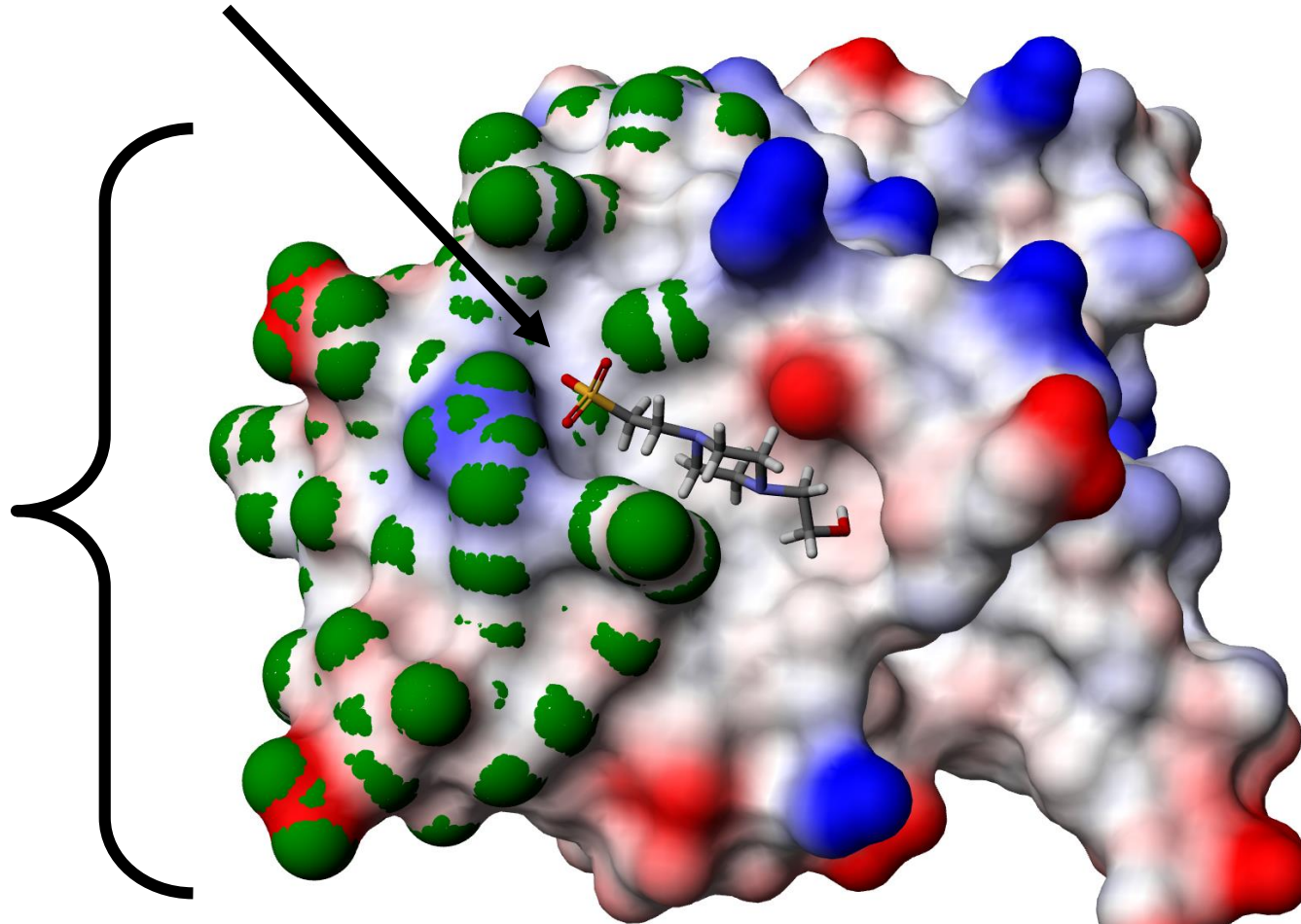
## DNA synthesis assay

5-bromo-2'-deoxyuridine (BrdU)  
incorporation

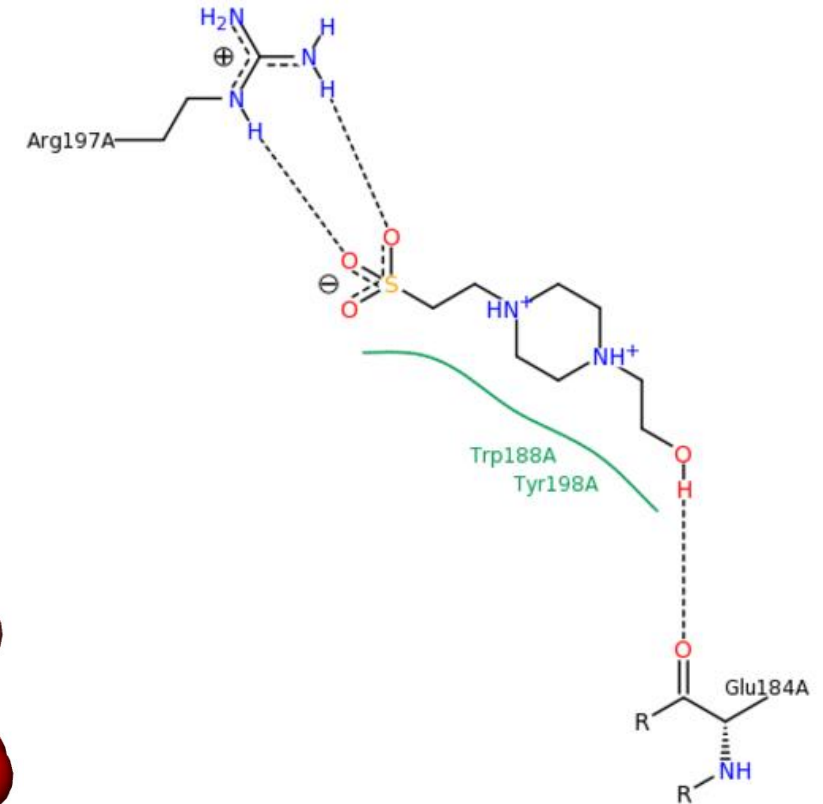


## HEPES (4-(2-HYDROXYETHYL)-1-PIPERAZINE ETHANESULFONIC ACID)

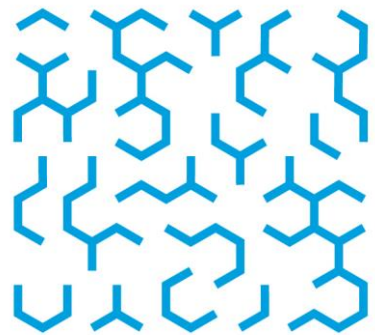
receptor binding site



1BHT.pdb





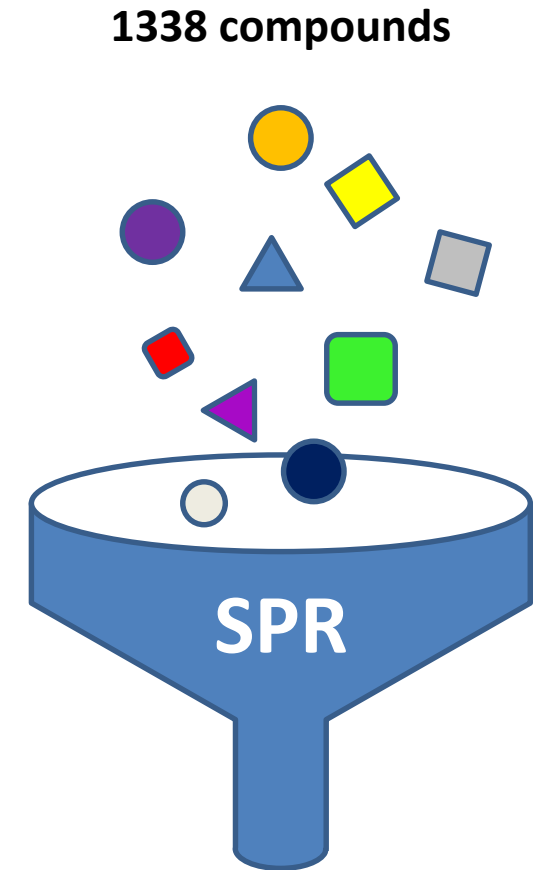


**MAYBRIDGE**

**chemical compounds  
library**

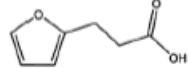
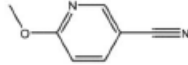
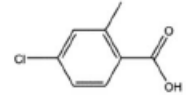
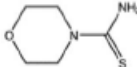
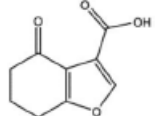
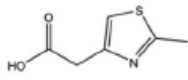
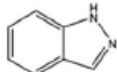
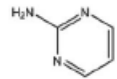
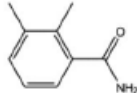
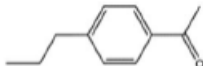


**Biacore T200 SPR  
measures affinity  
between two  
molecules**



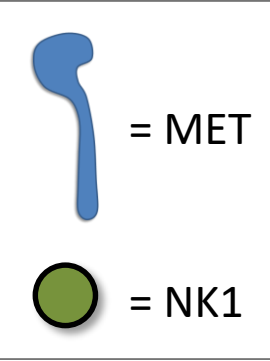
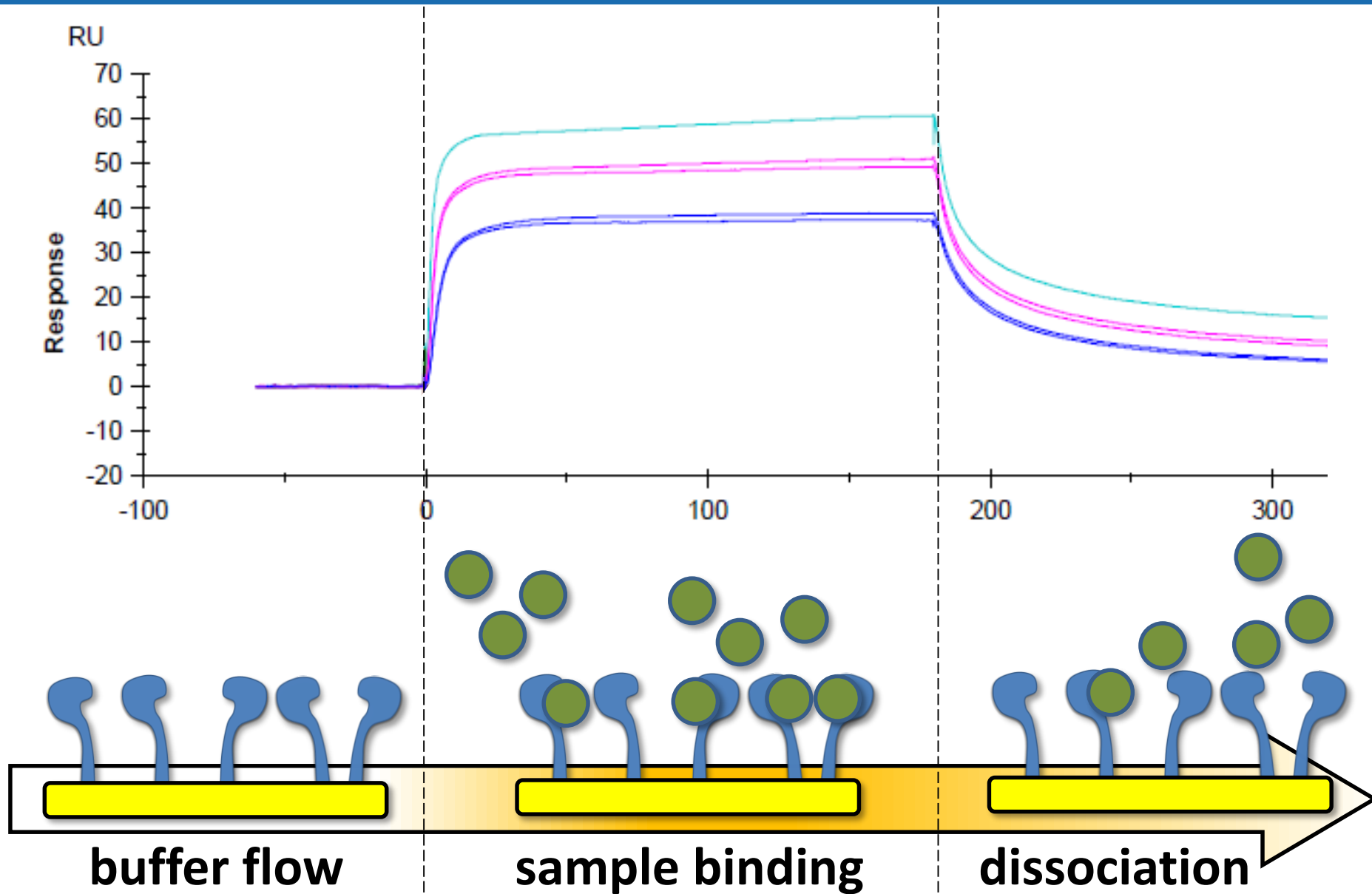
**24 potential compounds**

# affinity of each compound for NK1

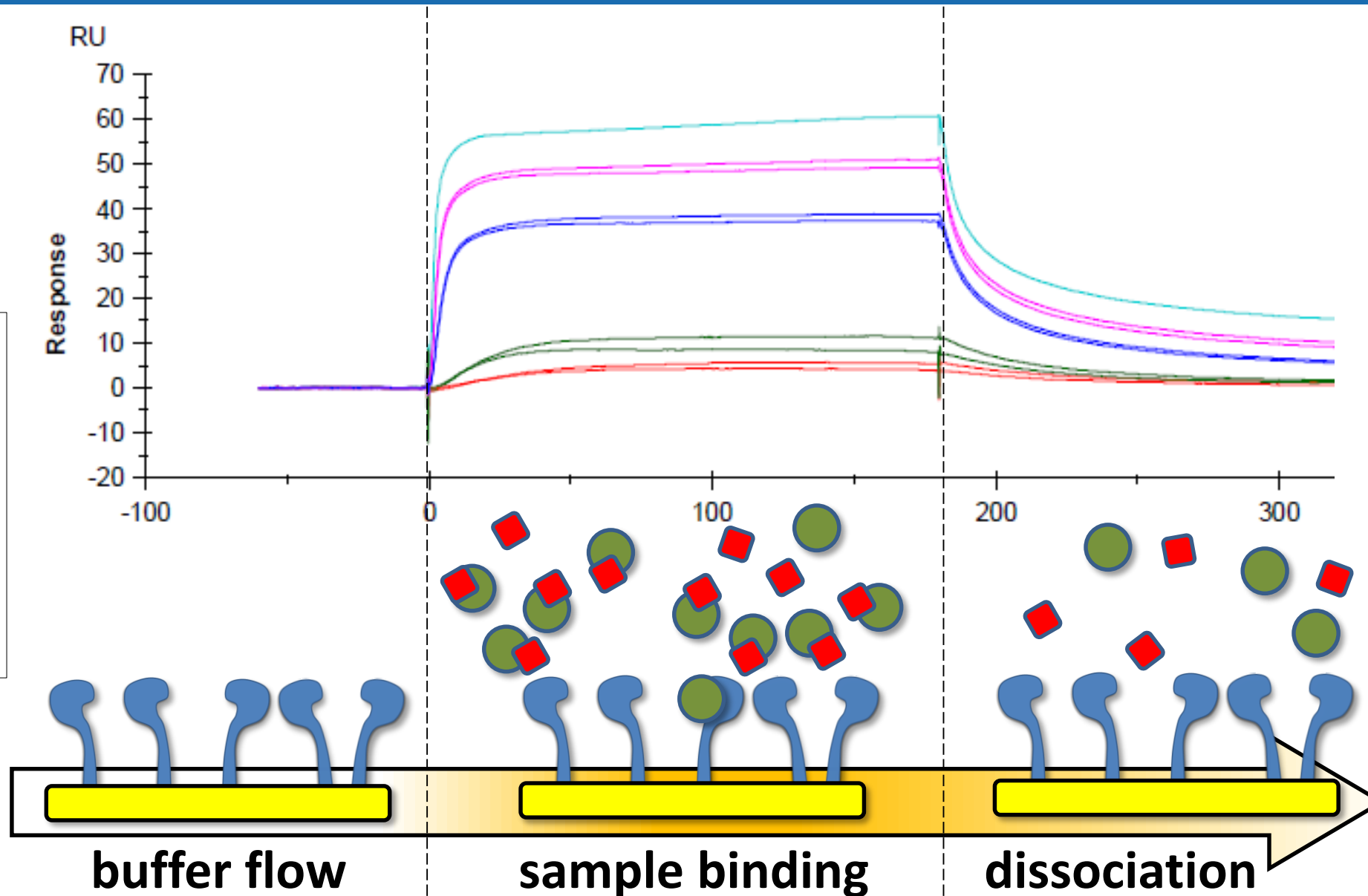
Compound name	Structure	Molecular weight [Da]	SPR response <sup>a</sup> [%]	$K_D^b$ [mM]
MB605		140.1	215	$0.31 \pm 0.04$
MB1261		134.1	95	$0.35 \pm 0.04$
MB1318		170.6	61	$0.36 \pm 0.04$
MB1082		146.2	53	$0.37 \pm 0.04$
MB417		180.2	87	$0.42 \pm 0.04$
MB895		157.2	53	$0.43 \pm 0.05$
AT0381		118.1	53	$0.74 \pm 0.06$
CA023		95.1	52	$0.77 \pm 0.06$
MB1284		149.2	90	$0.86 \pm 0.07$
MB1315		162.2	52	$0.94 \pm 0.09$

<sup>a</sup> Normalised relative value against NK1. <sup>b</sup> Steady-state binding constant from SPR.

# The effect of each compound on NK1-receptor binding



# inhibition of NK1-receptor binding

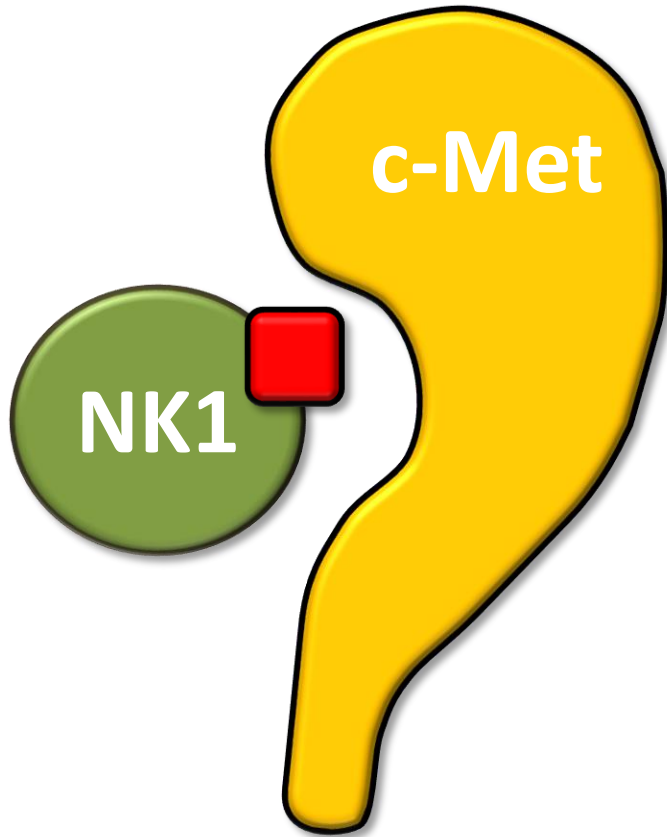


# Biological effects of MB605

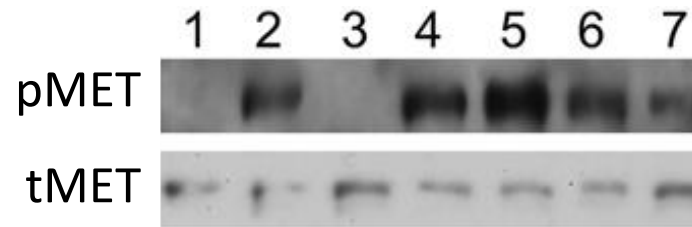
**MB605**



**c-Met**

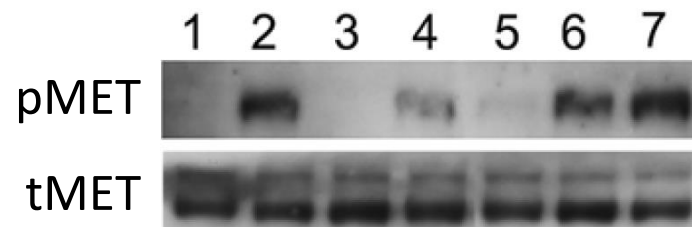


**HEPES**



1. no stimulus
2. 1 nM NK1
3. 0.1% DMSO
4. 100 mM HEPES + 1 nM NK1
5. 10 mM HEPES + 1 nM NK1
6. 1 mM HEPES + 1 nM NK1
7. 100  $\mu$ M HEPES + 1 nM NK1

**MB605**



1. no stimulus
2. 1 nM NK1
3. 0.1% DMSO
4. 100 mM MB605 + 1 nM NK1
5. 10 mM MB605 + 1 nM NK1
6. 1 mM MB605 + 1 nM NK1
7. 100  $\mu$ M MB605 + 1 nM NK1

Sigurdardottir *et al.*, *Chem. Sci.*, 2015, 6, 6147

# The value of being able to “see” a protein structure

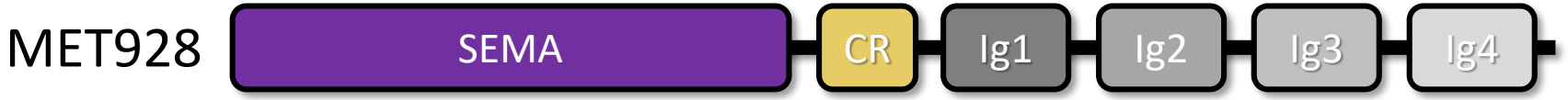
**How protein structures at atomic resolution allow the development of biologically active molecules with potential clinical application.**



# Larger crystal structures and complexes

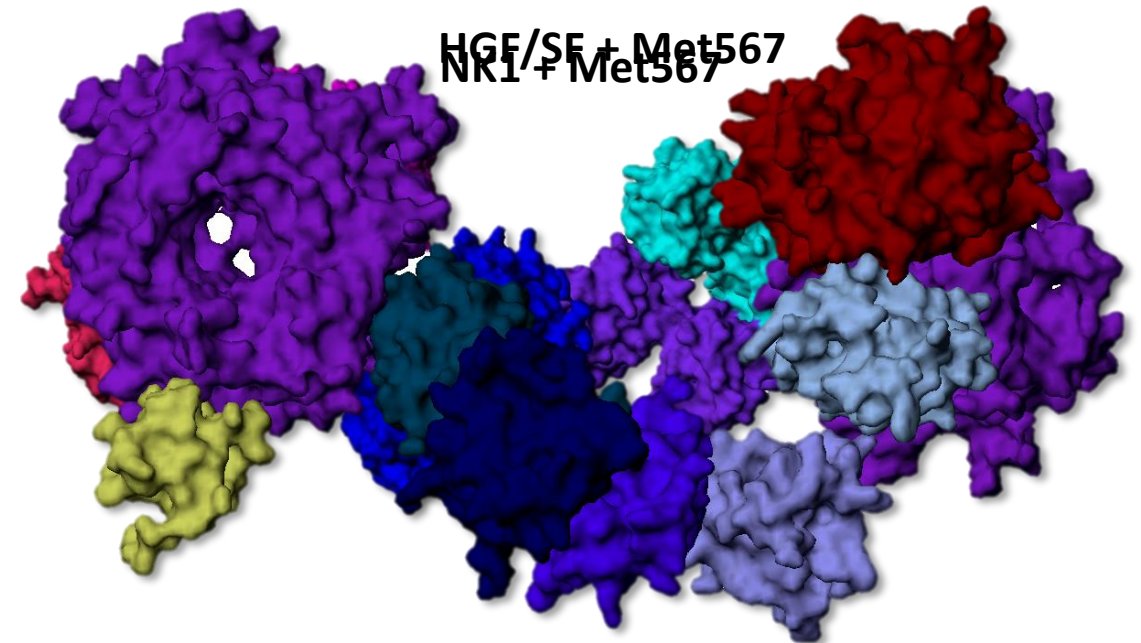


} natural occurring splice variants



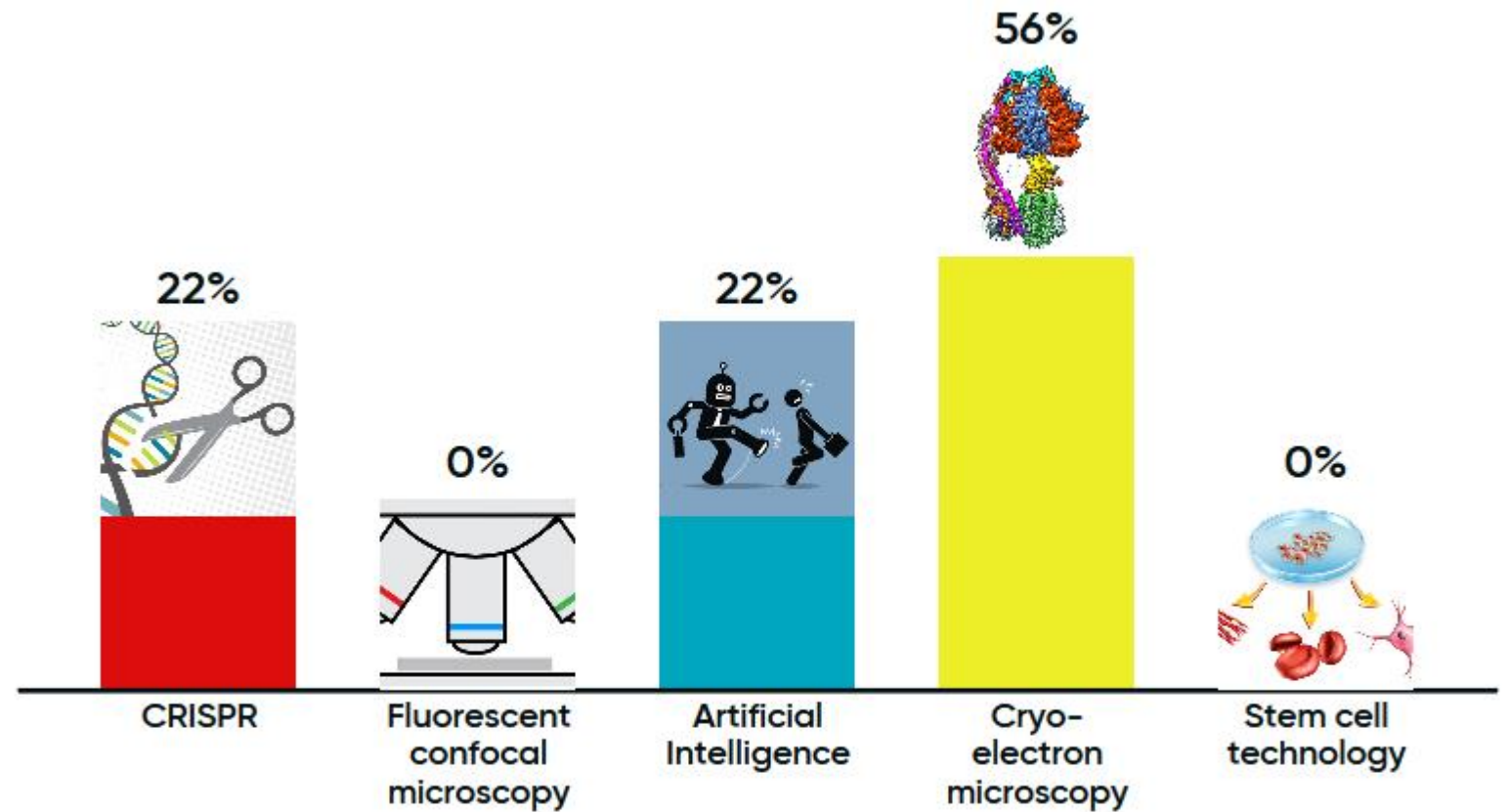
# Larger crystal structures and complexes

- difficult to produce (milligrams needed!)
- difficult to keep (unstable)
- difficult to crystallise





# But the future has arrived!



 Slide is not active

Review

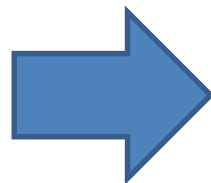
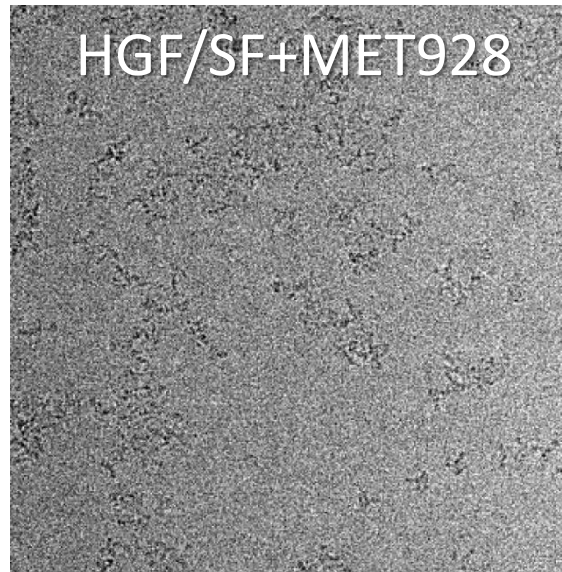
CellPress

## How cryo-EM is revolutionizing structural biology

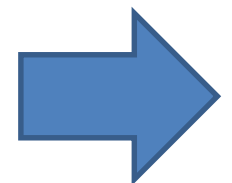
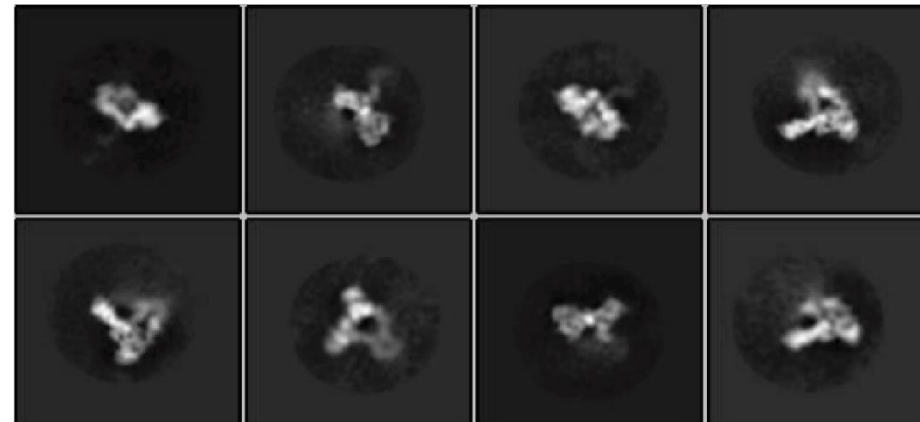
Xiao-chen Bai, Greg McMullan, and Sjors H.W Scheres

MRC Laboratory of Molecular Biology, Francis Crick Avenue, Cambridge Biomedical Campus, Cambridge, CB2 0QH, UK

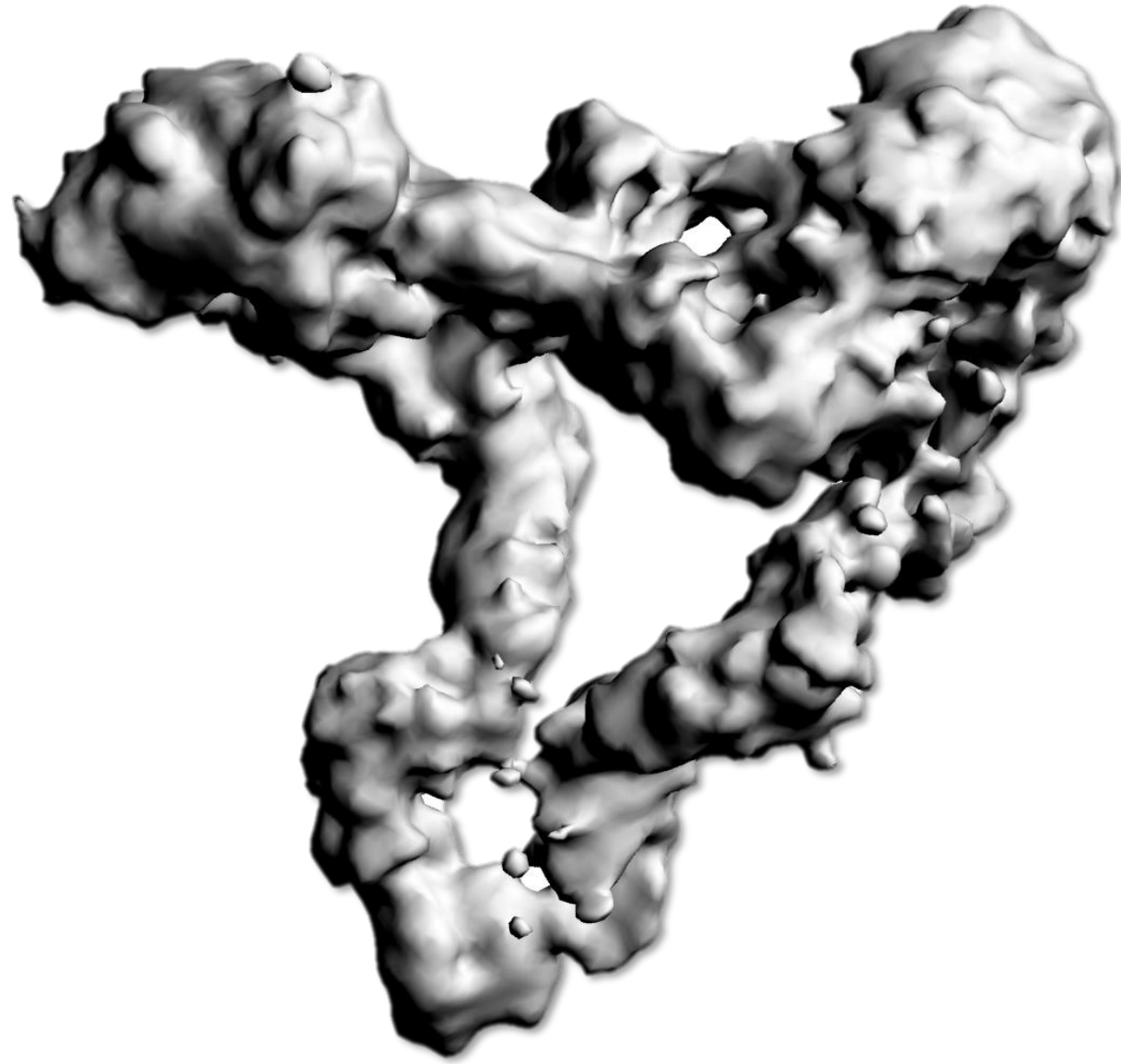
Trends Biochem Sci. 2015 Jan;40(1):49-57



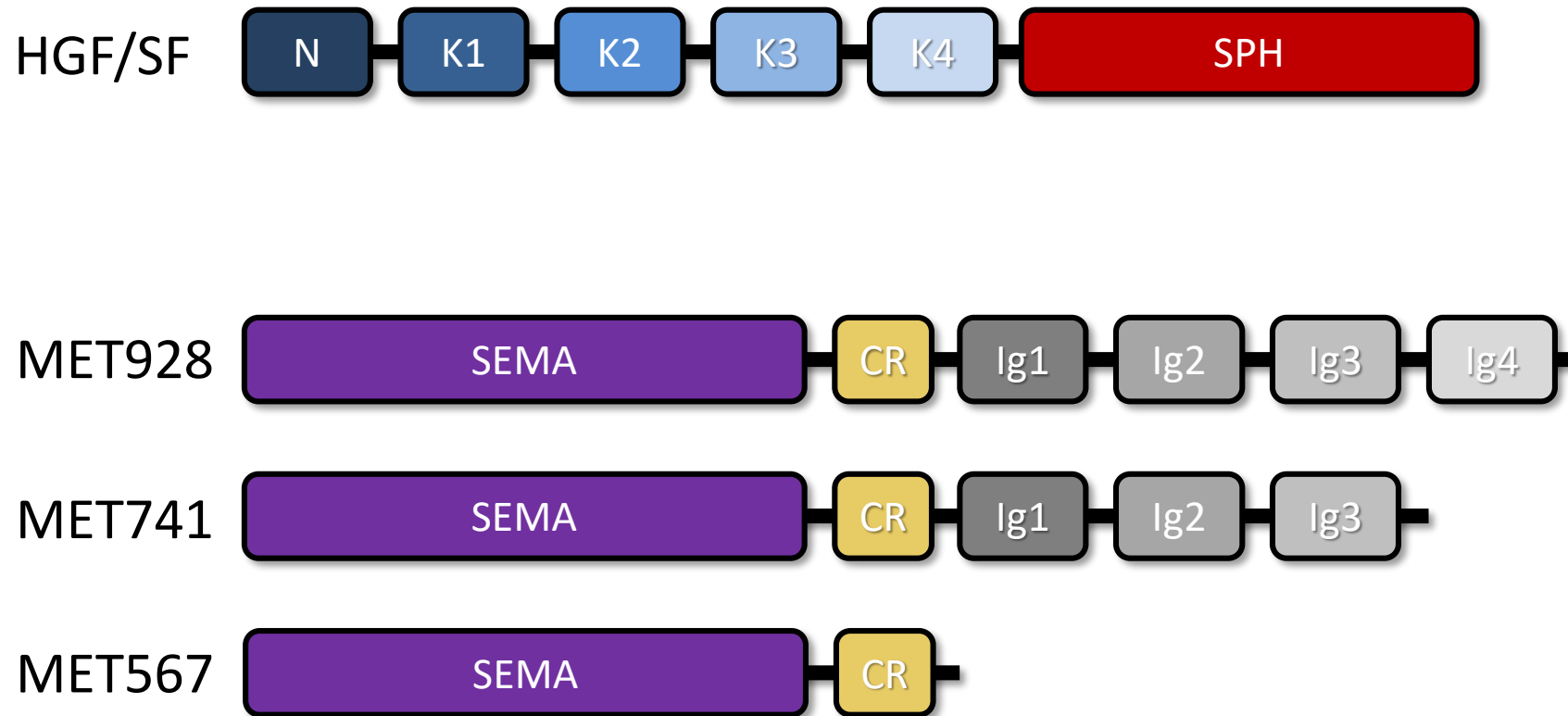
individual particles



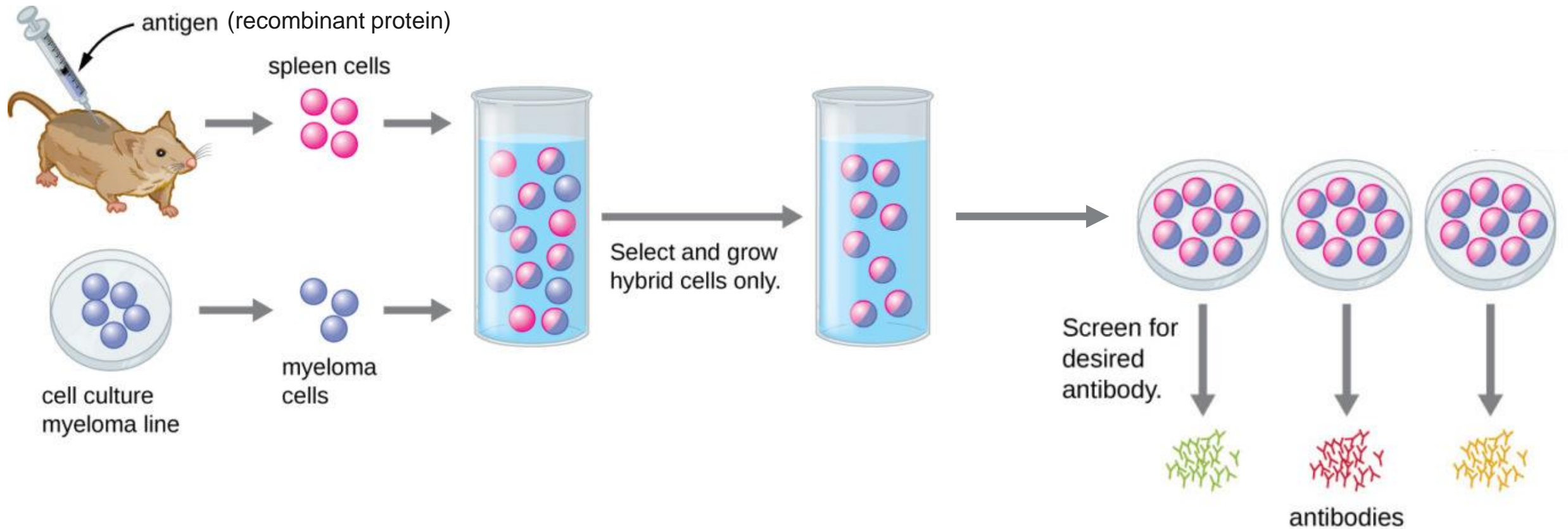
# HGF/SF in complex with Met928



# A second type of SEEING a protein: in the patient



# Recombinant protein as antigens for antibody production





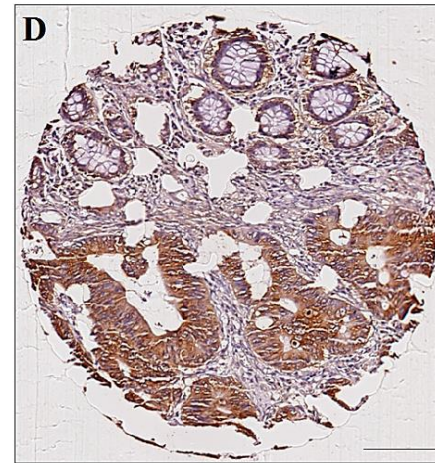
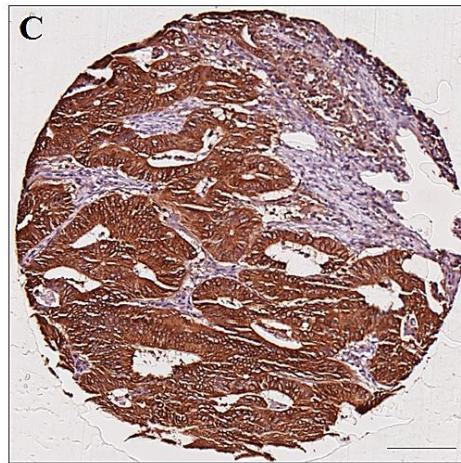
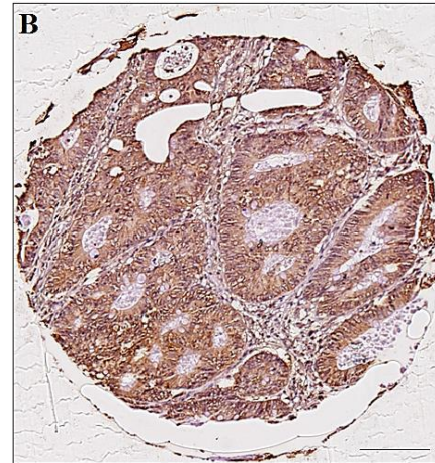
# LEIDEN UNIVERSITY MEDICAL CENTER



**Cornelis Sier**



# Seeing MET in tumour biopsies using antibodies



A. Negative to weak staining in **normal** colorectal tissue

B. Medium positive staining in **colorectal cancer** tissue

C. Strongly positive staining in **colorectal cancer** tissue

D. TMA core showing transition of **tumour** (lower part) to **normal** (upper part) tissue.



ORIGINAL ARTICLE

## Prognostic impact of HER2, EGFR, and c-MET status on overall survival of advanced gastric cancer patients

Nozomu Fuse · Yasutoshi Kuboki · Takeshi Kuwata · Tomohiro Nishina · Shigenori Kadowaki · Eiji Shinozaki · Nozomu Machida · Satoshi Yuki · Akira Ooki · Shinya Kajiura · Tetsuo Kimura · Takeharu Yamanaka · Kohei Shitara · Akiko Kawano Nagatsuma · Takayuki Yoshino · Atsushi Ochiai · Atsushi Ohtsu

**Results** Of the 293 patients from nine institutions, 43 (15 %) were HER2 positive, 79 (27 %) were EGFR positive, and 120 (41 %) were c-MET positive. Ten patients (3 %) showed positive co-expression of HER2, EGFR, and c-MET. After a median follow-up time of 58.4 months with 280 deaths, there was no significant difference in overall survival (OS) in terms of HER2 and EGFR status. However, there was a significant difference in OS between c-MET-positive and c-MET-negative patients [median, 11.9 months vs 14.2 months; hazard ratio, 1.31 (95 % Electronic supplementary material The online version of this confidence interval, 1.03–1.67); log-rank P = 0.024].

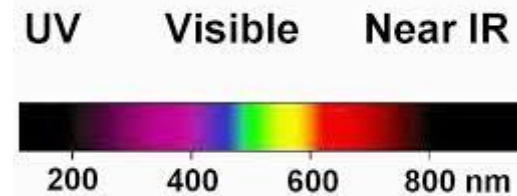


# Seeing the tumour with fluorescently labelled antibodies during operation



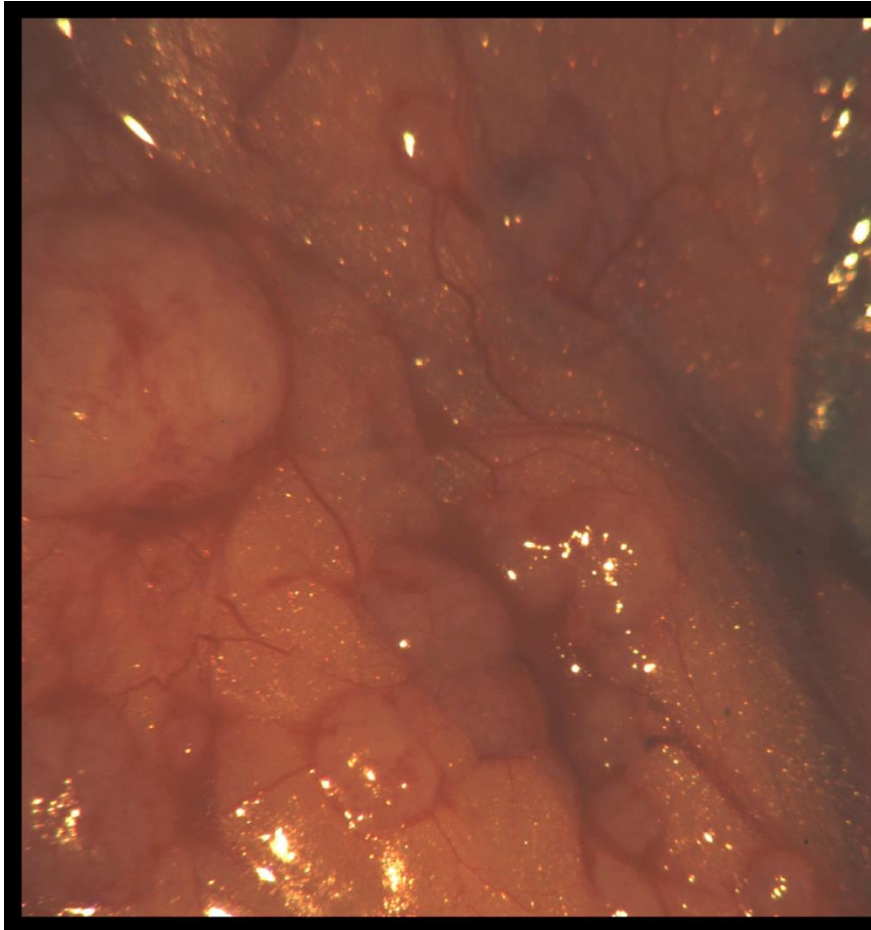
## Near-infrared fluorophores (NIRF)

- deeper tissue penetration
- reduced auto fluorescence
- excitation wavelength does not affect surgeon's operation field

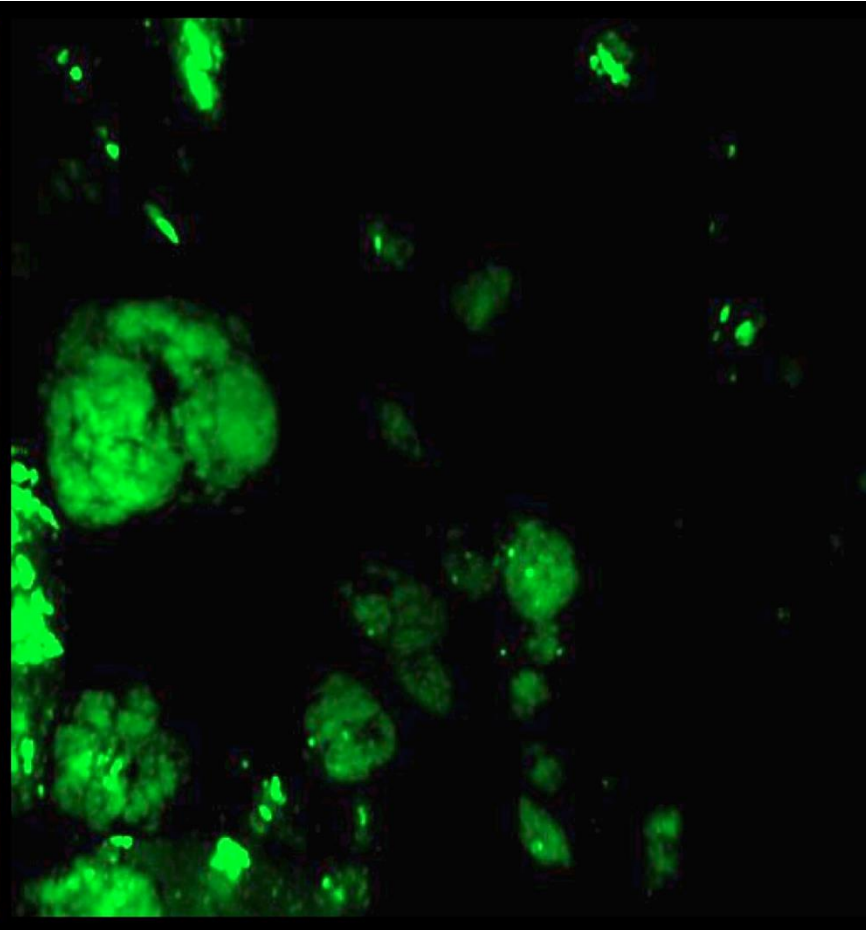


# View of localised region in peritoneal cavity of an ovarian cancer patient

Surgeon's normal view



Fluorescence-enhanced view



*Purdue University, 2011*

# “white stars in a black sky effect”



“Ovarian cancer is notoriously difficult to see, and this technique allowed surgeons to spot a tumour 30 times smaller than the smallest they could detect using standard techniques.”

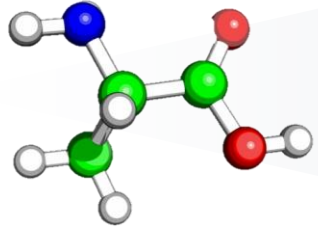
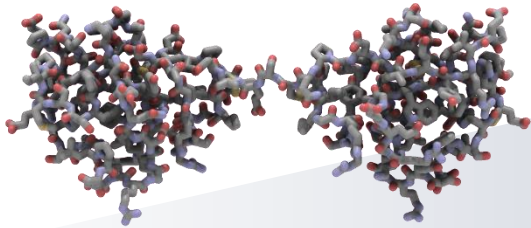
"By dramatically improving the detection of the cancer - by literally lighting it up - cancer removal is dramatically improved."

# The importance of being able to “see” a protein

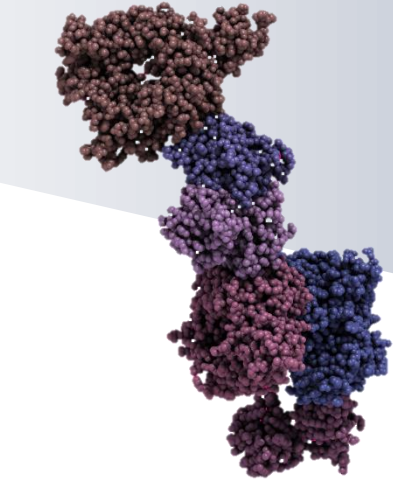
- Current drug design is rational and based on available high resolution structures and a molecular understanding
- New techniques now allow us to study larger protein complexes in greater detail
- Detecting the presence or absence of a specific protein in a tumour is essential for diagnosis and prognosis
- The presence or absence of a specific protein in a tumour should guide treatment (i.e. personalised medicine)
- Making specific proteins in or on the tumour visible allows more accurate surgical removal

# Protein structures in the fight against Cancer

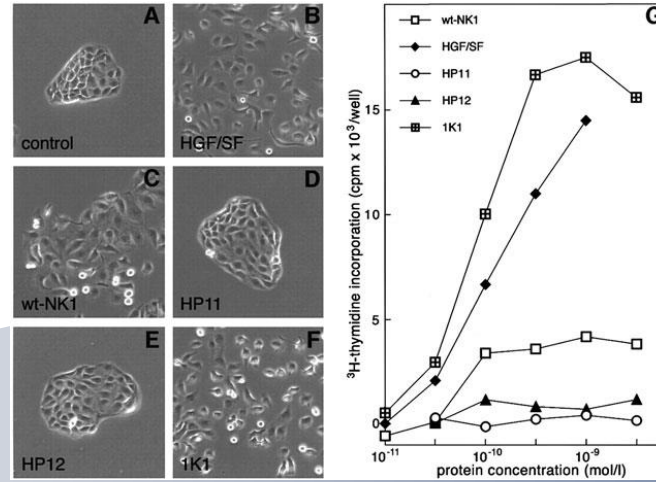
Single proteins  
**Nanometres (nm)**



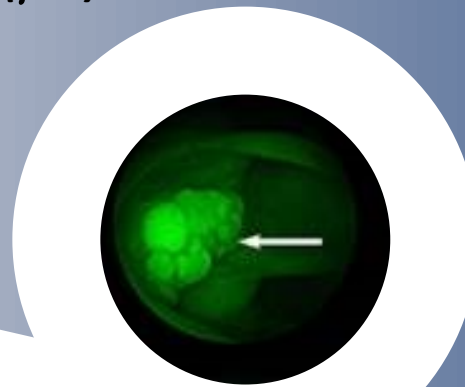
Single atom (positions)  
**Ångstroms (<math>\text{Å}</math> <math>< \text{nm}</math>)**



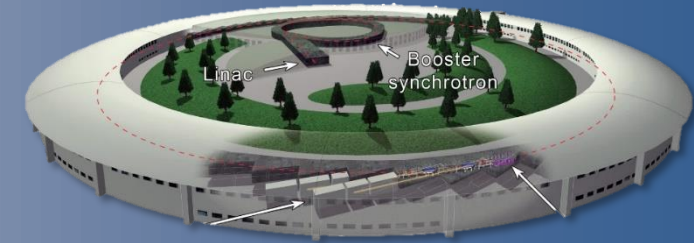
Protein complexes  
**sub-micrometre (<math>< \mu\text{m}</math>)**



Cells in assays  
**micrometres (<math>\mu\text{m}</math>)**



Tumour tissue  
**millimetres to centimetres  
(mm - cm)**



ESRF Grenoble  
**(0.01 nm – 1 km)**