

# Molecular Assays to Profile 10 Estrogen Receptor Beta Isoform mRNA Copy Numbers in Ovary, Breast, Uterus, and Bone Tissues

Indira Poola

Department of Biochemistry and Molecular Biology, Howard University School of Medicine, Washington, DC 20059

Estrogens regulate various biological processes in a diverse range of reproductive and nonreproductive tissues through two genetically distinct but structurally related high affinity nuclear receptors, the estrogen receptor alpha and beta (ER $\alpha$  and ER $\beta$ ). The physiological significance of the presence of two ERs that have redundant functions is not known. Several unique properties of ER $\beta$  together with its distinct expression patterns are considered to be, in part, the basis for diverse functional actions of estrogens and opposing actions of selective estrogen receptor modulators (SERMs) in different tissues. To understand how relative expression levels of two ERs correlate to seemingly dissimilar actions of estrogens and SERMs, quantitative methods are required that can precisely measure the levels of every isoform. Previously, methods to quantify eight ER $\alpha$  isoforms have been described [Poola I. (2003) *Anal. Biochem.* 314, 217–226]. In this article, real-time PCR-based molecular assays are described that can distinguish and quantify as low as 100 copies of 10 ER $\beta$  isoform mRNAs, the ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, ER $\beta$ 5, and ER $\beta$  exon 2 $\Delta$ , exon 3 $\Delta$ , exon 4 $\Delta$ , exon 5 $\Delta$ , exon 6 $\Delta$ , and exons 5–6 $\Delta$ . Each isoform mRNA is quantified using a specific primer pair and a 5'FAM (carboxy-fluorescein)- and 3'TAMARA (6-carboxy tetraethyl-rhodamine)-labeled probe and in comparison with a standard curve constructed with known copy numbers of its respective reverse transcribed cRNA. The devised assays were applied to profile 10 ER $\beta$  isoforms in four estrogen-sensitive tissues—ovary, breast, uterus, and bone. The sensitivity of detection of each isoform in these tissues varied from picograms to nanograms of reverse-transcribed total RNA depending on the isoform and the tissue. The results presented also show that each tissue has a distinct profile of 10 isoform mRNAs. Interestingly, ER $\alpha$ -negative breast cancer cell lines and tumors expressed significant amounts of ER $\beta$  isoforms suggesting that mitogenic stimulation by estrogen exists in these tis-

sues. Bone tissues expressed several isoforms, although wild type was not present. In addition to the assay development, evidence is presented to demonstrate for the first time that ER $\beta$ 4 and ER $\beta$ 5 are full length receptors, contrary to previous reports that they are short receptors of exon 7–8. It is expected that the methods described here will significantly contribute to delineating the functional roles of various ER $\beta$  isoforms and in conjunction with ER $\alpha$  isoform profiling, will highly facilitate designing of individualized tissue specific therapies to treat estrogen-related pathologies.

**Key Words:** ER $\beta$  wild type; ER $\beta$  isoforms; ER $\beta$  splice variants; quantitative real-time-PCR; splice targeted primers; splice variant mRNA quantification; breast; ovary; uterus; bone and breast cancer.

## Introduction

The estrogens mediate a wide variety of complex biological processes in a diverse range of tissues from reproductive tracts of both males and females, mammary tissues, to nonreproductive tissues that include cardiovascular, skeletal, immune, nervous, gastrointestinal, and urinary tracts (1). In addition to maintenance of normal functions of the above systems, mitogenic actions of estrogens are implicated as a cause of developing malignant breast tumors (2). Hence, there is an immense interest to understand the molecular mechanisms of actions of this hormone in a broad range of seemingly unlinked biological processes.

Recent progress in the understanding of molecular mechanisms of estrogen signal transduction pathways has revealed that different cells respond to the same hormone in a different manner because of the differences in the expression levels of several proteins involved in mediating estrogen action (3). The most important players in the estrogen-mediated cellular signaling are the estrogen receptors (ERs). Two functionally related but genetically distinct ERs, the ER $\alpha$  and ER $\beta$ , have been identified that mediate estrogen action. The estrogen-bound ERs are transcription factors, which upon binding to target gene promoters activate the transcription of genes under estrogen control (4). The two ER isoforms share homologous sequences in the DNA- and hormone-binding regions (96% and 60% respectively)

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Author to whom all correspondence and reprint requests should be addressed: Incira Poola, Ph.D, Department of Biochemistry and Molecular Biology, Howard University School of Medicine, 520 W Street, NW Washington, DC 20059. E-mail: ipoola@howard.edu

(5), and therefore interact with identical DNA response elements and exhibit similar binding affinity profiles with a number of natural and synthetic ligands (6). The physiological significance of the presence of two ERs that seem to have redundant functions is not known. However, several unique structural and functional properties of ER $\beta$ , together with distinct tissue expression patterns, suggest that it plays a regulatory role in estrogen signaling. It lacks an N-terminal activation function (AF-1) domain (5) and the C-terminal activation function domain (AF-2) that interacts with co-activators and co-repressors functions differently from the similar ER $\alpha$  domain (7). In addition, the ER $\beta$  does not activate transcription of genes regulated at AP-1 promoter site when bound with ER $\alpha$  agonists because of lack of AF-1 domain. Instead, many ER $\alpha$  blockers that function as antagonists of ER $\beta$  transcriptional activity on ERE-containing promoters, act as potent agonists at AP-1 responsive elements (8). A number of *in vivo* and *in vitro* studies have also suggested that ER $\beta$  (1) can function independently of ER $\alpha$  in estrogen action (9), (2) has constitutive transcriptional activity by activating EREs of target gene promoters in the absence of ligand, (3) has a modulatory role on ER $\alpha$ -mediated transcriptional activity (10–12), and (4) when expressed together with ER $\alpha$ , it forms heterodimers (13). These studies indicate that the ER $\beta$  plays a regulatory role, in addition to being an independent receptor, in estrogen-mediated cellular signaling.

The expression pattern of ER $\alpha$  and ER $\beta$  also suggests that different biological response to estrogen in different tissues could be directly related to differential levels of these receptors. Although most of the estrogen responsive tissues express both receptors, one form seems to predominate over the other depending on the tissue type. For example, ER $\alpha$  was shown to predominate in mammary tissue and female reproductive tissues, whereas ER $\beta$  appears to predominate in ovary, male reproductive tissues, and nonreproductive organs such as spleen, lung, hypothalamus, thymus, and cardiovascular and skeletal system (14). Because a majority of target tissues express both receptors, binding to ligands, recruitment and interaction with co-repressors/co-activators, promoters, and an overall responsiveness to a particular ligand are most likely to be determined by ER $\alpha$ :ER $\beta$  ratio. Therefore, the ability to precisely determine the levels of each receptor will contribute considerably to our understanding of how an expression profile of the two receptors correlates with biological response. The outcomes will have significant impact on designing individualized therapies for estrogen-related pathologies.

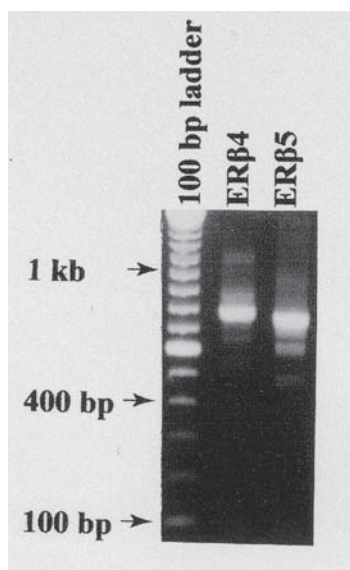
The expression levels of receptor protein molecules are traditionally detected and quantified by either immunohistochemical or Western blotting methods. Although these conventional methods are well suited for a research set up, they cannot be applied to limited amounts of clinical samples such as breast cancer tissues that express both receptors (15,

16). In these cases, detection and quantification of receptor mRNAs may be preferred, because it requires considerably smaller amounts of tissue sample. Furthermore, the currently used immunohistochemical method in clinical laboratories cannot distinguish between several isoforms of the receptors. In the current report, quantitative real-time PCR-based assays are described to distinguish and quantify 10 ER $\beta$  isoforms, the ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, ER $\beta$ 5, ER $\beta$  exon 2 $\Delta$ , ER $\beta$  exon 3 $\Delta$ , ER $\beta$  exon 4 $\Delta$ , ER $\beta$  exon 5 $\Delta$ , ER $\beta$  exon 6 $\Delta$ , and ER $\beta$  exons 5–6 $\Delta$ . The devised assays were applied to profile the above isoforms in four estrogen-sensitive tissues, ovary, breast, uterus and bone tissues and breast cancer cell lines and tissues. The results show that each tissue has a unique profile of ER $\beta$  isoforms. It is expected that these methods together with ER $\alpha$  isoform quantifying methods will significantly aid in profiling all the known estrogen receptor isoforms and our understanding of how a qualitative and quantitative ER isoform composition in a tissue correlates with the response/resistance to a particular estrogenic/anti-estrogenic ligand.

## Results and Discussion

In recent years it has become clear that ER $\alpha$ -blockers or selective estrogen receptor modulators (SERMs) act differently in different target organs. The SERMs Tamoxifen and Raloxifen oppose estrogen action in breast but mimic its biological effects in bone tissues. The opposing actions of these molecules in different tissues is thought to depend on relative levels of ER isoforms and the availability of several cellular factors that include the types and levels of co-activators and co-repressors (1,3,4). Recent reports that Tamoxifen resistance in ER $\alpha$ -positive breast tumors correlated with elevated levels of ER $\beta$  (17,18) but not with other co-factors suggested that ER $\beta$  is an important factor in determining tissue-specific actions of SERMs. Although the molecular interactions that confer this resistance are not clear, it is likely, in part, due to agonistic effects of ER $\alpha$ -blockers when bound to ER $\beta$  on AP-1 promoter sites. Increased ER $\beta$  to ER $\alpha$  levels may result in increased agonistic actions of SERMs. In all likelihood the relative expression levels of ER $\beta$  and ER $\alpha$  could dictate the tissue-specific agonistic/antagonistic actions of SERMs. Therefore, to design new individualized effective endocrine treatments for estrogen-related abnormalities such as breast cancer and osteoporosis, it is important to precisely profile all ER isoform levels in a given tissue.

Previously, molecular approaches to determine the expression levels of eight ER $\alpha$  isoform mRNA levels were described (19). The current report describes the design, testing, and application of real-time PCR-based approach for profiling ER $\beta$  isoform in a number of estrogen-sensitive tissues. In addition to the wild type, the ER $\beta$ 1, methods are also described to profile nine isoforms that have been iden-



**Fig. 1.** Amplification of ER $\beta$ 4 and ER $\beta$ 5 coding sequences from ovary cDNA. The coding sequences for ER $\beta$ 4 and ER $\beta$ 5 were amplified using a sense primer in exon 4 (ER $\beta$  2S) and isoform-specific antisense primers (ER $\beta$ 4.A and ER $\beta$ 5.A, respectively) (Table 1) in exon 8 as described in *Methods* section. The sense primer together with ER $\beta$ 4-specific antisense primer amplified a 775 bp product and the ER $\beta$ 5-specific antisense primer amplified a 745 bp product. These two products were cloned, sequenced (see Fig. 2), and identified as coding sequences of ER $\beta$ 4 and ER $\beta$ 5, providing the first evidence that they are full-length receptors.

tified thus far in various tissues. They are ER $\beta$ 2, ER $\beta$ 4, ER $\beta$ 5, ER $\beta$  exon 2 $\Delta$ , ER $\beta$  exon 3 $\Delta$ , ER $\beta$  exon 4 $\Delta$ , ER $\beta$  exon 5 $\Delta$ , ER $\beta$  exon 6 $\Delta$ , and ER $\beta$  exons 5–6 $\Delta$ . The ER $\beta$ 2 and ER $\beta$ 3 are full-length molecules, share identical sequences with ER $\beta$ 1 from exon 1 to 7, but diverge in exon 8 (20). In contrast, ER $\beta$ 4 and ER $\beta$ 5 were described as partial sequences spanning from a portion of exon 7 and distinct exon 8 sequence (20). The functional properties were studied for ER $\beta$ 2, and it was shown to form heterodimers with ER $\beta$ 1 and ER $\alpha$  and mediate estrogen signaling although several fold weaker than ER $\beta$ 1 (21). Among the exon deletion splice variants, functional activities have been demonstrated for exon 3 $\Delta$  and exon 5 $\Delta$  (22,23), although the presence of other exon deletion mRNAs have been reported in several tissues (24).

In the current study, for the purpose of constructing plasmids for cRNA synthesis, ER $\beta$  isoform sequences were amplified using a sense primer in exon 4 and isoform-specific antisense primers in exon 8 from human ovary cDNA. During that process, unexpectedly 775 bp and 745 bp products were amplified with isoform-specific antisense primers for ER $\beta$ 4 and ER $\beta$ 5, respectively (Fig. 1). Upon cloning the two ER $\beta$ 4 and ER $\beta$ 5 products into pCR<sup>®</sup>2.1-TOPO vector and sequence analysis using three different primers, coding

sequences were identified that are expected of full-length receptors (Fig. 2). Both products gave similar sequences from exon 4 to exon 7 and diverged in exon 8 similar to ER $\beta$ 2 and ER $\beta$ 3. These data provide the first evidence that both ER $\beta$ 4 and ER $\beta$ 5 could be full-length receptors and are expressed in four estrogen-responsive tissues, and breast cancer cell lines and tissues along with other eight isoforms.

To quantify every isoform by real-time PCR, primer pairs were first designed and tested for their specificity. For exon deletion splice variants, recently described “splice targeted primers” (24,25), were applied to amplify their mRNAs as separate gene populations (Table 1). Every primer pair was tested for specificity using two different templates: (1) its respective reverse-transcribed cRNA and (2) cDNA prepared from ovary total RNA by conventional PCR. The results obtained with 10 primer pairs are presented in Fig. 3. The ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, ER $\beta$ 5, ER $\beta$  exon 2 $\Delta$ , ER $\beta$  exon 3 $\Delta$ , ER $\beta$  exon 4 $\Delta$ , ER $\beta$  exon 5 $\Delta$ , ER $\beta$  exon 6 $\Delta$ , and ER $\beta$  exon 5–6 $\Delta$  primer pairs generated expected PCR products of size 186 bp, 176 bp, 206 bp, 177 bp, 200 bp, 283 bp, 273 bp, 241 bp, 229 bp, and 241 bp, respectively, without non-specific amplification or cross amplification.

After establishing the specificity of all the primers, the sensitivity of the primers together with 5'FAM- and 3'TAMARA-labeled probes were tested using ER $\beta$  isoform DNAs prepared by reverse transcription of various copy numbers of their respective cRNAs as described in the *Methods* section. Sensitivity was tested with transcripts ranging from  $10^2$  to  $10^9$  copies of reverse-transcribed cRNA. The results obtained for 10 isoforms, presented in Table 2, indicate that each primer pair detected either  $10^3$  copies or  $10^2$  copies at 50% ramp rate. Representative amplification plots and standard graphs generated for ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 shown in Fig. 4 indicate that the four primer pair and probe sets generated amplification plots with as few as  $10^2$  copies. The  $C_T$  values varied only  $\pm 0.5$  cycle for any given copy number and isoform when repeated several times over a period of 6 mo. The standard graphs show that the assays are linear between  $10^2$  and  $10^9$  copies indicating that the quantifications could be performed in this range. These results also show the efficacy of the designed primer pairs and probes in detecting very low copy numbers of ER $\beta$  isoform mRNAs by reverse-transcription real-time PCR.

Next, the primer pair and probe sets for ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 and exon deletion splice variants were tested for their sensitivity to detect cDNAs prepared from breast, ovary, and uterus tissues. For this, the tissue cDNAs, reverse-transcribed from 50 ng of total RNA, were serially double diluted and amplified by real-time PCR as described in the *Methods* section. The sensitivity is defined as the dilution (minimum amount of reverse-transcribed total RNA) that gives the detectable amplification plot. The results obtained for 10 isoforms, presented in Table 2, indicate that the sensitivity of detection varied from isoform to isoform



**A ER $\beta$ 4 SEQUENCE**

TGGCGGCTCACGCGCCCCGAGTGCGGGAGCTGCTGCTGGACGCCCTGAGCCC  
 CGAGCAGCTAGTGCTCACCTCCTGGAGGCTGAGCCGCCCCATGTGCTGATC  
 AGCCGCCCCAGTGCGCCCTTCACCGAGGCCTCCATGATGATGTCCCTGACCA  
 AGTTGGCCGACAAGGAGTTGGTACACATGATCAGCTGGGCCAAGAAGATTCC  
 CG<sup>4/5</sup>GCTTTGTGGAGCTCAGCCTGTTGACCAAGTGCGGCTCTTGGAGAGCTG  
 TTGGATGGAGGTGTTAATGATGGGGCTGATGTGGCGCTCAATTGACCACCCC  
 GGCAAGCTCATCTTTGCTCCAGATCTTGTCTGGACAG<sup>5/6</sup>GGATGAGGGGAA  
 ATGCGTAGAAGGAATTCTGGAAATCTTTGACATGCTCCTGGCAACTACTTCAA  
 GGTTTCGAGAGTTAAACTCCAACACAAAGAATATCTCTGTGTCAAGGCCAT  
 GATCCTGCTCAATTCCA<sup>6/7</sup>GTATGTACCCTCTGGTCACAGCGACCCAGGATGC  
 TGACAGCAGCCGGAAGCTGGCTCACTTGTGTAACGCCGTGACCGATGCTTTG  
**GTTGGGTGATTGCCAAGAGCGGCATCTCCTCCCAGCAGCAATCCATGCGC**  
 CTGGCTAACCTCCTGATGCTCCTGTCCCACGTCAGGCATGCGAG<sup>7/8</sup>ATGGGG  
 AGAAAAGCAATTCATTCATTTGAAGTTATCTTAGTGCCAAGAGTCATGTGAA  
 AATGTCCCTTGCATGTGGGCAATGAAAGATTTGCAGACGATATAAAAACCCA  
 GACA

**B ER $\beta$ 5 SEQUENCE**

TGGCGGCCCGCGCCCCGNTGCGGGAGCTGCTGCTGGACGCCCTGAGCCCCGA  
 GCAGCTAGTGCTCACCTCCTGGAGGCTGAGCCGCCCCATGTGCTGATCAGC  
 CGCCCCAGTGCGCCCTTCACCGAGGGCCTCCATGATGATGTCCCTGACCAAG  
 TTGGCCGACAAGGAGTTGGTACACATGATCAGCTGGGCCAAGAAGATTCCCCG  
<sup>4/5</sup>GCTTTGTGGAGCTCAGCCTGTTGACCAAGTGCGGCTCTTGGAGAGCTGTT  
 GGATGGAGGTGTTAATGATGGGGCTGATGTGGCGCTCATTGACCACCCCGGC  
 AAGTCATCTTTGCTTCAGATCTTGGTCTGGACAG<sup>5/6</sup>GGATGAGGGGAAATG  
 CGTAGAAGGAATTCTGGAAATCTTTGACATGCTCCTGGCAACTACTTCAAGGT  
 TTCGAGAGTTAAACTCCAACACAAAGAATATCTCTGTGTCAAGGCCATGAT  
 CCTGCTCAATTCCA<sup>6/7</sup>GTATGTACCCTCTGGTCACAGCGACCCAGGATGCTGA  
 CAGCACGCCGGAAGCTGGCTCACTTGTGTAACGCCGTGACCGATGCTTTGGT  
**TTGGGTGATTGCCAAGAGCGGCATCTCCTCCCAGCAGCAATCCATGCGCCT**  
 GGCTAACCTCCTGATGCTCCTGTCCCACGTCAGGCATGCGAG<sup>7/8</sup>GTACGCGCC  
 CTAAGGAGCTGCTCTGCTTGGGCTTGGGATGGGATTATGTGCTCCACGGAGG  
 GTGAAGTGATTTGGGAAAAGTG

**Fig. 2.** Nucleotide sequence of 775 bp and 775 bp products amplified with a sense primer in exon 4 and ER $\beta$ 4- and ER $\beta$ 5-specific antisense primers, respectively. The above products were cloned into pCR<sup>®</sup>2.1-TOPO vector and each identified by sequence analysis using three different primers (ER $\beta$ 1S, ER $\beta$  2S, and ER $\beta$ 4.A for ER $\beta$ 4 and ER $\beta$ 1S, ER $\beta$  2S, and ER $\beta$ 5.A for ER $\beta$ 5) (Table 1). **A:** Sequence obtained for ER $\beta$ 4. **B:** Sequence obtained for ER $\beta$ 5. The exon demarcations are indicated. Two of the primers used for sequencing each product (**A:** ER $\beta$ 1S and ER $\beta$ 4.A; **B:** ER $\beta$  1S and ER $\beta$ 5.A) are bold.

and in different tissues. Representative amplification plots generated for ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 with serially double diluted cDNAs from breast, ovary, and uterus are shown in Fig. 5. In breast tissue, the ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 sequences could be detected with 1:16 (3.125 ng), 1:16 (3.125 ng), 1:4 (12.5 ng), and 1:64 (0.78 ng) diluted samples, respectively. In ovary, the dilutions were 1:256 (0.19 ng), 1:128 (0.39 ng), 1:32 (1.56 ng), and 1:256 (0.19 ng), respectively. In the uterus the dilutions were 1:2 (25 ng), 1:8 (6.25 ng), 0, and 1:16 (3.125 ng), respectively (Table 3). The minimum amount of reverse-transcribed total RNAs

required for detecting other isoforms in the above tissues are also shown in Table 3.

The devised assays were applied to profile 10 ER $\beta$  isoforms in four estrogen-sensitive tissues—the ovary, breast, uterus, and bone—and one ER $\alpha$ -positive (MCF-7) cell line, one ER $\alpha$ -negative breast cancer cell line (MDA-MB-231), one ER $\alpha$ -positive breast cancer tissue, and one ER $\alpha$ -negative breast cancer tissue. For the quantifications, the amount of cDNA used was generally about 5–10 times higher than the minimum amount required to detect that particular isoform depending on the tissue (Table 3). The number of copies

**Table 1**  
Primers and Probes for Quantitation of ER $\beta$  Isoforms by Real-Time PCR

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<u>Wild Type (ER<math>\beta</math>1)</u>
Sense (ER $\beta$ 1S) 5'tttgggtgattgccaagagc3' (Position, exon 7, bp 1411–1430)
Antisense (ER $\beta$ 1.A) 5'agcacgtgggcattcagc3' (Position, exon 8, bp 1580–1597)
Probe 1: FAM 5'cctcccagcagcaatccatgcg3'TAMARA (Position, exon 7, 1438–1460)
<u>ER<math>\beta</math>2</u>
Sense (ER $\beta$ 1S) 5'tttgggtgattgccaagagc3'
Antisense (ER $\beta$ 2.A) 5'gtcactgctccatcgttct3' (Position, exon 8, bp 1907–1887)
Probe 1: FAM 5'cctcccagcagcaatccatgcg3'TAMARA
<u>ER<math>\beta</math>4</u>
Sense (ER $\beta$ 1S) 5'tttgggtgattgccaagagc3'
Antisense (ER $\beta$ 4.A) 5'gtctgggttttatctgtctgcaa3' (Position, exon 8, bp 271–294)
Probe 1: FAM 5'cctcccagcagcaatccatgcg3'TAMARA
<u>ER<math>\beta</math>5</u>
Sense (ER $\beta$ 1S) 5'tttgggtgattgccaagagc3'
Antisense (ER $\beta$ 5.A) 5'cactttcccaaatcacttcacc3' (Position, exon 8, bp 243–265)
Probe 1: FAM 5'cctcccagcagcaatccatgcg3'TAMARA
<u>ER<math>\beta</math> exon 2<math>\Delta</math></u>
Sense (ER $\beta$ SX 1/3) 5'acacaccttacctgtaaacagl/3 gaca3' (Positions, exon 1, bp 440–460, and exon 3, bp 634–637)
Antisense (ER $\beta$ 2A) 5'gctgctcgtcggcacttc3' (Position, exon 4, bp, 813–795)
Probe 2: FAM 5'tgggtaccgccttgtgcggag3'TAMARA (Position, exon 4, bp 770–790)
<u>ER<math>\beta</math> exon 3<math>\Delta</math></u>
Sense (ER $\beta$ SX2/4) 5'tttaaagaagcattcaag2/4 gctc3' (Positions, exon 2, bp 615–633, and exon 4, bp 751–754)
Antisense (ER $\beta$ 3A) 5'aactcctgtcggccaactt3' (Position, exon 4, 996–1015)
Probe 3: FAM 5'tagtctcaccctcctggaggctga3'TAMARA (Position, exon 4, bp 901–925)
<u>ER<math>\beta</math> exon 4<math>\Delta</math></u>
Sense (ER $\beta$ SX3/5): 5'gaatggtgaagtgtg 3/5 gctttg3' (Positions, exon 3, bp 736–750 and exon 5, bp 1051–1056)
Antisense (ER $\beta$ 4A) 5'atcatggccttgacacagaga3' (Position, exon 6, bp 1289–1300)
Probe 4: FAM 5'aggtgtaaatgatgggctgatgtggc3'TAMARA (Position, exon 5, bp 1108–1134)
<u>ER<math>\beta</math> exon 5<math>\Delta</math></u>
Sense (ER $\beta$ 2S) 5'cggaaggccaagagaag3' (Position, exon 4, bp 824–841)
Antisense (ER $\beta$ AX6/4) 5'gcattcccctcatcc 6/4 cgga3' (Positions, exon 6, bp 1190–1205 and exon 4, bp 1046–1050)
Probe 3: FAM 5'tagtctcaccctcctggaggctga3'TAMARA
<u>ER<math>\beta</math> exon 6<math>\Delta</math></u>
Sense (ER $\beta$ 3S) 5' catgatgatgtccctgaccaa3' (Position, exon 4, bp 977– 997)
Antisense (ER $\beta$ AX7/5): 5'gaccagagggtacatac 7/5 ctgt3' (Positions, exon 7, bp 1340–1324 and exon 5, bp 1189–1186)
Probe 4: FAM 5'aggtgtaaatgatgggctgatgtggc3'TAMARA
<u>ER<math>\beta</math> exon 5–6<math>\Delta</math></u>
Sense (ER $\beta$ 2S) 5'cggaaggccaagagaag3' (Position, exon 4, bp 824–841)
Antisense (ER $\beta$ AX7/4) 5'ccagagggtacatac 7/4 cgga3' (Positions, exon 7, bp 1340–1324 and exon 4, bp 1045–1050)
Probe 3: FAM 5'tagtctcaccctcctggaggctga3'TAMARA

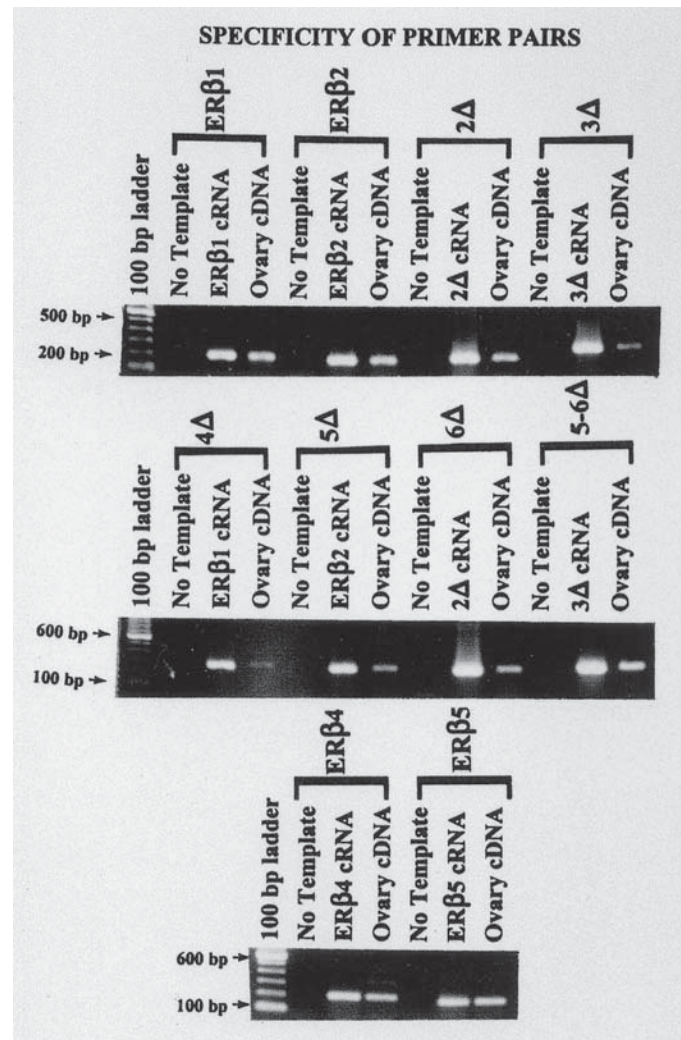
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of every isoform in a given amount of sample was determined in comparison with a standard graph constructed with known copy numbers ( $10^2$ – $10^9$  copies) of its respective reverse-transcribed cRNA as described in *Methods* section. A standard graph was constructed every time quantitation of a test sample was performed. The number of copies of every isoform was normalized to  $10^{10}$  copies of GAPDH.

The results obtained for each isoform in each tissue/cell line tested and presented in Table 4 indicate that ER $\beta$ 5 was the most abundant isoform in each tissue tested. This suggests ER $\beta$ 5 may play an important role in estrogen-mediated

signaling in target tissues. Breast tissues expressed 9 of the 10 isoforms. Ovary expressed the highest amounts of all the 10 isoforms among the tissues analyzed. Bone tissue expressed ER $\beta$ 2 and ER $\beta$ 5, although ER $\beta$ 1 was not observed, indicating that these isoforms may be the major mediators of estrogen action in this tissue. The ER $\beta$  exon 3 $\Delta$  that was shown to have ligand binding and transcriptional properties (21) was detected only in ovary as reported previously by conventional PCR (24). Interestingly, ER $\alpha$ -negative breast tumor and the cell line, MDA-MB-231, expressed all the isoforms at the same level as the ER $\alpha$ -positive tumor





**Fig. 3.** Establishing the specificity of the designed primer pairs by conventional RT PCR. The primer pairs described in Table 1 were tested for their specific amplification using two different templates: (1) reverse-transcribed complementary RNA (cRNA) that was generated by in vitro transcription of cloned ER $\beta$  isoform nucleotide sequences and (2) cDNA prepared from ovary. The PCR conditions were as described in the *Methods* section. The primers designed for ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, ER $\beta$ 5, ER $\beta$  exon 2 $\Delta$ , exon 3 $\Delta$ , exons 4 $\Delta$ , exon 5 $\Delta$ , exon 6 $\Delta$ , and exons 5–6 $\Delta$  (Table 1) specifically amplified the expected products of sizes, 186 bp, 176 bp, 206 bp, 177 bp, 200 bp, 283 bp, 273 bp, 241 bp, 229 bp, and 241 bp, respectively, without cross amplification or nonspecific amplification.

**Table 2**

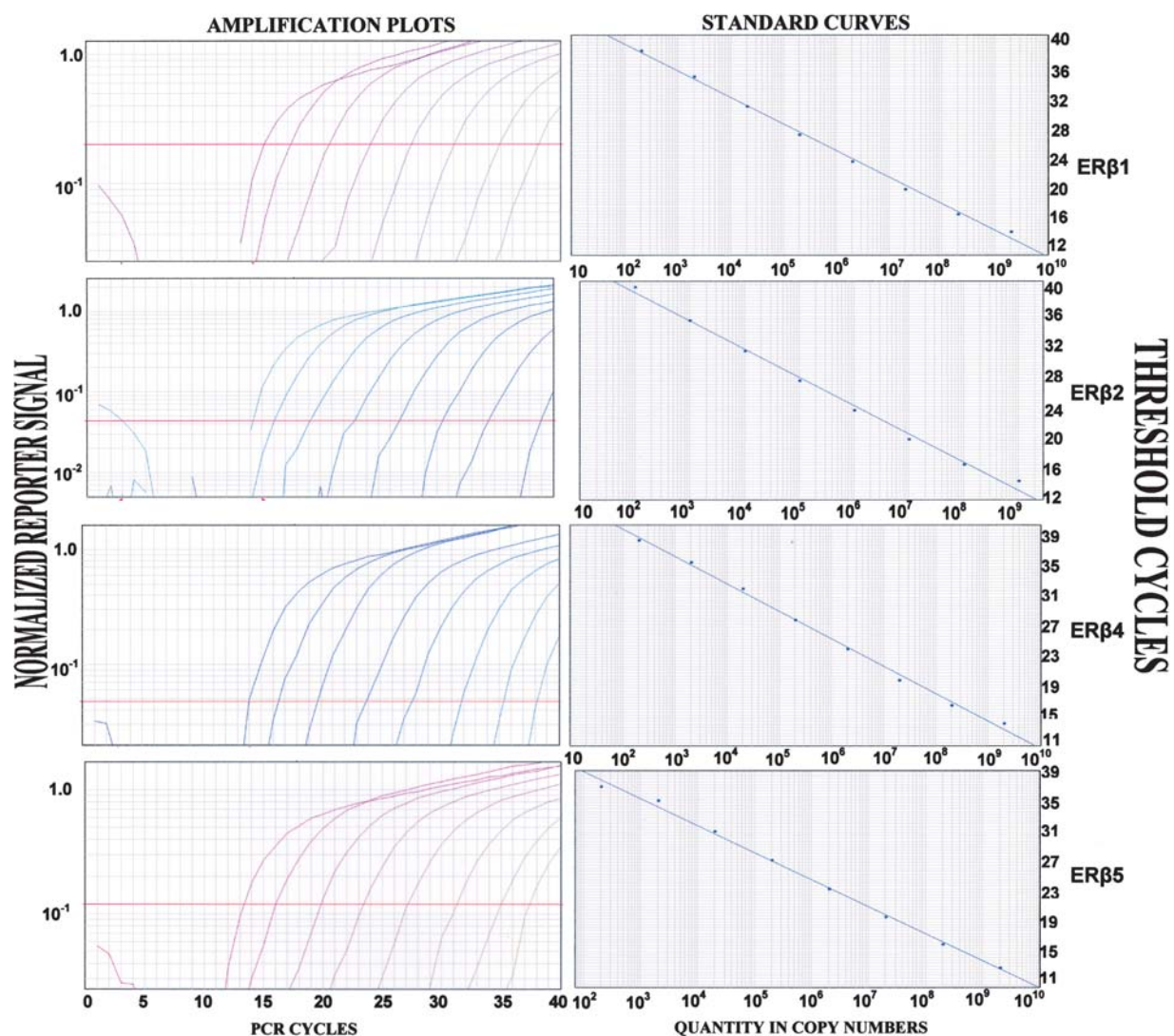
Sensitivity of Detection of Ten ER $\beta$  Isoform Copy Numbers By Real-Time PCR with Reverse Transcribed cRNA

Isoform	Sensitivity (copies detected) at	
	50% Ramp Rate	25% Ramp Rate
ER $\beta$ 1 (Wild Type)	10 <sup>2</sup>	ND <sup>a</sup>
ER $\beta$ 2	10 <sup>2</sup>	ND
ER $\beta$ 4	10 <sup>2</sup>	ND
ER $\beta$ 5	10 <sup>2</sup>	ND
ER $\beta$ Exon 2 $\Delta$	10 <sup>2</sup>	ND
ER $\beta$ Exon 3 $\Delta$	10 <sup>3</sup>	10 <sup>2</sup>
ER $\beta$ Exon 4 $\Delta$	10 <sup>2</sup>	ND
ER $\beta$ Exon 5 $\Delta$	10 <sup>3</sup>	10 <sup>3</sup>
ER $\beta$ Exon 6 $\Delta$	10 <sup>3</sup>	10 <sup>2</sup>
ER $\beta$ Exon 5–6 $\Delta$	10 <sup>3</sup>	10 <sup>3</sup>

<sup>a</sup>ND, not determined.

and cell line suggesting that ER $\alpha$ -negative tumors could have estrogen signaling through ER $\beta$  isoforms. If proven by analysis of a large number of ER $\alpha$ -negative breast tumors, it could lead to a new line of ER $\beta$ -targeted therapies for ER $\alpha$ -negative patients. The results presented in Table 4 also indicate that every estrogen-responsive tissue has a unique composition in terms of types and quantities of ER $\beta$  isoforms. Variations in the ER $\beta$  isoform composition together with ER $\alpha$  isoform composition in these tissues, in part, could be the basis for tissue specific response to estrogens and SERMs.

The results presented in this report also demonstrate the high sensitivity, specificity, and efficacy of the developed assays in detecting and quantifying 10 ER $\beta$  isoforms as separate gene populations in picogram to nanogram amounts of total RNA in various target tissues. These assays

AMPLIFICATION PLOTS AND STANDARD CURVES FOR ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4 AND ER $\beta$ 5

**Fig. 4.** Sensitivity of detection of ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 sequences with their respective reverse-transcribed cRNA. Left Panel. Amplification plots. Various copy numbers of reverse transcribed ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 cRNA were amplified by real-time PCR at 50% ramp rate in ABI Prism 7900 HT Sequence Detection System as described in *Methods* section. The amplification plots generated by ABI Prism 7900 HT [PCR cycle number (*X*-axis) vs normalized reporter signal (*Y*-axis)] are shown. The instrument normalizes the changes in the reporter dye (FAM) signals to a passive reference dye signal during the course of the PCR run and plots the graphs. The panels show the plots and standard curves for ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5. The amplification plots shown from left to right in each panel were from  $10^9$ ,  $10^8$ ,  $10^7$ ,  $10^6$ ,  $10^5$ ,  $10^4$ ,  $10^3$ , and  $10^2$  copies, respectively. Right Panel. Standard plots. The standard plots generated by the instrument for the copy numbers in A are shown. The quantities of the reverse-transcribed cRNA (*X*-axis) vs the threshold cycles ( $C_T$ , the first cycle at which an above background fluorescent signal is measured) (*Y*-axis) are plotted. The panels show the standard graphs generated for ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5.

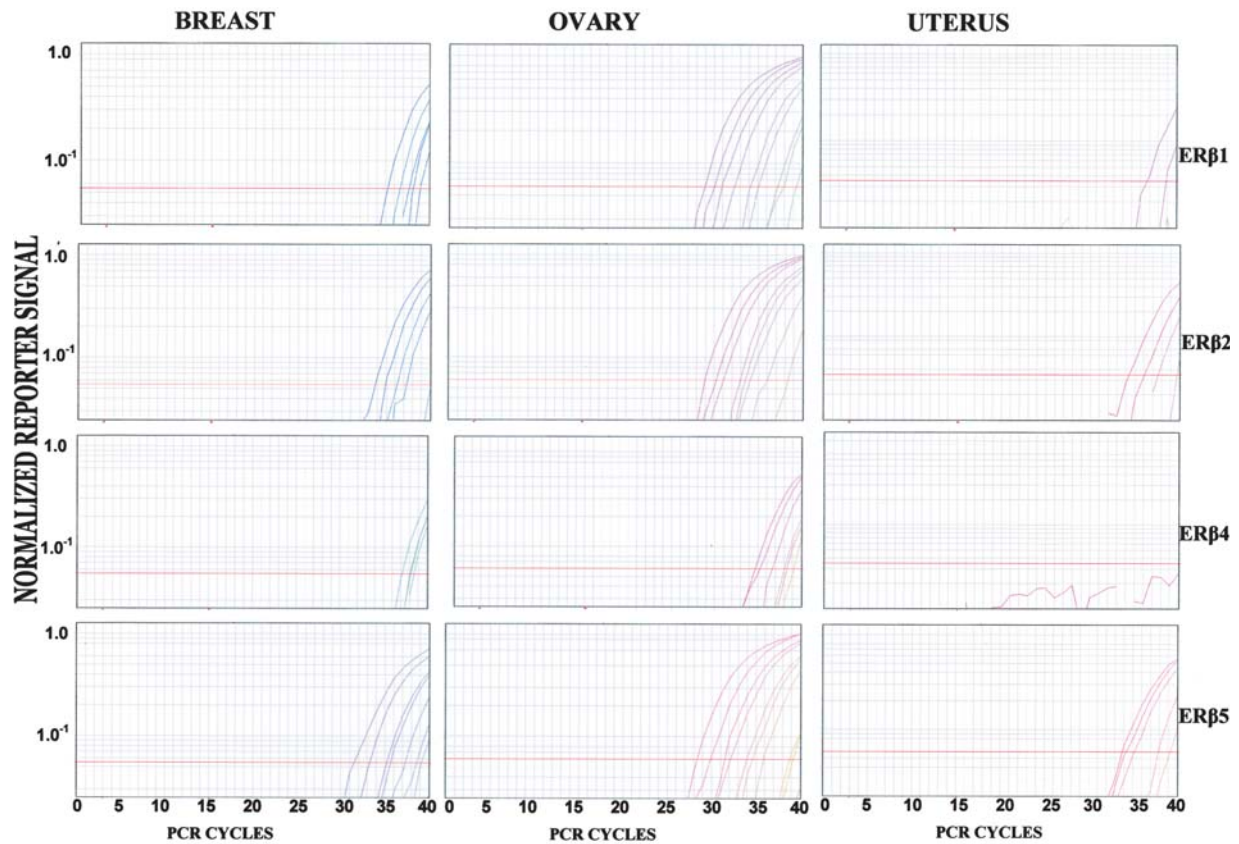
together with ER $\alpha$  isoform quantifying assays could be applied to profile and define the role of every ER isoform in estrogen-mediated signaling processes in a given tissue. It is also expected that profiling ER $\beta$  isoforms as well as ER $\alpha$  isoforms in different normal and pathological tissues may assist diagnostics and therapy of some diseases, as well as a search for factors causing this tissue-specific diversity and disease-related changes.

## Materials and Methods

Omniscript reverse transcriptase kits were from QIAGEN Inc., Santa Clara, CA. All the primers used in the current study were synthesized by Gibco-BRL Life Technologies. TaqMan Universal PCR Master Mix (cat no. 4304437), RNase inhibitor, and random hexamers were from Applied Biosystems. All the 5'FAM- and 3'TAMARA-labeled oligo-



### EXPRESSION OF FOUR ER BETA ISOFORMS IN BREAST OVARY AND UTERUS



**Fig. 5.** Sensitivity of detection of ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 in reverse-transcribed total RNA from ovary, breast, and uterus. To determine the minimum amount of cDNA from ovary, breast, and uterus that could be detected for the above sequences, 50 ng of reverse-transcribed total RNA from each tissue was serially double diluted and amplified by real-time PCR at 50% ramp rate in ABI Prism 7900 HT Sequence Detection System as described in methods section. The amplification plots generated by ABI Prism 7900 HT [PCR cycle number (*X*-axis) vs normalized reporter signal (*Y*-axis)] are shown. The instrument normalizes the changes in the reporter dye (FAM) signals to a passive reference dye signal during the course of the PCR run and plots the graphs. The amplification plots obtained with primers and probes of ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 from each tissue are shown. **Sensitivity of detection in breast.** Amplification plots from left to right in ER $\beta$ 1 panel were from dilutions, 1, 1:2, 1:4, 1:8, and 1:16, respectively; in ER $\beta$ 2 panel, the plots from left to right were from dilutions 1, 1:2, 1:4, 1:8, and 1:16, respectively; in ER $\beta$ 4 panel, the plots from left to right were from dilutions 1, 1:2, and 1:4, respectively; and in ER $\beta$ 5 panel, the plots from left to right were from dilutions 1, 1:2, 1:4, 1:8, 1:16, 1:32, and 1:64, respectively. **Sensitivity of detection in ovary.** Amplification plots from left to right in ER $\beta$ 1 panel were from dilutions, 1, 1:2, 1:4, 1:8, 1:16, 1:32, 1:64, 1:128, and 1:256, respectively; in ER $\beta$ 2 panel, the plots from left to right were from dilutions 1, 1:2, 1:4, 1:8, 1:16, 1:32, 1:64, and 1:128, respectively; in ER $\beta$ 4 panel, the plots from left to right were from dilutions 1, 1:2, 1:4, 1:8, 1:16, and 1:32, respectively; and in ER $\beta$ 5 panel, the plots from left to right were from dilutions 1, 1:2, 1:4, 1:8, 1:16, 1:32, 1:64, 1:128, and 1:256, respectively. **Sensitivity of detection in uterus.** Amplification plots from left to right in ER $\beta$ 1 panel were from dilutions, 1 and 1:2, respectively; in panel ER $\beta$ 2 panel, the plots from left to right were from dilutions 1, 1:2, 1:4, and 1:8, respectively; in ER $\beta$ 4 panel, no plots were seen; and in ER $\beta$ 5 panel, the plots from left to right were from dilutions 1, 1:2, 1:4, 1:8, and 1:16, respectively.

nucleotide probes described here were synthesized at Applied Biosystems. MEGAscript™ kit and DNasefree™ DNase were from Ambion. PCR quality water and Tris-EDTA buffer were from BioWhittaker. Total RNA from breast cancer cell lines and tumors, human ovary, uterus and bone tissues were available from previous studies (16,24–26). Normal breast tissue samples were collected from women undergoing reduction mammoplasty for cosmetic purposes at Howard University Hospital. Whole breast tissue obtained from reduction mammoplasty was used to isolate total RNA by Trizol method as described previously (16,26).

ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 isoform coding sequences, 773 bp, 763 bp, 775 bp, and 745 bp, respectively, were amplified from human ovary cDNA using a sense primer in exon 4, 5'CGGCAAGGCCAAGAGAAG3' (position, exon 4, bp 824–841) (27), and isoform-specific antisense primers in exon 8. The antisense primers for ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 were 5'AGCACGTGGGCATTCAGC3' [position exon 8, bp 1597–1580 (27)], 5'GTCACGTCTCCATCGT TGCT3' [position, exon 8, bp 1907–1887 (20), GenBank Accession No. AF05 1428], 5'GTCTGGGTTTATATCGT CTGCAA3' [position, bp 294–271 (20), GenBank Accession



**Table 3**  
Sensitivity of Detection of Ten ER $\beta$  Isoforms  
in Human Breast, Ovary, and Uterus by Real-Time PCR

Isoform	Sensitivity of Detection (ng of reverse-transcribed total RNA)		
	Breast	Ovary	Uterus
ER $\beta$ 1	3.125	0.19	25
ER $\beta$ 2	3.125	0.39	6.25
ER $\beta$ 4	12.5	1.56	ND <sup>a</sup>
ER $\beta$ 5	0.78	0.19	3.125
ER $\beta$ Exon2 $\Delta$	100	0.19	ND
ER $\beta$ Exon 3 $\Delta$	ND	100	ND
ER $\beta$ Exon 4 $\Delta$	12.5	0.39	6.25
ER $\beta$ Exon 5 $\Delta$	6.25	0.19	0.19
ER $\beta$ Exon 6 $\Delta$	6.25	0.19	6.25
ER $\beta$ Exon 5–6 $\Delta$	3.125	0.19	0.19

<sup>a</sup>ND, not detected.

**Table 4**  
ER $\beta$  Isoform Copies/10<sup>10</sup> Copies of GAPDH in Breast, Ovary, Uterus, and Bone Tissues by Real-Time PCR

Cell/ Tissue	ER $\beta$ 1				ER $\beta$	ER $\beta$	ER $\beta$	ER $\beta$	ER $\beta$	ER $\beta$
	Wild Type	ER $\beta$ 2	ER $\beta$ 4	ER $\beta$ 5	exon 2 $\Delta$	exon 3 $\Delta$	exon 4 $\Delta$	exon 5 $\Delta$	exon 6 $\Delta$	exon 5–6 $\Delta$
Breast	$5.8 \times 10^4$	$6.2 \times 10^4$	$3.3 \times 10^5$	$7.0 \times 10^6$	$3.3 \times 10^3$	0	$1.1 \times 10^6$	$2.3 \times 10^6$	$4.0 \times 10^4$	$6.2 \times 10^6$
Ovary	$3.6 \times 10^7$	$1.4 \times 10^7$	$1.3 \times 10^6$	$7.8 \times 10^7$	$9.6 \times 10^6$	$5 \times 10^5$	$2.0 \times 10^6$	$2 \times 10^7$	$3.7 \times 10^6$	$7.9 \times 10^6$
Uterus	$1.4 \times 10^5$	$4.0 \times 10^4$	0	$3.2 \times 10^7$	$3.5 \times 10^4$	0	$1.2 \times 10^6$	$1.5 \times 10^7$	$3.5 \times 10^4$	$8.5 \times 10^7$
Bone	0	$1.1 \times 10^3$	0	$1.7 \times 10^5$	0	0	0	0	0	$7.6 \times 10^3$
MCF-7	$8.5 \times 10^4$	$1.1 \times 10^5$	0	$2.8 \times 10^5$	$4.2 \times 10^3$	0	$3.5 \times 10^6$	$5.7 \times 10^5$	0	$5.7 \times 10^4$
MDA- MB-231	$1.2 \times 10^4$	$1.8 \times 10^4$	0	$2.0 \times 10^5$	$2.0 \times 10^3$	0	0	$6.0 \times 10^4$	0	$1.5 \times 10^4$
ER $\alpha$ + Breast Tumor	$9.6 \times 10^4$	$1.68 \times 10^4$	0	$2.4 \times 10^6$	$6.4 \times 10^5$	0	0	$1.4 \times 10^6$	0	$5.0 \times 10^6$
ER $\alpha$ – Breast Tumor	$1.8 \times 10^5$	$8.0 \times 10^4$	0	$2.0 \times 10^5$	$1.4 \times 10^4$	0	$1.3 \times 10^6$	$1.8 \times 10^6$	$3.5 \times 10^4$	$6.0 \times 10^6$

No. AF06 1054], and 5'CACTTTTCCCAAATCACTTC ACC3' [position, bp 265–243 (20), GenBank Accession No. AF06 1055], respectively. The above products were cloned into pCR<sup>®</sup>2.1-TOPO plasmid and their identities confirmed by sequence analysis as described previously (28). ER $\beta$ 3 specific antisense primer, 5'CAGGCCTCAAAGATCTGCTTC3' [position, exon 8, 1972–1993 (20), GenBank Accession No. AF060555] was used to amplify its coding sequence, but it was found this isoform was not expressed in ovary, breast, uterus, or bone tissues confirming an earlier report (20). ER $\beta$  exon 2 $\Delta$ , 3 $\Delta$ , 4 $\Delta$ , 5 $\Delta$ , 6 $\Delta$ , and 5–6 $\Delta$  splice variant coding sequences, 915 bp, 796 bp, 494 bp, 632 bp, 772 bp, and 633 bp, respectively, were cloned into pCR<sup>®</sup>2.1-TOPO plasmids and were available from previous studies (24).

**Preparation of Complementary RNAs (cRNAs)  
Using ER $\beta$  Isoform Coding Sequences Cloned  
into pCR<sup>®</sup>2.1-TOPO Plasmids as Templates**

Absolute quantification of every ER $\beta$  isoform transcript copy number was achieved by comparison with a standard graph constructed using known copy numbers of cDNA of that particular ER $\beta$  isoform. Because reverse-transcribed tissue RNA is used for quantifications, the standard graph was also constructed with reverse-transcribed known copy numbers of cRNA. Complementary RNAs for eight ER $\beta$  isoforms were generated by in vitro transcription using plasmids containing their respective nucleotide sequences as templates. The cRNAs for each ER $\beta$  isoform were generated in the following steps: First, the pCR<sup>®</sup>2.1-TOPO vec-

tor containing the coding nucleotide sequences of ER $\beta$  isoforms were linearized by digesting with *Bam*HI, extracted with phenol-chloroform, and precipitated with isopropanol. Second, the cRNA for each ER $\beta$  isoform was generated by in vitro transcription of 1–2  $\mu$ g of the linearized plasmids using T7 RNA polymerase and other reagents supplied in the Ambion MEGAscript™ kit and following the manufacturer's protocol. Briefly, the transcription reaction mixture (20  $\mu$ L) contained 1  $\mu$ g of linearized ER $\beta$  isoform pCR<sup>®</sup>2.1-TOPO, 2  $\mu$ L of 10X buffer, 2  $\mu$ L each of 75 mM NTPs, and 2  $\mu$ L of T7 RNA polymerase. The reaction mixture was incubated at 37°C for 2–4 h. This generally produced 20–50  $\mu$ g of cRNA. The cRNAs produced by this procedure were extracted with phenol-chloroform and precipitated with isopropanol to remove the T7 RNA polymerase and free unincorporated nucleotides and buffer salts. Third, the template plasmids from the in vitro transcribed cRNAs were removed by digestion with DNA-free™ DNase. The added enzyme and the released nucleotides were removed by phenol-chloroform extraction, followed by precipitation with isopropanol. This procedure generally produced cRNAs devoid of any template plasmids as shown by conventional PCR in the absence of reverse transcription. The cRNA generated by the above procedure was quantified by measuring the optical density of the solution at 260 nm and the molarity was calculated based on the size (molecular weight) of the cRNA.

#### **Reverse Transcription and Conventional PCR**

The in vitro transcribed cRNAs and total RNAs from tissues/cell lines were reverse-transcribed using Omniscript reverse transcriptase as previously described (16,24,25,29). Briefly, the cRNA/total RNA was denatured by heating for 3 min at 65°C, cooled on ice, and incubated with reverse-transcriptase reaction mixture. The standard mixture contained 1  $\mu$ g of total RNA, 10 U of RNase inhibitor, 0.5 mM each of dNTPs, 1  $\mu$ M random hexamers, and 4 U of Omniscript reverse transcriptase in a total volume of 20  $\mu$ L. For reverse transcription, tubes were incubated at 42°C for 60 min, followed by 95°C for 5 min, and finally rapidly cooled. Conventional polymerase chain reactions were performed in an automatic thermal cycler (MJ Research) as previously described (30,31) in a total volume of 12.5  $\mu$ L containing the cDNA reverse transcribed from 125 ng of tissue total RNA/cRNA, 1X PCR buffer, 1X Q solution, 200  $\mu$ M each of dNTPs, 2  $\mu$ M each of sense and antisense primers, and 0.6 U of HotStartTaq polymerase. The PCR conditions were initial denaturation for 1 min at 95°C, followed by 94°C for 1 min, annealing for 1 min at the specified temperature depending on the primer pair used, extension for 2 min at 72°C for 40 cycles, and final extension for 15 min at 72°C. The annealing temperature for amplification of all the transcripts except exons 5–6 $\Delta$  was 55°C. For exons 5–6 $\Delta$ , the annealing temperature was 61°C (24).

#### **Primers and Probes for Quantification of ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 and ER $\beta$ Exon 2 $\Delta$ , 3 $\Delta$ , 4 $\Delta$ , 5 $\Delta$ , 6 $\Delta$ , and 5–6 $\Delta$ Isoforms by Real-Time PCR**

The primer pairs and probes for the quantification of ER $\beta$ 1, ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 and splice variant cDNAs by real-time PCR are listed in Table 1. The numbering of bp positions of ER $\beta$ 1 and splice variants was based on cDNA sequence published by Ogawa and others (27), and ER $\beta$ 2, ER $\beta$ 4, and ER $\beta$ 5 was by Moore et al. (20). The design, specificity, and applicability of splice targeted primers for the amplification of alternatively spliced ER sequences as separate gene populations have been established in a number of previous studies (16,24,25,28,29,31,32). The specificity of each primer pair was verified by conventional PCR using their respective reverse-transcribed cRNAs and cDNA prepared from human ovary.

#### **Absolute Quantification of 10 ER $\beta$ Isoform Transcript Copy Numbers by Real-Time PCR**

Absolute quantification of ER $\beta$  isoform transcript copy numbers was achieved by quantitative real-time PCR in ABI Prism GeneAmp 7900HT Sequence Detection System at a modified 50% ramp rate or at 25% ramp rate as indicated. A typical real-time PCR reaction mixture contained cDNA prepared from reverse transcription of varying amounts of tissue/cell line total RNA/cRNA, 0.04  $\mu$ M each of sense and antisense primers, 0.05  $\mu$ M 5'FAM- and 3'TAMARA-labeled oligonucleotide probe, and 1X TaqMan Universal PCR Mix in a total volume of 25  $\mu$ L. The PCR conditions were initial hold at 50°C for 2 min, followed by denaturation for 10 min at 95°C, and denaturation for 15 s at 95°C in the subsequent cycles and annealing and extension for 1.5 min at 60°C for 40 cycles. An additional step of annealing at 55°C for 15 s was added before the amplification step at 60°C whenever the assay was conducted at 25% ramp rate. A standard graph for every ER $\beta$  isoform was simultaneously generated using 10<sup>2</sup>, 10<sup>3</sup>, 10<sup>4</sup>, 10<sup>5</sup>, 10<sup>6</sup>, 10<sup>7</sup>, 10<sup>8</sup>, and 10<sup>9</sup> copies of its reverse-transcribed cRNA. The tissue/cell line cDNAs, reverse-transcribed cRNAs, primers, and probe were diluted on ice to the required concentration immediately prior to conducting PCRs. All the samples were amplified in triplicate and real-time PCRs were repeated four times for every isoform. GAPDH copy numbers were determined using a sense primer, 5'TTCCAGG AGCGAG ATCCCT3' (position, bp 304–322), an antisense primer, 5'GGCTGTTGTCATACTTCTCATGG3' (position, bp 483–505) and a probe, FAM 5'TGCTGGCGCTGAGTACGTCGTG3' TAMARA (position, bp 342–363) in a given amount of cDNA.

#### **Detection and Identification of PCR Products**

The ER $\beta$  products (3.0  $\mu$ L) generated by conventional PCR procedures were separated by electrophoresis in 1% Nu Sieve agarose gels in Tris-acetic acid- EDTA buffer and

detected by ethidium bromide staining. PCR products were purified by gel extraction, cloned into pCR<sup>®</sup>2.1-TOPO vector, and identified by sequence analysis as described previously (28).

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### Abbreviations

FAM, carboxy-fluorescein; TAMARA, 6-carboxy tetraethyl-rhodamine; GAPDH, glyceraldehyde-3 phosphate dehydrogenase; ER $\alpha$ , estrogen receptor alpha; exon  $\Delta$ , exon deletion; ER $\beta$ , estrogen receptor beta, SERMs, selective estrogen receptor modulators.

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