

CANCER

Metabolic traits shape responses to LSD1-directed therapy in glioblastoma tumor-initiating cells

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Lysine-specific histone demethylase 1A (LSD1) is an epigenetic regulator involved in various biological processes, including metabolic pathways. We demonstrated the therapeutic potential of its pharmacological inhibition in glioblastoma using DDP_38003 (LSD1i), which selectively targets tumor-initiating cells (TICs) by hampering their adaptability to stress. Through biological, metabolic, and omic approaches, we now show that LSD1i acts as an endoplasmic reticulum (ER) stressor, activating the integrated stress response and altering mitochondrial structure and function. These effects impair TICs' oxidative metabolism and generate reactive oxygen species, further amplifying cellular stress. LSD1i also impairs TICs' glycolytic activity, causing their metabolic decline. TICs with enhanced glycolysis benefit from LSD1-directed therapy. Conversely, metabolically silent TICs maintain ER and mitochondrial homeostasis, adapting to stress conditions, including LSD1i treatment. A dropout short hairpin RNA screening identifies postglycosylphosphatidylinositol attachment to proteins inositol deacylase 1 (PGAP1) as a mediator of resistance to LSD1i. Disruptions in ER and mitochondrial balance holds promise for improving LSD1-targeted therapy efficacy and overcoming treatment resistance.

INTRODUCTION

Glioblastoma (grade 4 glioma; GBM) is a highly aggressive and heterogeneous tumor of the central nervous system, posing a serious challenge for both patients and health care systems (1). Despite decades of research advancements and evolving clinical practices, GBM remains incurable. The current standard of care, consisting of surgery followed by chemoradiotherapy with temozolomide (TMZ), has only modest improved survival rates and time to relapse (2).

GBM aggressiveness is driven by extensive intertumoral and intratumoral heterogeneity, with distinct molecular and cellular phenotypes continuously evolving in response to treatment. In this complex context, tumor-initiating cells (TICs) within each tumor have been identified as key drivers of GBM onset and growth, treatment resistance, and intratumoral heterogeneity (3). Single-cell approaches highlighted that each tumor is a composite system in which the conversion between TICs and non-TICs is dynamic and TICs themselves are in continuous evolution (4). TICs shift between

different cellular states, each with distinct molecular profiles and functional properties that vary spatially and temporally within individual tumors. Their plasticity is closely linked to their metabolic behaviors, which dictate their adaptation to contextual microenvironmental stresses and drug cues, allowing their survival under energetically unfavorable conditions (5–8).

Recent studies highlighted the metabolic heterogeneity of GBM TICs, with different GBM subtypes showing distinct metabolic preferences (9). Some TICs manifest a quiescent, slow-cycling phenotype characterized by lower glycolytic activity, reduced extracellular acidification rate, and decreased oxygen consumption (10). TICs defined as proneural rely on glycolysis, recalling the Warburg effect observed in bulk GBM cells (11), while mesenchymal TICs can switch between glycolysis and oxidative phosphorylation (OXPHOS), depending on microenvironmental signals and metabolic demands (12). They can exploit alternative nutrient resources such as glutamine (13), fatty acid (14), and fructose (15), demonstrating remarkable metabolic flexibility.

In GBM, the interplay between metabolism and epigenetics contributes to metabolic rewiring and alterations in histone/DNA modifications (16) that ultimately affect the molecular classification of the tumor. As a consequence, the targeting of epigenetic regulators is widely investigated in clinical trials (17–19). We have recently demonstrated that the pharmacological inhibition of lysine-specific histone demethylase 1A (LSD1) with the selective LSD1 inhibitor DDP_38003 (hereafter LSD1i) (20) synergizes with various stressors to trigger a maladaptive integrated stress response (ISR), leading to the death of stressed TICs, thus highlighting LSD1 as a relevant therapeutic target in human GBM (21). In addition, LSD1 affects diverse metabolic processes such as glycolysis, mitochondrial function, and lipid metabolism in different cellular contexts (22–27).

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In this study, we demonstrate that LSD1i functions itself as an endoplasmic reticulum (ER)–stress agent, which induces perturbations of calcium (Ca^{2+}) homeostasis and redox imbalance, and prompts structural and functional dysfunctions in mitochondria that affect TIC metabolism. LSD1i-directed therapy is only effective in a subset of GBM TICs, specifically those with elevated glycolytic activity. LSD1i-resistant TICs, which exhibit a silent metabolic phenotype (28), are also less susceptible to the metabolic and stress challenges posed by known ER stressors such as thapsigargin (Tg) and tunicamycin (TU). They can preserve mitochondria and ER homeostasis, which likely enables them to adapt to changes of the tumor microenvironment. Consequently, both the pivotal role of LSD1 in orchestrating energy flow and metabolic adaptation in GBM TICs, along with the various metabolic characteristics of GBM TICs that are associated with either therapeutic response or resistance to LSD1i, lay the foundation for identifying metabolic pathways as suitable candidate targets for therapeutic intervention.

RESULTS

LSD1i treatment induces ISR and mitochondrial perturbations in GBM TICs

We previously demonstrated that LSD1 is a crucial regulator of GBM TIC survival, adaptation, and recovery from stress, and its pharmacological inhibition via the irreversible molecule LSD1i (20) hampers the activation of the ISR, which leads to the death of TICs exposed to ER stress or nutrient deficiency (21). Here, we provide evidence that LSD1i triggers the ISR by itself. Western blot analysis of activating transcription factor 4 (ATF4), the master regulator of the ISR (29), revealed its accumulation in GBM TICs isolated from different patients (GBM#22 and GBM#7) exposed to LSD1i (Fig. 1A). Notably, ATF4 induction occurred independently of phosphorylation of eIF2 α (Fig. 1A). Accordingly, in LSD1i-treated TICs from different patients with GBM (GBM#22, GBM#7, GBM#10, and GBM#18), we measured increased formation of stress granules—cytosolic membraneless bodies accumulating in the cytoplasm as a direct outcome of ISR induction (Fig. 1B and fig. S1A) (30). G3BP1 and its paralogs are members of Ras–guanosine triphosphatase–activating protein (Src homology 3 domain)–binding proteins and are known to take part in stress granule assembly upon activation of stress response programs such as the ISR.

A substantial body of literature emphasizes the link between the induction of ISR and mitochondrial dysfunction, as well as the specific activation of ATF4 signaling through the ISR in response to mitochondrial stress (31–34). Building on these notions and considering the ability of LSD1i to induce an ISR (Fig. 1, A and B), we investigated whether LSD1i treatment could affect the physiology of TIC mitochondria. While vehicle-treated GBM TICs exhibited mitochondria with a tubular and network-like shape, which is typical of healthy organelles, mitochondria in LSD1i-treated cells significantly lost the branched organization, acquiring a round shape (Fig. 1C and fig. S1B). The remodeling of mitochondrial network was associated with effects on several mitochondrial parameters. We measured a hyperpolarized mitochondrial membrane potential ($\Delta\Psi\text{m}$) (Fig. 1D and fig. S1C) and a significant increase in the mitochondrial redox ratio (Fig. 1E and fig. S1D) upon LSD1i treatment, with no concurrent alteration in mitochondrial mass (Fig. 1F and fig. S1E). Notably, these are recognized as signs of distress, often interconnected and occurring in apoptotic cells (35–38), and are

associated with compromised mitochondrial functionality (39–41). A detailed examination of mitochondrial respiration revealed a significant reduction in both basal and maximal levels of the oxygen consumption rate (OCR) in LSD1i-treated GBM TICs, along with a decrease in spare respiratory capacity. Nonmitochondrial respiration showed no significant changes (Fig. 1G and fig. S1F). LSD1i treatment also affected the glycolytic activity with GBM TICs exhibiting a decreased basal and compensatory glycolysis, as indicated by measurements from the glycolytic rate assay (Fig. 1H and fig. S1G) and the extracellular acidification rate (ECAR) determined using the mitostress test (fig. S1, H and I). The bioenergetic profile graph demonstrated that treated TICs were unable to enhance glycolysis efficiently to compensate for mitochondrial damage induced by LSD1i (Fig. 1I). This led to a decline in adenosine 5'-triphosphate (ATP) production from both OXPHOS and glycolysis (Fig. 1J and fig. S1J). Consistent with these data, gene set enrichment analysis (GSEA) based on transcriptional changes induced by LSD1i treatment and genes associated with mitochondrial pathways from MitoCarta database (42) revealed a global reduction in categories related to mitochondrial structure and trafficking, as well as the metabolism of energy-related products (carbohydrate, nucleotide, and amino acids) (Fig. 1K).

Overall, these results reveal that LSD1i induces mitochondrial dysfunctions disrupting energy pathways (both glycolysis and mitochondrial respiration), which ultimately leads to the death of GBM TICs, as previously described (21). This aligns with the notable association between LSD1 expression and genes related to glycolysis and OXPHOS in GBM samples from two independent cohorts, the Chinese Glioma Genome Atlas (CGGA) and Gravendeel dataset (Fig. 1L) (43), and reflects LSD1's role in regulating various metabolic processes, including glycolysis and mitochondrial function (22, 25).

LSD1i increases functional ER-mitochondrial coupling

Stress conditions such as ER stress, nutrient deprivation, oxidative stress, or metabolic dysregulation can disrupt the physical communication and function between mitochondria and the ER, leading to metabolic dysfunction (44, 45). In line with these observations, treating GBM TICs with Tg, a known ER stress inducer (46), caused mitochondria to become rounded in shape (fig. S2A), increased their membrane potential (fig. S2B), and enhanced their physical contacts with ER, as indicated by the extent of the length covered by mitochondria–ER contact sites (MERCs) (fig. S2C). Similarly, electron microscopy (EM) analysis of LSD1i-treated TICs revealed a significant increase in MERC length (Fig. 2A). This increased physical coupling significantly altered intracellular Ca^{2+} homeostasis (Fig. 2B) and increased the levels of both mitofusin 1 (MFN1) and MFN2, key proteins that mediate mitochondrial morphology and link the ER and mitochondria (Fig. 2C). Together, these data indicate that stress signals originating from LSD1i mirror those caused by Tg (fig. S2D), compromising mitochondrial function (Fig. 1).

Interpatient heterogeneity reveals TICs resistant to LSD1i treatment

LSD1i has broad therapeutic potential for treating GBM TICs with diverse molecular profiles (21). One of the major challenges in developing effective therapeutic interventions is the heterogeneity in treatment responses observed in GBMs (8). LSD1i has a median effective concentration (EC_{50}) value of 2.5 μM in GBM TICs (21), which aligns with its specificity for LSD1 (20). By transplanting

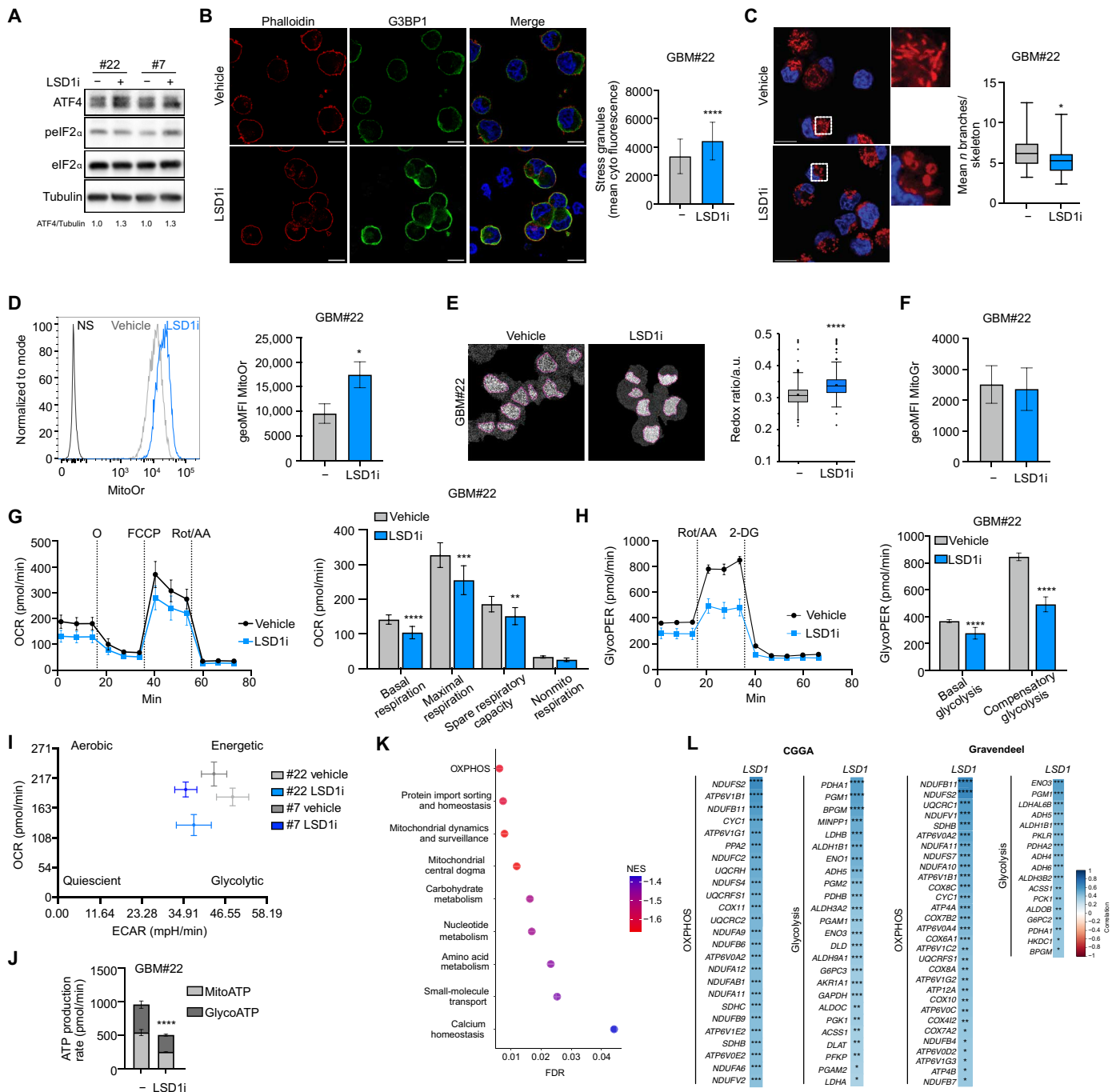


Fig. 1. LSD1i treatment induces ISR and mitochondrial perturbations in GBM TICs. (A) Representative immunoblot of ATF4, pElF2 α , eIF2 α and tubulin after LSD1i, normalized to untreated TICs ($n = 3$). (B) Representative images (left) and quantification (right) of G3BP1 stress granules (green), actin (red), and DNA (blue). Scale bars, 10 μm (vehicle, $n = 4509$ cells; LSD1i, $n = 2916$ cells; means \pm SD). (C) Representative images of mitochondrial structure (left). Enlarged highlighted areas (dashed boxes) are shown. Mitochondrial fragmentation quantification (right). Scale bars, 10 μm . ($n = 3$; means \pm SD). (D) Representative histograms (left) and quantification (right) of $\Delta\Psi\text{m}$ (MitoOr, mitotracker orange) ($n = 7$; means \pm SEM). NS, not stained; geoMFI, geometric mean fluorescence intensity. (E) Representative images (left) and quantification (right) of redox ratio (vehicle, $n = 155$ cells; LSD1i, $n = 297$ cells; means \pm SD). a.u., arbitrary units. (F) Mitochondrial mass quantification (MitoGr, mitotracker green) ($n = 5$; means \pm SEM). (G) OCR kinetic graph (left); addition of oligomycin (O), carbonyl cyanide *p*-trifluoromethoxyphenylhydrazone (FCCP), and rotenone plus antimycin A (Rot/AA) is indicated. Respiration parameter quantification (right) ($n = 3$; means \pm SD). (H) Glycolytic proton efflux rate (glycoPER) kinetic graph (left); addition of Rot/AA and 2-deoxyglucose (2-DG) is indicated. Basal and compensatory glycolysis quantification (right) ($n = 3$; means \pm SD). (I) Energy map plotting OCR and ECAR obtained in (G) and fig. S1H. (J) Mitochondrial ATP (mitoATP) and glycolytic ATP (glycoATP) production rate ($n = 3$ replicates per group; means \pm SD). (K) GSEA analysis of mitochondrial pathways post-LSD1i treatment. (L) Heatmap correlating LSD1 with OXPHOS and glycolysis genes in GBM datasets. Top 25 correlated genes of the OXPHOS signature are shown. **** $P_{\text{adj}} = 0$; *** $P_{\text{adj}} < 0.001$; ** $P_{\text{adj}} < 0.01$; * $P_{\text{adj}} < 0.05$. Two-tailed unpaired Student's *t* test, * $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$; **** $P < 0.0001$ for (D), (F) to (H), and (J). Mann-Whitney *U* test, * $P < 0.05$; **** $P < 0.0001$ for (B), (C), and (E).

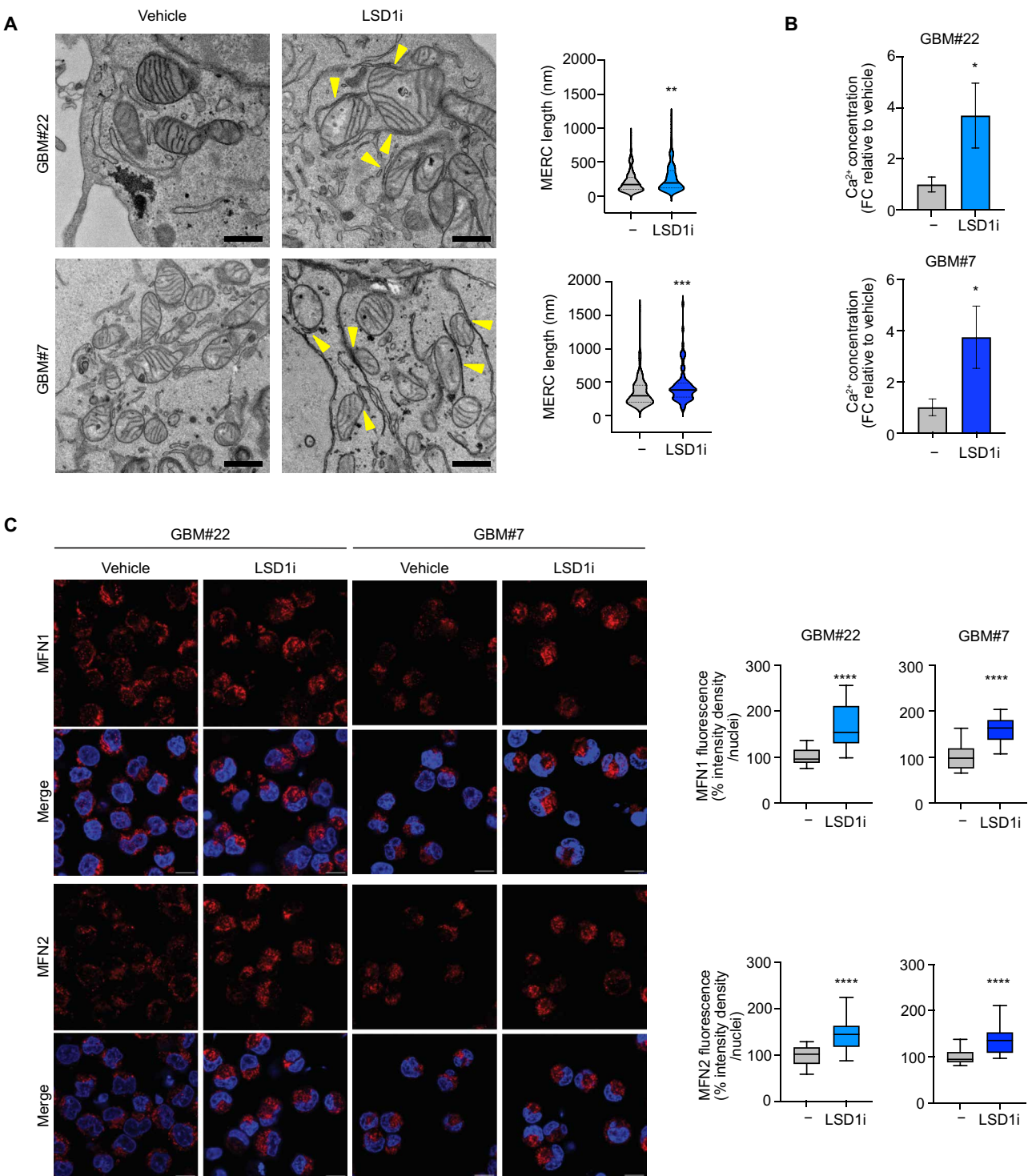


Fig. 2. LSD1i increases functional ER-mitochondrial coupling. (A) Representative transmission EM (TEM) images of mitochondria and ER in GBM#22 and GBM#7 TICs after LSD1i. Yellow arrowheads indicate MERCs. Scale bars, 500 nm ($n = 20$ cells for each condition; means \pm SD). The quantification of MERC length with and without LSD1i treatment is shown. (B) Measurements of Ca²⁺ concentration by Rhod-2 fluorescence signal quantification in GBM#22 and GBM#7 TICs following LSD1i treatment ($n = 3$; means \pm SD). (C) Representative confocal images (left) and quantification (right) of MFN1 and MFN2 (red) in GBM#22 and GBM#7 TICs after LSD1i treatment, with 4',6-diamidino-2-phenylindole (DAPI) (blue) as a nuclear stain. Cell counts for each condition: GBM#22 ($n = 3$; means \pm SD). Two-tailed unpaired Student's *t* test, * $P < 0.05$ for (B); Mann-Whitney *U* test, ** $P < 0.01$; *** $P < 0.001$; **** $P < 0.0001$ for (A) and (C).

LSD1i-treated GBM TICs into zebrafish larvae, a powerful model for assessing drug sensitivity and in vivo outcomes (47), we demonstrated that, in addition to samples sensitive to LSD1i-directed therapy (hereafter referred to as LSD1i^{Sens} TICs), a subset of patient-derived TICs displayed resistance to LSD1i (referred to as LSD1i^{Res} TICs). LSD1i treatment of LSD1i^{Sens} TICs resulted in significantly smaller tumors in zebrafish xenografts (Fig. 3A), while treatment of LSD1i^{Res} TICs did not affect tumor volume, even at higher LSD1i concentrations (Fig. 3B). In line with these results, we previously demonstrated that LSD1i-directed therapy reduced tumor growth in mouse patient-derived xenografts (PDXs) from samples now categorized as LSD1i^{Sens} TICs (21). LSD1i exerted no effect on mouse PDXs transplanted with LSD1i^{Res} TICs, as no differences were observed in tumor growth (Fig. 3C) and mouse survival (Fig. 3D) in the representative LSD1i^{Res} GBM#23 PDX. Notably, LSD1i administration markedly increased the levels of H3K4me1 and H3K4me2 histone marks in the brains of GBM PDXs demonstrating its on-target effect (Fig. 3E). The immunocompetent GL261 GBM model (48) was also resistant to LSD1i treatment: Tumors grew to a similar extent in both control and LSD1i-treated mice without a survival benefit (fig. S3A).

On the basis of the responses in the two xenograft models, we further assessed the cellular phenotypes of LSD1i^{Res} TICs in vitro. We observed no changes in proliferation, even upon prolonged exposure to increasing doses of LSD1i (Fig. 3F and fig. S3B), cell death (Fig. 3G and fig. S3C), and self-renewal (Fig. 3H and fig. S3D). Among doses higher than the EC₅₀ and beyond the compound's specificity range (20), only 10 μM inhibited TIC growth. Accordingly, TICs resistant to LSD1i maintained healthy and functional mitochondria upon LSD1i treatment. We measured no alterations in mitochondrial structure (Fig. 3I and fig. S3E), membrane potential (Fig. 3J and fig. S3F), and redox status (Fig. 3K and fig. S3G) in LSD1i-treated cells, the latter indicating the lack of significant reactive oxygen species (ROS) changes in these samples. Similarly, there were no changes in MERCs (Fig. 3L and fig. S3H) and Ca²⁺ concentrations (Fig. 3M and fig. S3I).

Resistance to LSD1-directed therapy occurred in TIC from various patients with GBM regardless of their genetic alteration status (table S1). Notably, the effects of *LSD1* genetic silencing in LSD1i^{Res} TICs extended beyond those of LSD1 pharmacological targeting, resulting in significant impairment in TIC growth (fig. S3J) and self-renewal (fig. S3K), and a pronounced reduction in tumor size in zebrafish xenografts (fig. S3L).

LSD1i^{Sens} and LSD1i^{Res} TICs display different metabolic features

To gain insights into the molecular mechanisms underlying the sensitivity or resistance to LSD1i and having excluded gene/pathway mutation peculiarities as determinants of LSD1i response (21) (table S1), we next compared the transcriptomic (Fig. 4A) and proteomic (Fig. 4B) profiles from a panel of LSD1i^{Sens} TICs ($n = 5$) and LSD1i^{Res} TICs ($n = 5$). Compared to LSD1i^{Res} TICs, LSD1i^{Sens} TICs exhibited a significant enrichment in stress-related signatures (Fig. 4, A and B), including unfolded protein response (UPR), hypoxia and ROS signaling, heat shock, and the heat stress responses, as well as the activation of type I interferons, tumor necrosis factor- α (TNF- α), transforming growth factor- β (TGF- β), and the nuclear factor κ B (NF- κ B) pathways, and apoptosis (Fig. 4A). Notably, the specific expression of these different pathways aligns with the aforementioned results reporting the major susceptibility of LSD1i^{Sens}

TICs to perceive the stress imposed by LSD1i or by Tg. LSD1i^{Sens} TICs were also sustained by glycolysis and OXPHOS (Fig. 4A). Likewise, the activation of proliferation-related pathways (E2F and MYC) and mechanistic target of rapamycin complex 1 (MTORC1) pathway in samples sensitive to LSD1i well associates with their high rate of glycolysis, as indicated also in other cancer types (49, 50). Notably, resistant TICs showed no enrichment in either stress response pathways or metabolic pathways, underscoring the differences in the metabolic phenotypes of these samples (fig. S4, A and B). We next assessed glycolysis and respiratory function in representative LSD1i^{Sens} TICs (GBM#22 and GBM#7) and LSD1i^{Res} TICs (GBM#23 and GBM#25) using Seahorse flux analyzer. LSD1i^{Sens} TICs exhibited increased glycolysis compared to LSD1i^{Res} TICs, both at the basal state and after the injection of mitochondrial inhibitors (Fig. 4C and fig. S4C). We did not find any difference in basal, maximal OCR, spare respiratory capacity, ATP production, and nonmitochondrial respiration among sensitive and resistant samples (fig. S4D). In accordance with the increased glycolytic activity, LSD1i^{Sens} TICs had a higher glucose uptake capacity (Fig. 4D) and notable increased expression of key glycolytic enzymes, including hexokinases (HKI and HKII), pyruvate kinase isozyme M2 (PKM2), phosphofructokinase platelet (PFKP), glyceraldehyde-3-phosphate dehydrogenase (GAPDH), and lactate dehydrogenase A (LDHA) (Fig. 4E). Hexokinase, which performs a key irreversible step in glycolysis, demonstrated a higher activity in sensitive samples (Fig. 4F). To further validate the differential reliance on glycolysis, we cultured TICs under different glucose concentrations. LSD1i^{Sens} TICs displayed reduced growth in both low-glucose (1 g/liter) and glucose-free media (Fig. 4G). In contrast, the growth of LSD1i^{Res} TICs was diminished only by glucose withdrawal and to a lesser extent than that of LSD1i^{Sens} cells (Fig. 4G). Similarly, LSD1i^{Sens} TICs were more sensitive to inhibition of glycolysis using 2-deoxyglucose (2-DG), an inhibitor of hexokinase (51), than resistant ones (Fig. 4H).

Collectively, these findings underline the existence of different metabolic phenotypes and adaptive responses between LSD1i^{Sens} and LSD1i^{Res} TICs. LSD1i^{Sens} TICs display enhanced glycolytic activity and increased expression of glycolysis-related genes. In contrast, LSD1i^{Res} TICs show lower glycolytic activity compared to LSD1i^{Sens} cells but have a similar OCR, without evidence for other specifically activated metabolic pathways indicative of a silent metabolic phenotype (28). They retain mitochondrial dynamics and function, likely suggesting a greater dependence on mitochondrial function. Consistent with this, the comparison between the transcriptomic profiles of samples resistant to LSD1i and the metabolism-associated GBM subtypes (5) revealed that LSD1i-resistant cells are associated with the mitochondrial subtype of GBMs (fig. S4E). This enables LSD1i^{Res} TICs to preserve their growth under conditions that are challenging for LSD1i^{Sens} cells, including LSD1i treatment, glucose deprivation, and inhibition of glycolysis.

LSD1i^{Res} TICs maintain mitochondrial integrity to better cope with ER stress

We previously demonstrated that Tg treatment alters mitochondrial structure and function in LSD1i^{Sens} TICs similarly to LSD1i, suggesting a shared cellular response among these stressors. On the basis of these results, we measured the downstream consequences of ER stress exposure in LSD1i^{Res} TICs to assess their ability to handle stressful cues other than LSD1i. Both mitochondrial morphology (Fig. 5A) and $\Delta\Psi$ m (Fig. 5B) were retained in LSD1i^{Res} TICs under

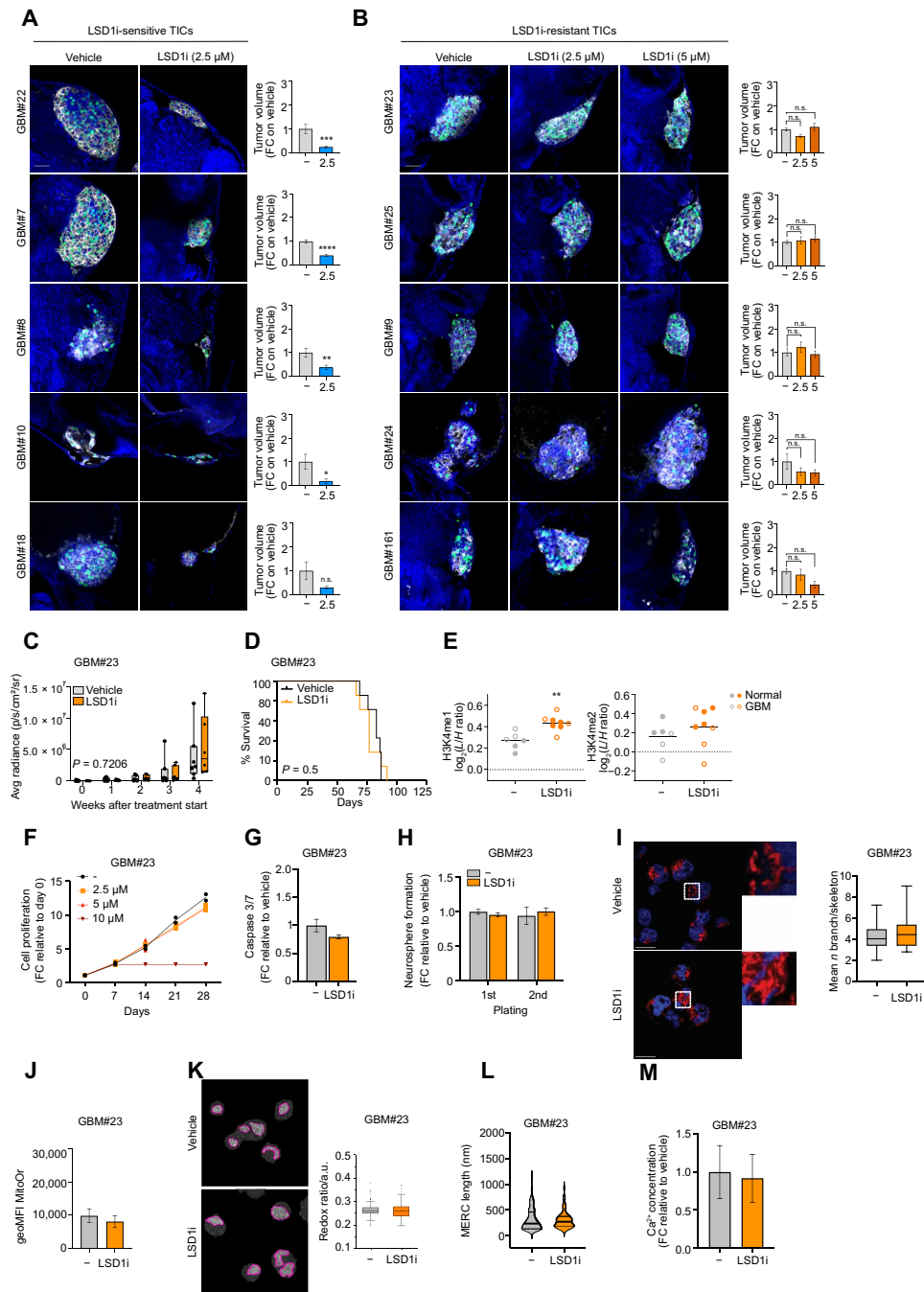


Fig. 3. Interpatient heterogeneity reveals TICs resistant to LSD1i treatment. (A and B) Representative embryonic zebrafish xenotransplanted with LSD1i-treated (A) LSD1i^{Sens} and (B) LSD1i^{Res} TICs. Tumor volume was quantified. Scale bar, 50 μ m (GBM#22: vehicle, $n = 7$ larvae; LSD1i, $n = 9$; GBM#7: vehicle, $n = 10$; LSD1i, $n = 10$; GBM#8: vehicle, $n = 9$; LSD1i, $n = 11$; GBM#10: vehicle, $n = 8$; LSD1i, $n = 6$; GBM#18: vehicle, $n = 8$; LSD1i, $n = 8$; GBM#23: vehicle, $n = 10$; LSD1i_2.5 μ M, $n = 9$; LSD1i_5 μ M, $n = 9$; GBM#25: vehicle, $n = 9$; LSD1i_2.5 μ M, $n = 4$; LSD1i_5 μ M, $n = 10$; GBM#9: vehicle, $n = 10$; LSD1i_2.5 μ M, $n = 9$; LSD1i_5 μ M, $n = 8$; GBM#24: vehicle, $n = 5$; LSD1i_2.5 μ M, $n = 6$; LSD1i_5 μ M, $n = 5$; GBM#161: vehicle, $n = 8$; LSD1i_2.5 μ M, $n = 7$; means \pm SEM). (C) Normalized bioluminescence (in photons per second per square centimeter per steradian) as a proxy for PDX tumor size (vehicle, $n = 7$; LSD1i, $n = 8$). Avg. average. (D) Kaplan-Meier survival curve of mice as in (C). (E) Efficacy of LSD1i in tumors (empty circles) and normal brain (filled circles) from treated PDXs. H3K4me1 and H3K4me2 levels were expressed as L/H ratios (L , sample; H , internal standard). (F) TIC growth with weekly LSD1i doses ($n = 3$ replicates per group; means \pm SD). (G) Caspase 3/7 activity ($n = 3$; means \pm SD). (H) Neurosphere formation efficiency after two propagations ($n = 3$; means \pm SD). (I) Representative confocal images (left) and quantification (right) of mitochondrial fragmentation. Enlarged highlighted areas (dashed boxes) are shown. Scale bars, 10 μ m. ($n = 2$; means \pm SD). (J) $\Delta\Psi$ m (MitoOr) ($n = 5$; means \pm SD). (K) Representative images (left) and quantification (right) of redox ratio (vehicle, $n = 175$; LSD1i, $n = 135$ cells; means \pm SD). (L) MERC length quantification ($n = 20$ cells per condition; means \pm SD). (M) Ca^{2+} concentration via Rhod-2 fluorescence ($n = 3$; means \pm SD). Two-tailed unpaired Student's t test, * $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$; **** $P < 0.0001$ for (A), (E), (G), (J), and (N); Mann-Whitney U test, **** $P < 0.0001$ for (I), (K), and (M); analysis of variance (ANOVA) for (B), (F), (H), and (L). n.s., not significant.

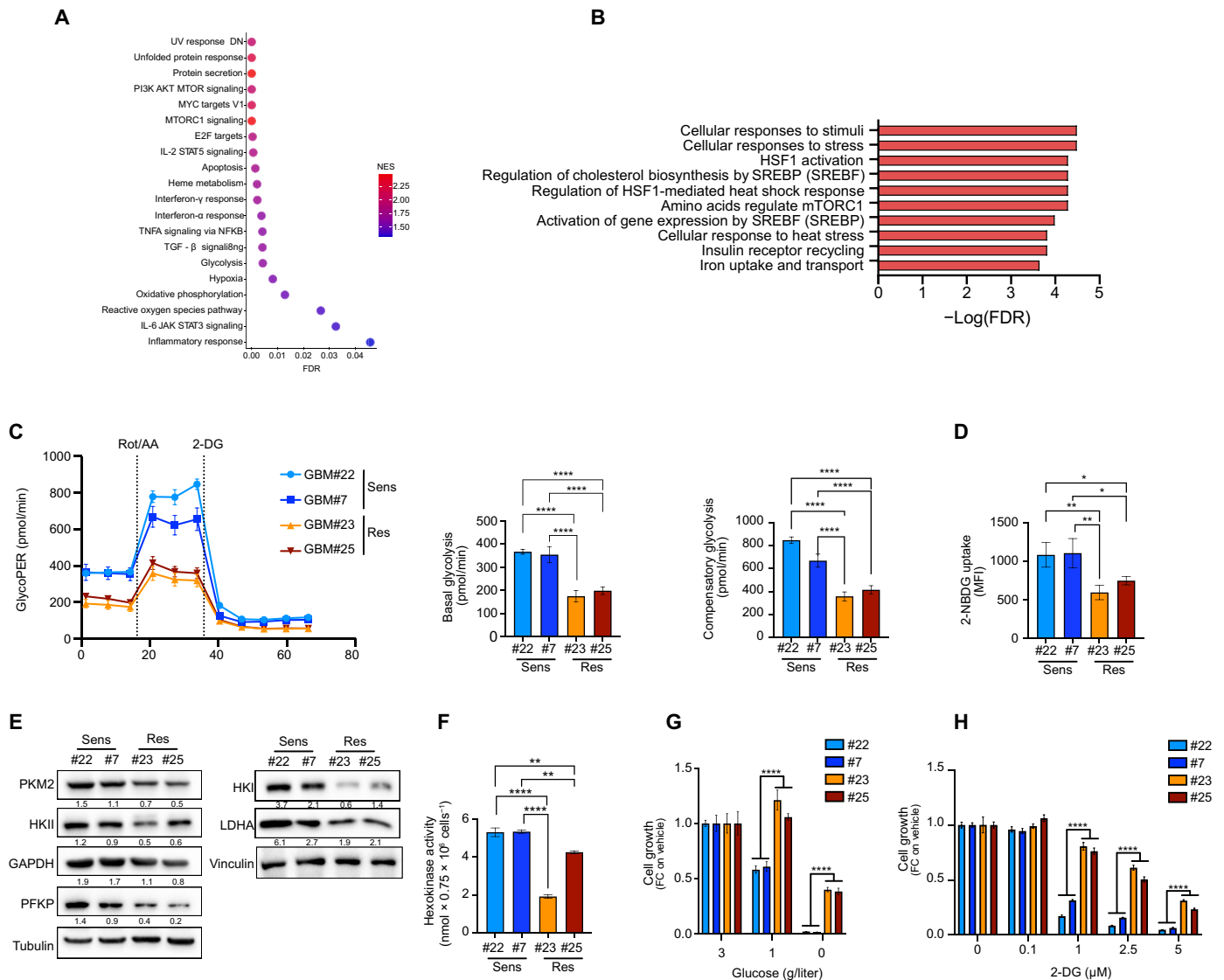


Fig. 4. LSD1^{Sens} and LSD1^{Res} TICs display different metabolic features. (A) GSEA analysis of hallmark pathways enriched in LSD1^{Sens} TICs (GBM#22, GBM#7, GBM#10, GBM#18, and GBM#8) versus LSD1^{Res} TICs (GBM#23, GBM#9, GBM#24, GBM#161, and GBM#53). The bubble color indicates the NES. UV, ultraviolet; DN, genes downregulated; PI3K, phosphatidylinositol 3-kinase; IL-2, interleukin-2; STAT5, signal transducers and activators of transcription 5; JAK, Janus kinase. (B) Pathway enrichment analysis of proteins significantly up-regulated in LSD1^{Sens} TICs (GBM#22, GBM#7, GBM#10, and GBM#18) compared to LSD1^{Res} TICs (GBM#23, GBM#9, and GBM#25). The top 10 terms, ranked by FDR, are shown. (C) Left: GlycoPER by glycolytic rate assay in LSD1^{Sens} (GBM#22 and GBM#7) and LSD1^{Res} (GBM#23 and GBM#25) TICs. Representative kinetic graph (left). Lines indicate the addition of mitochondrial inhibitors Rot/AA and glucose analog (2-DG). Right: Quantification of basal and compensatory glycolysis in the corresponding TICs ($n = 3$; means \pm SD). (D) 2-NBDG [2-[N-(7-nitrobenz-2-oxa-1,3-diazol-4-yl)amino]-2-deoxyglucose] uptake by flow cytometry analysis in GBM TICs ($n = 3$; means \pm SD). (E) Representative immunoblot of key glycolytic proteins in LSD1^{Sens} (GBM#22 and GBM#7) and LSD1^{Res} (GBM#23 and GBM#25) TICs. Vinculin and tubulin are used as loading controls ($n = 2$). (F) Hexokinase activity in LSD1^{Sens} (GBM#22 and GBM#7) and LSD1^{Res} (GBM#23 and GBM#25) TICs. ($n = 2$; means \pm SD). (G) Growth of LSD1^{Sens} (GBM#22 and GBM#7) and LSD1^{Res} (GBM#23 and GBM#25) TICs under different glucose concentrations ($n = 4$; means \pm SD). (H) Growth of LSD1^{Sens} (GBM#22 and GBM#7) and LSD1^{Res} (GBM#23 and GBM#25) TICs under different concentrations of 2-DG ($n = 4$; means \pm SD). ANOVA for (C), (D), and (F) to (H).

Tg-triggered ER stress conditions. The preservation of these features in resistant samples had functional consequences for their survival. Caspase activation was significantly lower in LSD1^{Res} than in LSD1^{Sens} TICs upon Tg treatments (Fig. 5C). Similarly, the ER stress inducer TU was more tolerated in LSD1^{Res} TICs while being highly cytotoxic in LSD1^{Sens} cells (Fig. 5D). To investigate the ability to recover from acute induction of ER stress, we treated the representative LSD1^{Sens} GBM#22 TICs and LSD1^{Res} GBM#25 TICs with Tg

for 16 hours, followed by drug washout and monitoring of cell viability for the next 72 hours. As shown in Fig. 5E, viability was severely compromised in Tg-treated GBM#22 TICs, while GBM#25 cells were less affected by this treatment. In accordance, the expression levels of *ATF3*, *CHAC1*, and *DDIT3*, known death-related downstream effectors of the ATF4 pathway (21), were significantly higher in LSD1^{Sens} TICs compared to LSD1^{Res} TICs. Mechanistically, both LSD1^{Sens} and LSD1^{Res} TICs responded to ER stress

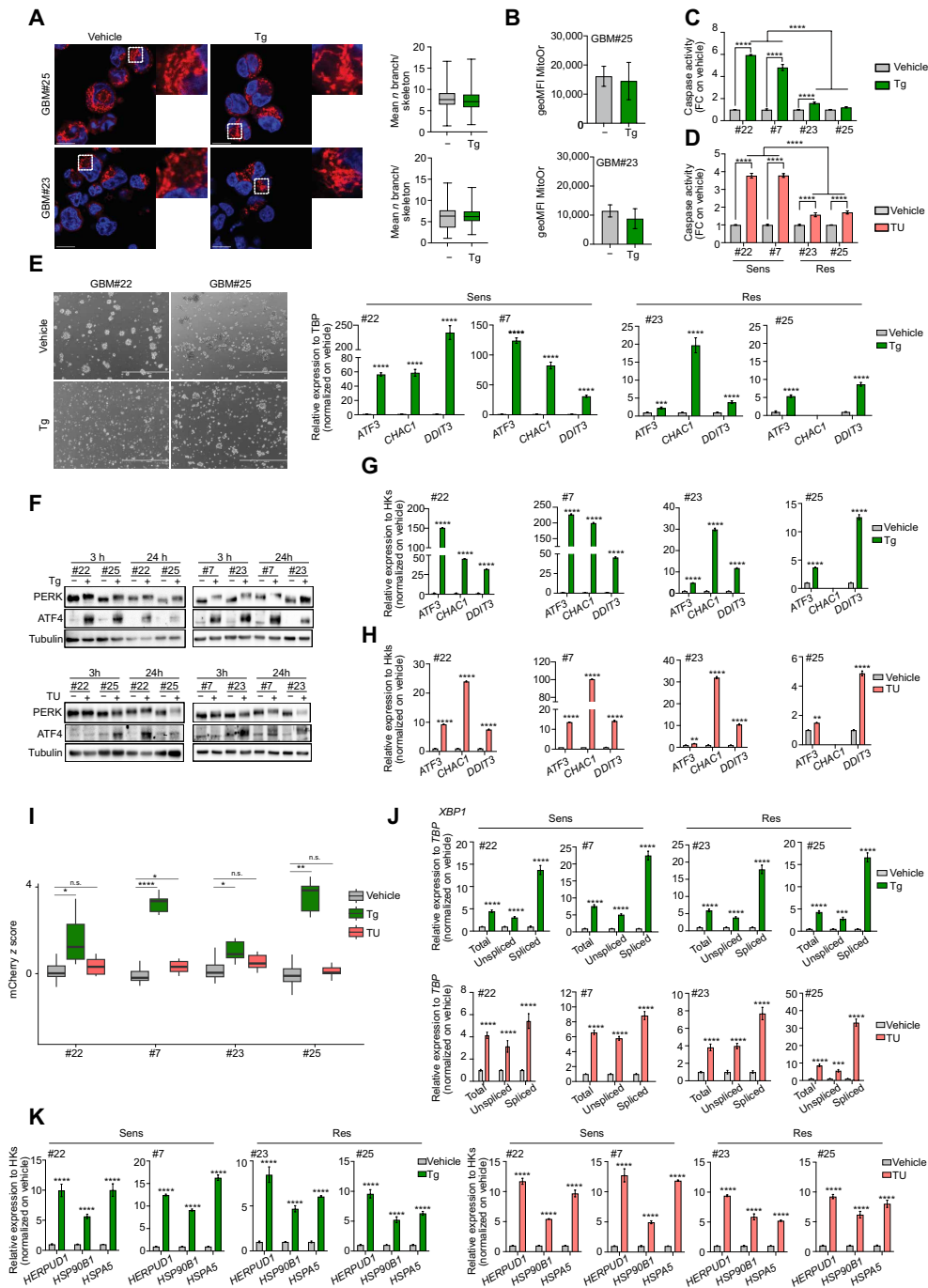


Fig. 5. LSD1^{Res} TICs maintain mitochondrial integrity to better cope with ER stress. (A) Representative confocal images of mitochondrial structure in Tg-treated GBM#23 and GBM#25 TICs (left). Enlarged highlighted areas (dashed boxes) are shown. Mitochondrial fragmentation quantification (right). Scale bars, 10 μm (GBM#25: vehicle, n = 416; Tg, n = 648; GBM#23: vehicle, n = 225; Tg, n = 326; means ± SD). (B) ΔΨm (MitoOr) after Tg treatment (48 hours) (n = 3; means ± SEM). (C and D) Caspase 3/7 activity in Tg-treated (C) and TU-treated (D) TICs (48 hours) (Tg, n = 2; means ± SD; TU, n = 2; means ± SD). (E) Representative images of GBM#22 and GBM#25 treated with Tg (16 hours) and recovered for 72 hours post-Tg removal. Scale bar, 1000 μm (left). Relative mRNA expression of death-related genes after 72 hours of Tg washout, normalized to TATA box-binding protein (TBP) (n = 3; means ± SD). (F) Representative immunoblot of PERK-ATF4 axis in LSD1^{Sens} (GBM#22 and GBM#7) and LSD1^{Res} (GBM#25 and GBM#23) TICs post-Tg (top) and -TU (bottom) treatments (n = 3). Tubulin is used as loading control. h, hours. (G and H) Relative mRNA expression of death-related genes post-Tg (G) and -TU (H) treatments, normalized to geometric means of housekeeping genes (*TBP*, *GAPDH*, *RPLPO*, and *18S*) (n = 3 replicates per group; means ± SD). (I) Representative bar plot showing means mCherry fluorescence intensity post-Tg and -TU treatments. (J) Relative mRNA expression of *XBP1* gene (total, unspliced, and spliced form) post-Tg and -TU treatments, normalized to *TBP* (n = 3 replicates per group; means ± SD). (K) Relative mRNA expression of ATF6 target genes post-Tg and -TU treatments, normalized to geometric means of housekeeping genes (*TBP*, *GAPDH*, *RPLPO*, and *18S*) (n = 3 replicates per group; means ± SD). Mann-Whitney *U* test for (A). Two-tailed unpaired Student's *t* test, ***P* < 0.01, ****P* < 0.001, *****P* < 0.0001 for (B), (E), (G), (H), (J), and (K); ANOVA, **P* < 0.05; ***P* < 0.01; *****P* < 0.0001 for (C), (D), and (I).

TICs and LSD1^{Res} TICs are likely responsible for the maladaptive UPR response in the former and the adaptive UPR response in the latter. Stemming from this evidence, we screened LSD1^{Res} TICs with a metabolic short hairpin RNA (shRNA) library targeting genes involved in key metabolic pathways (table S2), attempting to identify potential vulnerabilities or dependencies in LSD1^{Res} samples likely conferring resistance to LSD1i.

Upon lentiviral transduction and puromycin selection, the representative patient-derived LSD1^{Res} GBM#23 TICs were treated with LSD1i (2.5 and 5 μ M) or vehicle. By comparing LSD1i-treated and control cells, we identified 14 synthetic lethality hits that were depleted under treated conditions, in common to at least two of four replicates, and not counterselected under the control condition (fig. S6A). Our attention turned to post-glycosylphosphatidylinositol (GPI) attachment to proteins inositol deacylase 1 (PGAP1). PGAP1 resides in the ER where it contributes to the maintenance of ER homeostasis mediating posttranslational modifications, maturation, and sorting of GPI-anchored proteins (GPI-APs) (55, 56). The impairment of PGAP1 function affects the proper export of GPI-APs from ER to the cell surface (57). Moreover, PGAP1 is involved in the quality control mechanisms for GPI-APs by promoting the degradation of misfolded ones. Thus, its dysfunction leads to the accumulation of misfolded proteins potentially contributing to the onset of ER stress (58). To date, no studies explore the role of PGAP1 in GBM. In silico data showed that *PGAP1* is overexpressed in GBM compared to the normal brain (Fig. 7A). By assessing its expression in multiple patient-derived TICs, we found that the mRNA expression of *PGAP1* was higher in LSD1^{Res} TICs compared with LSD1^{Sens} samples (Fig. 7B). Moreover, the segregation of glioma tissues from The Cancer Genome Atlas (TCGA) database based on *PGAP1* mRNA levels revealed that GBMs with low *PGAP1* expression showed significant enrichment in TNF- α and NF- κ B pathways, hypoxia, interferon response, glycolysis, OXPHOS, and apoptosis (Fig. 7C), all of which were associated with sensitivity to LSD1i (Fig. 4A).

To investigate the functional role of PGAP1 in GBM TICs, we knocked down *PGAP1* expression in two different patient-derived LSD1^{Res} TICs (GBM#23 and GBM#25) with distinct shRNAs (sh#1, sh#3, and sh#57) cloned in lentiviral vectors (Fig. 7D and fig. S6B). Our findings indicate that *PGAP1* silencing reduced neurosphere-forming capacity of both TIC samples (Fig. 7E and fig. S6C). Of relevance, the combination of *PGAP1* knockdown with LSD1i further affected the self-renewal of LSD1^{Res} TICs (Fig. 7E and fig. S6C). Accordingly, the overexpression of *PGAP1* cDNA in *PGAP1*-silenced cells (fig. S6D) reversed the *PGAP1* knockdown-induced inhibition of cell growth in LSD1^{Res} TICs and restored the resistance to LSD1i treatment (fig. S6E). *PGAP1* silencing alone did not significantly affect $\Delta\Psi_m$ (Fig. 7F and fig. S6F). Nevertheless, LSD1i treatment in *PGAP1*-silenced TICs led to a significant hyperpolarized $\Delta\Psi_m$ (Fig. 7F and fig. S6F), mirroring the response induced by LSD1i in LSD1^{Sens} TICs (Fig. 1 and fig. S1). Treatment with TMZ alone closely mirrored the inhibitory effect of LSD1i on *PGAP1*-silenced TIC growth (Fig. 7G). Notably, the combined treatment with LSD1i and TMZ resulted in additive growth inhibition of LSD1^{Res} *PGAP1*-silenced TICs (Fig. 7G). We next extended our in vitro findings to in vivo GBM models. We intracranially implanted luciferase-positive *PGAP1*-silenced and control GBM#23 TICs into immunocompromised mice. After 6 weeks, the necessary time for tumor formation, mice were randomly divided into four groups and treated with LSD1i as already described (21). Tumor growth, as

assessed by bioluminescence imaging, was significantly reduced in mice transplanted with *PGAP1*-silenced TICs. Notably, we found a more pronounced effect when combined with LSD1i treatment (2 weeks after LSD1i administration), although this combination did not achieve an ideal therapeutic effect (Fig. 7, H and I). When LSD1i treatment was interrupted after 4 weeks, tumor masses continued to increase. This aligns with our previous demonstration that inhibition of in vivo GBM outgrowth diminishes after the suspension of LSD1i treatment (21). By 6 weeks after LSD1i administration, when *PGAP1* was still silenced in the tumor area (Fig. 7J), the average tumor burden in both LSD1i-treated and vehicle-treated *PGAP1*-silenced PDXs became comparable (Fig. 7, H and I). *PGAP1*-silenced PDXs displayed significantly smaller tumors than mice bearing control PDXs over the whole experiment (Fig. 7, H and I). Consistent with these results, *PGAP1* silencing prolonged the survival of GBM PDXs (Fig. 7K). Overall, these data suggest that *PGAP1* per se plays a critical role in TIC maintenance and likely has a priming effect on ER and mitochondrial homeostasis and function. *PGAP1* targeting creates a vulnerability in LSD1i-resistant TICs that enhances their responsiveness to LSD1i treatment and even enhances TIC sensitivity to TMZ, further supporting the translational relevance of this combination strategy.

DISCUSSION

We have previously reported that LSD1-directed treatment shows therapeutic benefits in GBM TICs (21). Our findings reveal heterogeneity in the response to LSD1i treatment across different GBM TIC samples. Sensitivity to LSD1i occurs in a specific subset of GBM TICs with enhanced glycolytic activity. In these samples, LSD1i treatment is associated with multiple stress conditions, including perturbations in mitochondrial dynamics and metabolism, disruption of Ca²⁺ homeostasis, and redox imbalance, which, in turn, affects ER homeostasis. This specific subpopulation of GBM TICs is highly sensitive to ER stress-inducing agents that disrupt mitochondrial function and ER homeostasis.

Mitochondria are intracellular organelles with a relevant role in cell survival, energy production, and adaptation to stress (39). Because of the high energy demands of GBM TICs and their need to cope with the harsh conditions of the brain tumor microenvironment—including hypoxia, nutrient deprivation, and resistance to therapy—maintaining proper mitochondrial function is essential. LSD1i alters mitochondrial structure and function, inducing apoptosis by hyperpolarizing the mitochondrial membrane, increasing the redox ratio, and releasing cytochrome c. These changes disrupt both OXPHOS and glycolysis, reducing ATP production and TIC survival. Similar mitochondrial alterations have been observed in cells under stress conditions, such as oxidative stress (36), hypoxia (59), drug exposure (45), and in cells committed to death (35). Furthermore, these changes can be associated with additional characteristic rearrangements, including increased levels of MFN1 and MFN2 (60), a hyperpolarized $\Delta\Psi_m$, and an enhanced mitochondrial redox ratio (36), all of which affect cell viability. This mitochondrial remodeling promotes the release of proapoptotic factors such as cytochrome c (61), amplifying apoptosis through caspase activation and mitochondrial DNA fragmentation (62).

Mitochondrial structural changes are associated with their dysfunction. Our data show that LSD1i treatment reduces OXPHOS in GBM TICs, significantly decreasing mitochondrial ATP production. Notably,

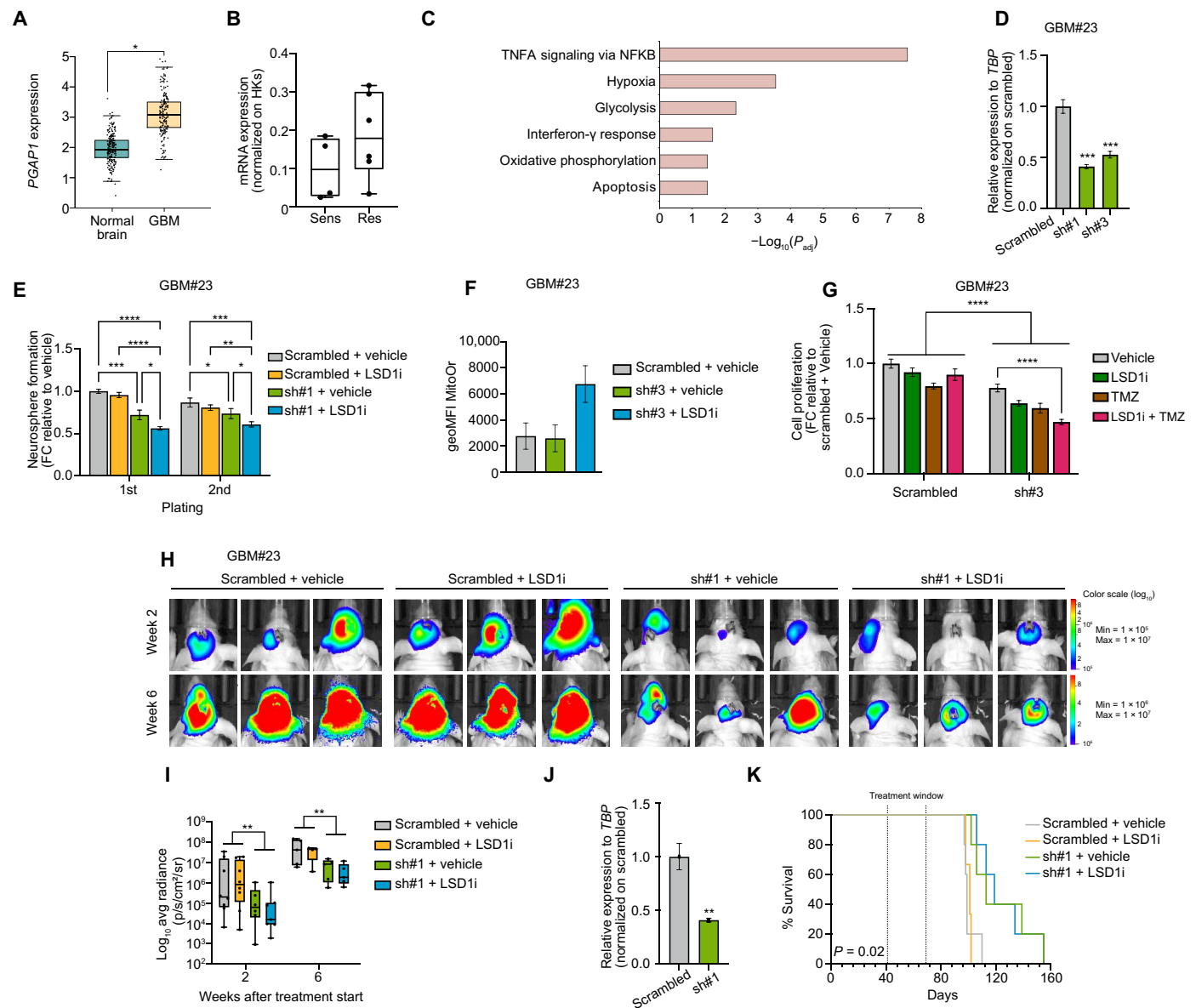


Fig. 7. PGAP1 is a key mediator of LSD1i resistance. (A) *PGAP1* mRNA expression level in GBM tissues and normal brain using the GEPIA2, TCGA and GTEx databases. TPM, transcripts per million. (B) Relative *PGAP1* mRNA expression in LSD1i^{Sens} (GBM#22, GBM#7, GBM#10, and GBM#8) and LSD1i^{Res} (GBM#23, GBM#9, GBM#25, GBM#24, GBM#20, and GBM#161) TICs, normalized to geometric means of housekeeping genes (*TBP*, *GAPDH*, *RPLPO*, and *18S*) ($n = 2$; means \pm SD). (C) GSEA of hallmark pathways in low ($n = 16$) versus high ($n = 20$) *PGAP1*-expressing GBM tissues from TCGA. (D) Efficiency of *PGAP1* silencing (sh#1 and sh#3) compared to control (scrambled), normalized to *TBP*. (E) Neurosphere formation efficiency after *PGAP1* silencing (sh#1) in combination with LSD1i. Two serial neurosphere propagations were assessed ($n = 2$; means \pm SD). (F) $\Delta\Psi$ m (MitoOr) in *PGAP1*-silenced GBM#23 TICs (sh#3) after LSD1i ($n = 3$; means \pm SEM). (G) Growth of *PGAP1*-silenced and control TICs treated with LSD1i, TMZ, or their combination. (H) Representative images of mice transplanted with *PGAP1*-silenced (sh $PGAP1$) or control TICs, treated with LSD1i or vehicle. Treatment began 6 weeks post-TIC implantation (scrambled + vehicle, $n = 8$; scrambled + LSD1i, $n = 7$; sh#1 + vehicle, $n = 6$; sh#1 + LSD1i, $n = 7$). Bioluminescence imaging at time points is shown. (I) Normalized bioluminescence (in photons per second per square centimeter per steradian) as a proxy for tumor size in mice as in (H). (J) *PGAP1* expression in *PGAP1*-silenced (sh#1) and control (scrambled) PDXs, 5 weeks after LSD1i administration, normalized to *TBP*. (K) Kaplan-Meier survival curve for the treated mice as in (G) and (H). Survival differences were compared by log-rank test. Mann-Whitney *U* test, * $P < 0.05$ for (A). Two-tailed unpaired Student's *t* test, *** $P < 0.001$ for (B) and (D). ANOVA, * $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$; **** $P < 0.0001$ for (E) and (F).

LSD1i treatment also impairs the glycolytic activity of GBM TICs, leading to a concurrent reduction in glycolytic ATP production. This marked depletion of global ATP ultimately affects the survival of TICs, as previously demonstrated (21). Supporting these findings, we identified a strong and significant correlation between LSD1 expression and both glycolysis- and OXPHOS-related gene signatures in patients with

GBM from the CGGA and Gravendeel cohorts (43). These findings confirm LSD1's crucial role in regulating cell metabolism, including glucose uptake, oxygen consumption, extracellular acidification, and the metabolic shift between glycolysis and OXPHOS (22, 63, 64).

LSD1i-induced mitochondrial dysfunctions and glycolytic impairment may trigger ER stress and ATF4 induction in GBM TICs.

Different studies link ATF4 induction to mitochondrial stress and metabolic reprogramming (65, 66). Reduced glycolysis and weakened oxidative metabolism, as well as lower ATP levels, are associated with ATF4 stress granules (30, 67), markers of ISR-ATF4 activation. Moreover, mitochondrial inhibitors commonly induce ATF4 induction (34). ER stress also affects mitochondrial morphology and function as an adaptive strategy. It has been reported that ER stress affects mitochondrial dynamics and glycolysis in cancer cells. Initially, it causes mitochondrial fragmentation, MERC formation (68), and Ca^{2+} influx, followed by an adaptive phase where a mitochondrial network is reestablished to improve OXPHOS efficiency. Prolonged ER stress, however, leads to excessive Ca^{2+} transfer via MERCs, disrupting the mitochondrial network and triggering apoptosis (44, 69–72). Dysregulated Ca^{2+} signaling further inhibits glycolysis and induces apoptosis, as seen in breast (73) and neuroblastoma cancer cells (74). Notably, LSD1i-treated TICs show increased MERCs and intracellular Ca^{2+} overload, with elevated MFN1 and MFN2 levels indicating enhanced ER-mitochondrial coupling and mitochondrial remodeling (75, 76).

LSD1 activity has previously been linked to the UPR pathway activation, as well as ER and oxidative stress conditions in cancer, including GBM (21, 77, 78). In the GBM context, LSD1 inhibitors (NCL-1 and NCD-38) reduce glioma stem cell viability and neurosphere formation by activating the UPR pathway (79). The LSD1i DDP38003 used here synergized with stressors to induce a maladaptive ISR, culminating in the enrichment of death-related genes associated with the UPR and ER stress response (21). Our findings show that LSD1i induces a stress response in GBM TICs, resembling the effects of the ER stress inducers Tg and TU. These well-known stressors disrupt mitochondrial structure and function, activate stress granule formation, and up-regulate ATF4 and its proapoptotic genes. The key distinction is that while LSD1i induces a similar ER stress response, its progression is slower compared to the rapid effects of Tg and TU. This prolonged ER stress disrupts cellular energy production by reducing both glycolytic and mitochondrial activities, leading to lower ATP levels. The cumulative impact of these disruptions is the eventual cell death of GBM TICs.

GBM TICs show heterogeneity in response to LSD1i. LSD1i^{Res} TICs maintain cell proliferation, self-renewal, metabolism, and ER-mitochondrial coupling despite LSD1i treatment, as confirmed in zebrafish and mouse models. As for those TICs responsive to LSD1-directed therapy (21), resistance to LSD1i was independent of molecular subtyping or genomic alterations. Analysis of transcriptomic data and extracellular flux results reveals that LSD1i^{Sens} TICs rely primarily on high glycolytic activity for growth. Inhibiting glucose metabolism, either by glucose deprivation or by 2-DG treatment, significantly impaired their growth. In contrast, LSD1i^{Res} TICs exhibit reduced basal glycolytic activity, similar basal OCR, and do not depend on specific metabolic pathways (fig. S4).

A distinct feature of TICs is their metabolic flexibility, allowing them to adapt to various bioenergetic stresses, and often linked to resistance to radiochemotherapies (80, 81). In agreement with their lower glycolytic activity, LSD1i^{Res} TICs showed reduced susceptibility to glucose deprivation or glycolysis inhibition, likely surviving using alternative metabolites and metabolic pathways. In this context, assessing alternative metabolic fuel utilization in these cells would provide deeper insights into their adaptive mechanisms. GL261 cells clustered with LSD1i^{Res} samples not only for their in vitro/in vivo insensitivity to LSD1i but also for their low glycolytic

phenotype, which enables long-term survival under glucose starvation (82). Similar to LSD1i, Tg did not significantly affect mitochondrial dynamics, morphology, or the overall survival of LSD1i-resistant TICs. This suggests that maintaining intact mitochondrial function and ER homeostasis serves as a protective mechanism for LSD1i-resistant TICs, shielding them from cell death caused by LSD1i treatment or stronger chemical stressors. Furthermore, this highlights their enhanced resistance to ER stress.

The ER stress response is mediated by three key receptors in the ER: PERK, ATF6, and IRE1 α . Our study found that while both LSD1i^{Sens} and LSD1i^{Res} TICs perceive stress induced by Tg or TU, their responses are different. LSD1i^{Sens} cells undergo cell death, whereas LSD1i^{Res} samples activate adaptive UPR signaling for recovery. LSD1i induces PERK protein accumulation in LSD1i^{Sens} TICs without activating its kinase function, mimicking the effects of the PERKi GSK2606414 during Tg treatment (54). PERK plays a critical role in stress monitoring, through dimerization/oligomerization and autophosphorylation. Inhibition of PERK kinase activity by GSK2606414 during ER stress disrupts protein maturation and causes retention in the ER (54), increases mitochondrial fragmentation, and impairs mitochondrial respiration (83). These phenotypes are mirrored by PERK genetic targeting (83), which also alters ER and mitochondrial networks and disrupts Ca^{2+} and redox signaling (84). PERK's role in modulating mitochondrial dynamics and maintaining ER homeostasis is linked to its localization at MERCs (69, 85). The existence of a cross-talk between the branches of the UPR is reported (86). However, the activation of IRE1 α or overexpression of ATF6 target genes did not occur in either LSD1i^{Sens} or LSD1i^{Res} TICs upon LSD1i treatment. Although we report that LSD1 binds the PERK gene promoter and increases H3K4me2 and H3K4me3 marks at the LSD1-bound PERK promoter upon LSD1i treatment, LSD1 does not regulate PERK expression at the transcriptional level. This is consistent with our previous findings that LSD1 catalytic activity inhibition is independent of changes in gene expression or chromatin accessibility in GBM TICs (21).

We highlight that in LSD1i^{Sens} TICs, LSD1i treatment disrupts PERK signaling, likely affecting ER homeostasis and stress transmission to the mitochondria, leading to mitochondrial dysfunction. However, LSD1i^{Res} TICs do not exhibit a specific energetic dependency and can adaptively regulate UPR to restore ER and mitochondrial homeostasis even under stronger stressors such as Tg. Therefore, targeting this adaptive mechanism could be crucial for sensitizing these cells to LSD1i and other ER stress-inducing treatments. Among the few synthetic lethality hits identified, we focused on PGAP1, an ER localized protein essential for processing GPI-APs (55–57). Dysfunction in PGAP1 leads to the accumulation of misfolded proteins, contributing to ER stress (58). Although PGAP1 has no established link to cancer, including GBM, it is associated with neurological disorders such as intellectual disability (87–89). GPI-APs have demonstrated protumorigenic roles in various cancers (90–92). Our findings reveal that PGAP1 contributes to intrinsic resistance to LSD1i. Silencing *PGAP1*, either alone or in combination with LSD1i, disrupted the maintenance of LSD1i^{Res} TICs, suggesting that targeting ER homeostasis could eradicate these cells. While no PGAP inhibitors currently exist, its recently structural characterization provides opportunities for drug development (93). Analysis of GBM patient data identified two groups, PGAP1^{Low} and PGAP1^{High}. PGAP1^{Low} tumors showed transcriptome profiles resembling LSD1i^{Sens} TICs, while LSD1i^{Res} TICs are likely to exploit PGAP to maintain ER homeostasis

under therapy-induced stress. Disrupting this mechanism by PGAP1 targeting could impair TIC adaptability and sensitize them to treatments such as TMZ. Furthermore, combining the PGAP1-targeting strategy with LSD1i DDP_38003 is likely to enhance the effectiveness of TMZ, providing a robust approach for tackling the aggressive nature of GBM TICs. The translational relevance of this strategy is further strengthened by recent preclinical results from the Sareddy group, which demonstrated the efficacy of NCD-38 LSD1i to enhance TMZ efficacy against GBM TICs (94).

In addition to PGAP1, our synthetic lethal screen identified several promising candidates, including genes involved in glutamine metabolism (*GLS* and *GLS2*), lipid metabolism (*MTMR14* and *INPP4A*), nucleotide biosynthesis (*RRM2B*, *TRDMT1*, and *ADSS*), and protein ubiquitination and folding (*TRIM47*, *TRIM8*, *CHST13*, *BIRC3*, *TRIM37*, and *UBR5*). Some of them have protumorigenic functions in various cancer models (95–97), with *BIRC3*, *GLS*, and *RRM2B* involved in GBM development and therapeutic resistance (98–100). Inhibitors targeting several of these genes are already in clinical trials (101).

Building on our previous findings that LSD1 inhibition impairs GBM TICs' ability to overcome stress by disrupting the LSD1-CBP-ATF4 signaling axis (21), our results link LSD1-directed therapy to managing adaptive or maladaptive ER stress depending on the metabolic characteristics of patient-derived TICs. To improve TIC-specific treatments, combinatorial strategies with LSD1i and inhibitors targeting either glycolysis or OXPHOS metabolism could significantly restrict GBM tumor evolution by limiting TIC metabolic plasticity and preventing potential compensatory metabolic mechanisms. Likewise, interference with the proper maintenance of mitochondrial function and ER homeostasis might be exploited to target treatment-resistant TICs, such as those escaping LSD1i, glucose deprivation, or glycolysis inhibition with 2-DG. These insights underscore the therapeutic potential of targeting GBM metabolism to enhance treatment efficacy.

Limitations of the study

In this study, we demonstrated that enhanced glycolytic activity in GBM TICs underlies the efficacy of LSD1i-directed therapy. In contrast, LSD1^{Res} TICs, which have lower glycolytic activity and greater resistance to glucose deprivation or glycolysis inhibition, rely on increased mitochondrial adaptability for their survival. Although various LSD1is have been developed, only few have advanced to clinical trials (102). However, their application in GBM has yet to achieve comparable success, with preclinical research still focusing on optimizing compounds to effectively target GBM cells and, particularly, GBM TICs (103, 104). These inhibitors differ in their mechanisms of action (catalytic versus scaffolding), reversibility (reversible versus irreversible inhibition), target modulation, brain tissue penetration, and toxicity profiles, all of which influence their therapeutic potential. Notably, tumor regrowth has been observed even after prolonged LSD1 pharmacological inhibition (103, 104), highlighting the importance of exploring alternative DDP_38003 administration regimens, not only in samples sensitive to LSD1i but also in LSD1i-resistant GBMs. In this context, further investigation is necessary for the “LSD1i + PGAP1 silencing” combination strategy to reach its full potential, including the development of therapeutic agents targeting PGAP1 function and comprehensive *in vivo* studies. To understand the adaptive mechanisms underlying GBM-resistant phenotype, future research should investigate the alternative metabolic fuels these cells may use, particularly in the context of LSD1-directed therapy or

other ER stress agents. Of particular interest would be the evaluation of amino acids such as glutamine as alternative fuels. In this regard, GLS, the mitochondrial enzyme that converts glutamine into glutamate, feeding into the trichloroacetic acid cycle, emerged as a potential target from the synthetic lethal screen. Since GLS is involved in maintaining cellular energy and metabolic precursors, investigating its role both independently and in combination with LSD1i could uncover new therapeutic opportunities. In addition, a comprehensive metabolomic analysis would provide valuable insights into how both LSD1^{Sens} and LSD1^{Res} TICs manage metabolic stress. Last, although our results suggest that PERK contributes to the cellular response to ER stress, further investigations are needed to determine whether PERK activity or expression is regulated through an LSD1-dependent epigenetic mechanism or by LSD1's scaffolding function.

MATERIALS AND METHODS

Experimental design

This study aimed to explore the mechanisms underlying sensitivity and resistance to LSD1i. TICs from different GBM patient specimens, orthotopic GBM PDXs, and GBM zebrafish models were used for *in vitro* and *in vivo* experiments. LSD1i and various chemical stressors were applied to assess stress response activation and adaptations in GBM TICs. Metabolic-based assays were used to identify specific metabolic features associated with sensitivity or resistance to LSD1i therapy, with the goal of developing strategies to target LSD1i-resistant cells. Biological replicates are indicated in figure legends. Animal experiments were randomized and evaluated by two blinded operators, and a minimum of three mice per group was chosen on the basis of preliminary data to ensure statistical significance.

GBM patient-derived TIC cultures

GBM TICs were isolated from specimens of different patients with GBM, as already described (105). They were grown and maintained as 3D spheroid aggregates in serum-free DMEM/F12 medium (Dulbecco's modified Eagle medium/Ham's F12 nutrient mixture; Gibco) supplemented with B27 supplement (X1; Life Technologies), human epidermal growth factor (20 ng/ml), human basic fibroblast growth factor (10 ng/ml; PeproTech), 2 mM L-glutamine, and 1% penicillin/streptomycin. No specific cell subpopulations were isolated on the basis of surface marker expression. Spheres were passaged by mechanically dissociation every 5 to 7 days when they reached ~300 to 500 μm in diameter. TIC cultures were used within 30 passages from their establishment and were routinely tested for *Mycoplasma* contamination. Cells were maintained at 37°C in a 5% CO₂-humidified incubator. Information for each patient-derived TIC culture is provided in table S1.

Mouse models of GBM

Orthotopic implantation of either GBM TICs or GL261 cells was carried out as previously described (1). Briefly, 100,000 cells were suspended in 2 μl of phosphate-buffered saline (PBS) and stereotactically injected into the nucleus caudatus (coordinates from bregma: 1 mm posterior, 3 mm left lateral, 3.5 mm in depth) of 4- to 6-week-old female CD-1 mice for GBM TICs or 4- to 6-week-old female C57BL/6 mice for GL261 cells (Charles River, Wilmington, MA). Tumor-bearing mice were monitored daily for the development of neurological symptoms.

For LSD1i administration, CD-1 mice were treated with LSD1i (17 mg/kg) twice a week for 4 weeks by oral gavage, starting 6 weeks after GBM#23 injection. C57BL/6 mice received LSD1i (34 mg/kg) for 2 weeks, beginning the first week after GL261 injection.

Bioluminescence measurements were performed by intraperitoneal injection D-luciferin firefly (PerkinElmer, France) at a dose of 150 mg/kg of body weight. Acquisitions started 10 min after injection, in animal under gas anesthesia (2% isoflurane). Imaging and data processing were performed using PerkinElmer's IVIS Lumina Series III instrument wavelengths (600 to 800 nm; PerkinElmer, France).

All experiments in mice were performed in accordance with protocols approved by the Italian Ministry of Health (authorization no. 556/2016-PR), in compliance with Italian laws (D.L. vo 116/92 and subsequent amendments), which enforce EU directive 86/609 (council directive 86/609/EEC).

Zebrafish models of GBM

Xenotransplantation was performed on wild-type AB zebrafish (*Danio rerio*) larvae at 2 days postfertilization (dpf). GBM TICs transduced with histone 2B–green fluorescent protein (H2B-GFP) lentivirus were collected after a 3-day treatment with 2.5 μM LSD1i or upon lentiviral-mediated LSD1 silencing (sh#71) and resuspended at 10^5 cells/ μl in medium. Larvae at 2 dpf were anesthetized with 0.016% ethyl-3-aminobenzoate methane-sulfonate salt (Sigma-Aldrich), and pigmentation was inhibited by 0.003% *N*-phenylthiourea (Sigma-Aldrich) in embryo medium. Xenotransplantation was performed by loading the cell suspension into custom microinjection needles, prepared by pulling glass capillaries (GC100T-15, Harvard Apparatus). Each larva was injected with 5 nl of cell suspension, corresponding to 500 cells, using a manual micromanipulator (Narishige). Cells were transplanted subcutaneously into the perivitelline space. Larvae were immediately selected for correct transplantation with a Nikon SMZ25 stereomicroscope. Only correctly injected larvae were maintained at 34°C and screened at 3 days postinjection. Ex vivo analyses were performed on euthanized larvae, upon fixation in 4% paraformaldehyde (Sigma-Aldrich) and permeabilization in ice-cold acetone. Upon a 2-hour incubation in blocking solution [1% bovine serum albumin (BSA) + 5% donkey serum + 0.05% Triton X-100 in PBS], larvae were incubated overnight at 4°C with anti-human human lymphocyte antigen (HLA) (Abcam; 1:100 diluted). Larvae were then incubated overnight at 4°C with anti-rabbit immunoglobulin G (Alexa Fluor 647–conjugated, Jackson ImmunoResearch; 1:400 diluted) and 4',6-diamidino-2-phenylindole (DAPI; Sigma-Aldrich; 1:1000 diluted). Xenografts were then postfixed and flat-mounted with lateral orientation in glycerol mounting medium. Z-stack images were acquired with a 25 \times /0.95 numerical aperture (NA) water immersion objective at 1- μm -z-stack interval on a Leica SP8 AOBS confocal microscope.

Primary tumor volume was measured in confocal z-stack immunofluorescence images, considering the sum of nuclear GFP and human HLA membrane signals, using a customized Fiji/ImageJ pipeline with Arivis Vision 4D 3.5.0 software. Volume was obtained by quantifying the area occupied by the primary tumor for each stack, computing the sum of all the areas, and multiplying by the z-step. All the analysis pipelines were optimized in collaboration with the Imaging Unit staff of the European Institute of Oncology (IEO).

Chemicals

LSD1i was administered at 2.5 μM over a period of 5 days, or as otherwise specified. Tg (1.5 μM ; Merck Life Science, #T903) and TU (0.5 $\mu\text{g}/\text{ml}$; Merck Life Science, #T7765) were exploited as ER stressors, as indicated. TMZ (Sigma-Aldrich) was used at 50 μM at the time of cell plating over a period of 7 days. 2-DG (Sigma-Aldrich) was used at different concentrations (0, 0.1, 1, 2.5, and 5 mM).

Growth assay

To assess sensitivity to LSD1i, GBM TICs were cultured in 24-well plates at a density of 10^5 cells per well. Different concentrations of LSD1i (2.5, 5, and 10 mM) were assessed, and cells were counted after trypan blue staining at the indicated time points. This experiment was performed once with three replicates.

To evaluate sensitivity to TMZ, GBM TICs were cultured in 24-well plates at a density of 1×10^5 per well. After 7 days, cells were stained with trypan blue and counted. The experiment was conducted twice with three biological replicates. The excess over Bliss method has been applied to assess the presence of a synergistic or additive cooperation between LSD1i and TMZ treatments.

To evaluate the reliance on glycolysis, GBM TICs were cultured in 96-well plates at a density varying between 3×10^3 and 4.5×10^3 cells per well in 100 ml of medium. Varying concentrations of D-glucose (3, 1, and 0 g/liter) or 2-DG (5, 2.5, 1, 0.1, and 0 mM) were tested. Following 72 hours of culture, 100 ml of the CellTiter-Glo 3D (Promega) was added to each well. After a 25-min incubation at room temperature, the viability (luminescence) is measured with a PHERAstar FS plate reader (BMG Labtech) using 0.5 s per well of integration time.

Self-renewal assay

A total of 3×10^3 GBM TICs were seeded in a 35-mm culture plates in DMEM/F12 medium containing 50% of methylcellulose (MethoCult SF, STEMCELL Technology), with LSD1i or dimethyl sulfoxide as vehicle. Two weeks after plating, neurospheres were counted, collected, dissociated, and plated again.

Apoptosis

Caspase 3/7 activity was measured using Caspase-Glo assay kit (Promega), following the manufacturer's instruction. Briefly, GBM TICs were cultured in 96-well white opaque plates (Corning) at a density of 10^4 cells per well in 100 ml of medium containing LSD1i, Tg, or TU. After 24 hours for TU and Tg and 5 days for LSD1i, 100 μl of Caspase-Glo 3/7 assay reagent was added to each well, and the plate was placed on a shaker for ~30 s. After 30 min of room-temperature incubation in the dark, luminescence was read in a GloMax plate-reading luminometer (GloMax).

Immunofluorescence

A total of 10^5 GBM TICs were seeded on 13-mm Cell-Tak (Corning)-coated slides and fixed with 4% paraformaldehyde for 10 min at room temperature. For staining of MFN1 and MFN2 after 8 min of permeabilization in 0.1% Triton X-100 diluted into 0.1% BSA in PBS, coverslips were incubated with primary antibodies [MFN1 (1:50), Cell Signaling Technology, #14739S; MFN2 (1:100), Cell Signaling Technology, #11925S in 0.1% saponin in PBS) for 1 hour at room temperature. Coverslips were washed twice in PBS and incubated with a secondary antibody (ImmunoJackson Research; 1:200)

for 1 hour at room temperature, followed by a second wash in PBS and incubation with DAPI (Sigma-Aldrich; 1:1000 diluted) in PBS for 5 min. After postfixation for 2 min in 4% paraformaldehyde, coverslips were mounted with glycerol mounting medium. All images were obtained using a Leica TCS SP8 confocal microscope equipped with a HC PL APO 63×/1.4 oil immersion objective lens. To quantify mitofusin's signal intensity (raw integrated density per nucleus), the fluorescence intensity per field of view (FOV) was calculated using the “Measure” command on ImageJ and divided by the number of nuclei, which were manually counted, in the FOV according to the DAPI signal. The quantification of the raw integrated density per nucleus of each mitofusin after treatment compared to control condition is expressed as a percentage.

For staining of G3BP1, fixed cells were permeabilized with 0.1% Triton X-100 diluted into 0.1% BSA in PBS for 10 min and incubated with a blocking solution (5% BSA in PBS) for 1 hour at room temperature. Next, TICs were incubated with the primary antibody anti-G3BP1 (1:100; Proteintech, #13057-2-AP) diluted in 5% BSA in PBS overnight at 4°C. After washing three times with PBS, cells were incubated with anti-rabbit Alexa Fluor 488–coupled antibody (Thermo Fisher Scientific) for 1 hour at room temperature. Cells were then washed three times with PBS and incubated with iFluor555 phalloidin (Thermo Fisher Scientific, #A34055) for 1 hour at room temperature. Last, cells were incubated with DAPI (Sigma-Aldrich; 1:1000 diluted) in PBS for 5 min, washed with PBS for 2 min, and mounted in mowiol mounting medium [12% glycerol, 9.6% mowiol, and 1.5% DABCO in 0.1 M tris-HCl (pH 7.4)]. Confocal images were captured using the Eclipse Ti2 microscope (Nikon Europe B.V.) coupled with the X-Light V3 spinning disk (CrestOptics S.p.A), solid-state lasers from Lumencor CELESTA light engine, a multiband dichroic mirror, single-band emission filter, and a scientific complementary metal-oxide semiconductor (sCMOS) camera (Kinetic, Teledyne Photometrics). A total of 81 FOVs per sample were obtained with a PLAN APO λ D 60×/1.42 oil immersion objective lens. Single optical sections of the DAPI, Alexa Fluor 488 (labeling G3BP1), and iFluor555 (labeling F-actin) signals were acquired at the middle plane of the nuclei.

To assess the mean intensity of the G3BP1 signal within the cells' cytoplasm, a custom Python-based image segmentation pipeline using the CellPose algorithm for cellular segmentation was used (106). This pipeline facilitated the identification of nuclear and cellular regions of interest using the DAPI and phalloidin signals.

All data analysis was conducted using RStudio software (version 2023.6.0.421, RStudio: Integrated Development for R, RStudio, Public Benefit Corporation, Boston, MA; www.rstudio.com/).

Representative super-resolution images of the same samples used to quantify the G3BP1 fluorescence were captured using the DeepSIM module (CrestOptics S.p.A., Rome, Italy) with a 100×/1.49 NA oil immersion objective lens (Nikon Europe B.V.) and the standard structured illumination mask (CrestOptics S.p.A.). The B/C settings of the super-resolution reconstructed images were maintained consistently for visualization purposes. These experiments were performed once for each TIC culture; total number of acquired cells are shown in figure legends.

Electron microscopy

Cell block preparation and EM analysis were performed according to standard protocol. Briefly, resin blocks of GBM TICs were sectioned using a Reichert Ultracut S and Leica EM UC7 ultramicrotome. Ultrathin sections (70 nm in thickness) were picked up on in-house formvar/

carbon-coated grids and imaged on a Zeiss EM910 80-kV transmission EM (TEM) equipped with a 11M Quemesa charge-coupled device camera (EMSIS) and Tecnai 20 high-voltage EM operating at 200 kV.

For each condition, 20 micrographs corresponding to 20 TICs were recorded at a pixel size of 3.5 nm per pixel and were included in the analysis. MERC length was measured using the open-source software Fiji. The quantification method was adapted from Lam *et al.* (107). The experiment was performed twice for each TIC culture.

Mitochondrial structure

GBM TICs were incubated with MitoTracker Red (Thermo Fisher Scientific, #M7512) for 30 min at 37°C in a 5% CO₂-humidified incubator. After washing with PBS, cells were fixed with 4% paraformaldehyde for 8 min at room temperature, colored with DAPI, and mounted on 13-mm Cell-Tak (Corning)–coated slides. All images were obtained using a Leica TCS SP8 confocal microscope equipped with a HC PL APO 63×/1.4 oil immersion objective lens.

Mitochondrial branching analysis

Confocal images were captured using a Leica TCS SP8 scanning confocal microscope (Leica Microsystems GmbH) equipped with a 63×/1.4 oil immersion objective, resulting in a pixel size of 72 nm by 72 nm with a z-step of 300 nm or with an Eclipse Ti2 microscope (Nikon Europe B.V.), coupled with a Yokogawa CSU-W1 spinning disk system and a PLAN APO λ 100×/1.45 oil immersion objective lens, resulting in a pixel size of 68 nm by 68 nm with a z-step size of 200 nm. Scanning confocal images of mitochondrial fluorescence channel were deconvolved with Huygens Essential (version 19.04 Scientific Volume Imaging, The Netherlands; http://svi.nl).

Images obtained with the confocal spinning disk system were deconvolved using NIS-Elements software (v. 5.42.01). For each image, single cells' crops were extracted with a semiautomated, custom-made Fiji macro. Briefly, confocal stacks were projected with a max projection, and the DAPI channel was combined with the mitochondrial channel to identify the total area occupied by each cell. Images were then thresholded with a global thresholding method, and, when necessary, binary images were postprocessed with “fill holes” and “watershed” operation; areas containing a single cell were extracted from the FOV with the Analyze Particles command with the possibility to do manual corrections. Last, single-cell, 3D stack regions were extracted and saved for the following analysis steps. The extent of mitochondrial branching was extracted with another custom-made Fiji macro: Mitochondrial area was identified on the related fluorescence signal with the Auto Local Threshold Fiji's plugin using Bernsen method (for scanning confocal images) or with the Global Threshold Moments (for confocal spinning disk images), and binaries were then postprocessed with a Remove Outlier and a Skeletonize function; the Fiji's method Analyze Skeleton (2D/3D), which extracts the length of each segment (or branch) of the mitochondrial network, was applied.

Extracted results' tables were then exported and analyzed with RStudio (RStudio 2022.02.3 + 492 “Prairie Trillium” release). For each cell, the ratio between the number of branches and the number of skeletons was quantified.

$\Delta\Psi_m$ and mass

Mitotracker orange (Thermo Fisher Scientific, #M7510) and mitotracker green (Thermo Fisher Scientific, #M7514) were used to measure $\Delta\Psi_m$ and mass, respectively.

GBM TICs were incubated with these dyes for 30 min at 37°C with 5% CO₂-humidified incubator. Flow cytometry (BD FACSCelesta Cell Analyzer) was used to measure the mean fluorescence intensity. Data were analyzed using FlowJo software.

Oxygen consumption and extracellular flux analysis

Metabolic profiling was done using a Seahorse XF96 flux analyzer (Agilent Technologies). A total of 7×10^4 GBM TICs were resuspended in Seahorse XF DMEM (Agilent Technologies, #103680-100) supplemented with 1 mM pyruvate, 2 mM glutamine, and 10 mM glucose. Cells were then seeded on a 96-well Agilent Seahorse XF Cell Culture Microplate (Agilent Technologies) coated with polylysine (Merck Life Science, # P7405) and make them equilibrate for 1 hour at 37°C in non-CO₂ incubator. Last, cells were then centrifuged gently to adhere. The sensor cartridge was prepared by adding 1 μM oligomycin (O), 0.5 μM carbonyl cyanide *p*-trifluoromethoxyphenylhydrazone (FCCP), and 0.5 μM rotenone plus antimycin A (Rot/AA) for Seahorse XF Cell Mito Stress Test Kit (Agilent Technologies, #103015-100) and 0.5 μM Rot/AA and 50 mM 2-DG for Seahorse XF Glycolytic Rate Assay Kit (Agilent Technologies, #103344-100) to each cartridge port. O (1.5 μM) and Rot/AA (0.5 μM) were used for Seahorse XF Real-Time ATP Rate Assay Kit (Agilent Technologies, #103592-100). After measurement, cells were stained with crystal violet solution for 10 min, and the absorbance was measured at 540 nm following dissolution of the dye in a plate-reading spectrophotometer (GloMax). OCR and ECAR values were normalized on alive cells.

Redox ratio measurement

A total of 2×10^5 GBM TICs were seeded on Cell-Tak (Corning)-coated planar windows (Devotop Photonics). Label-free optical redox ratio measurements were taken with a laboratory-built nonlinear laser scanning microscope, as previously reported (108). Briefly, we used a dual-output laser source (FemtoFiber Pro, Toptica Photonics) to generate synchronized ≈ 1 -ps duration pulses at 40-MHz repetition rate. The first output is a 780-nm pump beam. The second output is a Stokes beam, tuned at 1003 nm. We used a 100× 1.25 NA illumination objective (C-Apochromat, Carl Zeiss) and a 40× 1.30 NA collection objective (CFI Super Fluor, Nikon). The laser power was 7.5 and 0.5 mW for the pump and the Stokes beam, respectively. In the first scan, only the pump beam was used. The generated TPEF was detected in forward and in backward directions via two identical photomultiplier tubes: Backward-propagating fluorescence from nicotinamide adenine dinucleotide (phosphate) (reduced form) [NAD(P)H] + flavin adenine dinucleotide (FAD) was spectrally isolated using a 600-nm short-pass filter (Thorlabs); forward-propagating fluorescence from NAD(P)H was spectrally isolated using a 435/40-nm band-pass filter (Edmund Optics) (109). In the second scan, both beams were used. Continuous anti-Stokes Raman scattering (CARS) signal at the 2850 cm⁻¹ Raman shift of lipids (110) was forward detected and spectrally isolated using a 650/40-nm band-pass filter (Thorlabs). Each image was obtained with a 1-ms pixel-dwell time and 200 pixels by 200 pixels for a 70 μm-by-70 μm area.

Image processing was performed in Python using SciKit and Scipy libraries. We applied a median filter and Otsu's thresholding on the CARS images to segment the cells from the substrate and create a cell mask. Each mask was visually inspected to check the quality of the segmentation. Single-cell segmentation was done using the watershed algorithm (111). For each cell, we identified the high-intensity pixels as the mitochondrial network and segmented it using

a median filter and Yen's thresholding (112). We used this to measure the mean TPEF intensities of the mitochondrial areas and calculate the single-cells redox ratio as the NAD(P)H / [FAD + NAD(P)H] ratio.

We imaged 10 different culture plates for each TIC culture, equally divided into five control and five LSD1i-treated samples. Differences in the mitochondrial redox ratio between the LSD1i-treated and the vehicle groups were evaluated using the two-sided Mann-Whitney *U* test in Origin(Pro) (version 2022, OriginLab Corporation).

2-NBDG uptake

GBM TICs were incubated with 2-NBDG {2-[N-(7-nitrobenz-2-oxa-1,3-diazol-4-yl)amino]-2-deoxyglucose} (Thermo Fisher Scientific, #N13195) for 30 min at 37°C with 5% CO₂-humidified incubator. After washing cells, DAPI was used to discriminate alive cells. Flow cytometry (BD FACSCelesta Cell Analyzer) was used to measure the mean fluorescence intensity. Data were analyzed using FlowJo software.

Hexokinase activity assay

Hexokinase activity of GBM TICs (7.5×10^5 cells) was assessed using the Hexokinase Activity Assay Kit (Abcam, ab136957) following the manufacturer's instructions. Absorbances (optical density at 450 nm) were measured after an incubation time of 30 min in a plate-reading spectrophotometer (GloMax).

Measurements of Ca²⁺ concentration

A total of 2×10^5 GBM TICs were stained with Rhod-2AM (Thermo Fisher Scientific, #R1245MP) for 30 min at 37°C in a 5% CO₂-humidified incubator according to the manufacturer's protocol. After washing with PBS, nuclei were labeled with Hoechst 33342 (Thermo Fisher Scientific, #H3570), and images were acquired with a wide-field system (Thunder Imager, Leica Microsystems GmbH, Wetzlar Germany) equipped with fluorescence light-emitting diode (LED) illumination (Lumencor SpectraX, Beaverton, OR 97006, USA), a multiband dichroic mirror, different emission filters, an sCMOS camera (Leica, DFC9000 GTC), and a HC PL APO 60×/1.4 NA oil immersion objective lens. For each sample condition, 49 FOVs, randomly chosen, were acquired at a single focal plane. The bright-field (BF), Hoechst, and Rhod-2AM signals were acquired for each stage position. The Hoechst and BF signals were used to automatically segment the nuclei and the entire cells, respectively, by means of the Cellpose algorithm218 integrated in a custom-made Python script (Imaging Unit, IEO).

UPR reporter

UPR reporter activation was tested on a panel of four GBM-TICs with or without stress inducers, Tg and TU (300 to 3000 nM), and LSD1i (2.5 μM) for 24 hours. The cells were fixed and imaged using the Operetta High-Content Imaging platform. We used the confocal mode and a 20× water objective to image nine fields per well. LED power and detector exposure time were adjusted on vehicle-treated controls. The image analysis workflow involved filtering the mCherry channel to eliminate background, followed by identifying mCherry areas with stringent criteria to count only bright objects and remove cell debris. Object counting, area, and fluorescence intensity were measured, with mean, median, and sum of mCherry intensity calculated. Data analysis used mCherry sum intensities to provide a robust readout, compensating for dim intensities and amplifying differences between conditions with varying object counts and intensities. After importing raw data in R, drug concentrations and

metadata were merged, and *z*-scoring of the mCherry sum intensities was separately performed for each plate and subsequently merged back into a combined data frame. This approach effectively normalizes plate effects using positive and negative controls present on each plate. Mean *z*-scores for each compound were calculated from all replicate wells with $n = 3$ coming from nine fields per well each. Data were plotted as box plots with median (line inside the box), upper and lower quartiles (upper and lower boundaries of the box), and whiskers extending to the most extreme data points within 1.5 times the interquartile range from the upper and lower quartiles. Statistical significance was determined using pair-wise *t* test within the `geom_signif()` function in R.

Western blot

GBM TICs were lysed in RIPA (radioimmunoprecipitation assay) buffer [50 mM tris-HCl buffer (pH 8), 10 mM CaCl₂, 5 mM EGTA (pH 8), 250 mM NaCl, 10% glycerol, and 1% Triton X-100] supplemented with a cocktail of proteinase and phosphatase inhibitors [50 mM NAF, 10 mM NAPP, 10 mM NaOrtoV, phenylmethylsulfonyl fluoride (0.1 mg/ml), 10 μM leupeptin, and 10 μM aprotinin]. Protein lysates were centrifuged at 13,000 rpm for 30' in a refrigerated centrifuge and then quantified with Bradford assay (Bio-Rad, #5000006) according to the manufacturer's protocol. Proteins were resolved by SDS-polyacrylamide gel electrophoresis, transferred to nitrocellulose membranes (Whatman Protran, Sigma-Aldrich), and blocked with 5% BSA in tris-buffered saline solution with Tween 20 (50 mM tris, 150 mM NaCl, and 0.1% Tween 20). Primary antibodies were incubated overnight at 4°C. Antibody binding was assessed by horseradish peroxidase-conjugated secondary antibody (Sigma-Aldrich; 1:5000 diluted). Images were acquired on a ChemiDoc XRS instrument (Bio-Rad). Primary antibodies used the following: anti-ATF4 (Cell Signaling Technology, #11815S; 1:500), anti-phospho-eIF2α (Cell Signaling Technology, #3398S; 1:1000), anti-eIF2α (Cell Signaling Technology, #5324S; 1:1000), anti-LSD1 (Cell Signaling Technology, #2139A; 1:1000), anti-LSD1 (Cell Signaling Technology, #2139A; 1:1000), anti-*vinculin* (Sigma-Aldrich, #V9131; 1:5000), anti-HKI (Cell Signaling Technology, #2024; 1:1000), anti-HKII (Cell Signaling Technology, #2867; 1:1000), anti-PKM2 (Cell Signaling Technology, #4053; 1:1000), anti-GAPDH (Cell Signaling Technology, #5174; 1:1000), anti-PFKP (Cell Signaling Technology, #8164; 1:1000), anti-LDHA (Cell Signaling Technology, #3582; 1:1000), anti-α-tubulin (Santa Cruz Biotechnology, #32293; 1:5000), and anti-PERK (Cell Signaling Technology, #3192S; 1:1000). Densitometric quantification of band intensity was performed using the Band Analysis tools of ImageLab software version 4.1 (Bio-Rad).

Liquid chromatography–mass spectrometry analysis

GBM TIC pellets were digested using the iST sample preparation kit (PreOmics), following the manufacturer's guidelines. Peptide mixtures were separated by reversed-phase chromatography on an EASY-Spray column (Thermo Fisher Scientific), 25 cm in length (inner diameter, 75 μm; PepMap C18, 2-μm particles), which was connected online to a Q Exactive Plus instrument (Thermo Fisher Scientific) through the EASY-Spray Ion Source (Thermo Fisher Scientific). Solvent A was 0.1% formic acid (FA) in double-distilled H₂O, and solvent B was 80% acetonitrile plus 0.1% FA. Peptides were injected in an aqueous 1% trifluoroacetic acid solution at a flow rate of 500 nl/min and were separated with 3 to 60% gradients (110 min, 3 to 21%; 18 min, 21 to 30%; 5 min, 30 to 60%) at a flow rate of

250 nl/min. The Q Exactive Plus instrument was operated in the data-dependent acquisition mode. Survey full-scan mass spectrometry (MS) spectra [mass/charge ratio (*m/z*) of 300 to 1650] were analyzed in the Orbitrap detector with a resolution of 70,000 at *m/z* 200. The 12 most intense peptide ions with charge states between 2 and 7 were sequentially isolated to an MS1 target value of 3×10^6 and fragmented by higher-energy collisional dissociation with a normalized collision energy setting of 28%. The maximum allowed ion accumulation times were 20 ms for full scans and 65 ms for MS/MS, and the target value for MS/MS was 1×10^5 . The dynamic exclusion time was 20 s. The acquired raw data were analyzed using the integrated MaxQuant software v.1.6.2.3 (Max Planck Institute of Biochemistry) (113) and the Uniprot HUMAN (181029) databases. Enzyme specificity was set to trypsin, and two missed cleavages were allowed. Methionine oxidation and N-terminal acetylation were included as variable modifications and the false discovery rate (FDR) was set to 1%, both at the protein and peptide level. The label-free software MaxLFQ (114) was activated, with the “match between runs” feature (match from and to, matching time window = 2 min).

Data analysis was performed with Perseus software. The protein group output table from MaxQuant was filtered for “reverse,” “only identified by site,” “contaminants,” and at 3 or 70% of valid values in each group. Missing values were then imputed by random numbers drawn from a normal distribution, assuming that these values belonged to low-intensity spectrum of the distribution (down shift = 1.8 and width = 0.3). To determine significantly changing proteins between conditions, a two-sample Student's *t* test was used, with a $P = 0.01$. Pathway analyses of the proteins significantly changing in the comparison between LSD1^{Sens} and LSD1^{Res} TICs was carried out using Reactome (<https://reactome.org/>).

In vitro synthetic lethal shRNA screening

The human metabolic shRNA library (Collecta) (gift from L. Lanfranccone, IEO, Milan) is engineered into the pRSI17-U6-(sh)-UbiC-GFP-2A-Puro lentiviral vector containing the puromycin resistance and the GFP marker. It contains 2924 lentiviral vectors, targeting 297 genes with each shRNA (10 different shRNA constructs per gene) univocally associated with a barcode cassette of 18 degenerated, nonoverlapping nucleotides. Genes targeted by the shRNA constructs are listed in table S2. 293T cells were transfected with Lipofectamine LTX and PLUS Reagent Kit (Invitrogen, #15338100). Transfection was performed in 15-cm tissue-cultured plates according to the manufacturer's indications. Briefly, for each transfection were used 6 μg of DNA library, 7 μg of pMD2G-vesicular stomatitis virus glycoprotein, and 24 μg of pCMV-DR8.2. After 24 hours, the transfection medium was replaced with complete culture medium, and viral supernatants were collected at 24 and 48 hours, filtered through 0.45-μm filters, ultracentrifuged at 22,000 rpm for 2 hours to be ultimately resuspended in sterile PBS. Concentrated virus was stored at –80°C. LSD1^{Res} GBM#23 cells were infected with a low multiplicity of infection equal to 0.2 and at a high library coverage (500×). Infected cells were selected with puromycin and randomized in three branches with two technical replicates per condition: vehicle, 2.5 μM LSD1i, and 5 μM LSD1i. A reference condition was collected straight after puromycin selection to retrieve the initial relative abundance of each shRNA construct at time zero. Cells were kept in culture up to 6 weeks and split once a week. LSD1i was refreshed at every splitting. Genomic DNA was isolated from 6-week time point, and shRNA relative abundance was retrieved by a two-step polymerase chain

reaction (PCR) amplification procedure, followed by next-generation sequencing (NGS) reaction. A PCR1 reaction was used to amplify the shRNA-specific barcode sequence and used as template for PCR2 reaction to add specific indexes and adaptors to each sample. Integrity and quantification of PCR purified products were assessed with Bioanalyzer 2000 (Agilent) before proceeding with NGS (Illumina NovaSeq 6000) with the following parameters: paired-end sequencing, read length of 50 base pairs, sequencing depth of 30 million reads per sample. Barcodes and corresponding shRNAs were then identified by aligning sequencing output to the sequences of the metabolic library barcodes. The matched reads were counted, normalized, and then used for analysis. Candidate genes to be potential synthetic lethal with LSD1i were identified if they satisfied the following criteria: (i) the median of Δ fold change (FC) for all the shRNAs specific for the gene < 0 [Δ FC LSD1i = $(\log_2 \text{LSD1i}) - (\log_2 \text{vehicle}) < 0$]; (ii) > 3 shRNAs specific for the gene showing Δ FC < -1 ; (iii) shRNAs specific for the gene not being counterselected in vehicle experimental arm [≥ 5 shRNA \log_2 FC vehicle (vehicle/reference after puromycin) > 0].

GBM TIC infection

LSD1 silencing was achieved using MISSION pLKO.1-puro empty vector plasmid DNA (Sigma-Aldrich) harboring either the sequence targeting human LSD1 (TRCN0000046071, sh#71) or a nontargeting shRNA (SHC002, shNT) used as a control, as previously described (21). Tet-Off-H2B-GFP lentiviral vector (gift from P. G. Pelicci, IEO, Milan) was exploited as a nuclear tag for the identification of TICs transplanted in embryonic zebrafish for tumor volume quantification. pLentiLox3.7 vector encoding Luc2 cDNA (gift from L. Lanfrancone, IEO, Milan) was used to generate GBM TICs expressing firefly luciferase for monitoring tumor growth in vivo (21). Lentivector for PGAP1 cDNA overexpression (catalog no. RC213837L4) and the corresponding empty vector (catalog no. PS100093) were commercially purchased from OriGene.

The UPRE reporter (52) modified with XBP1 sequence [gift from G. Gargiulo, Max Delbrück Center (MDC), Berlin] was exploited to measure IRE1 α -XBP1 pathway activation in GBM TICs treated with Tg, TU, and LSD1i.

shRNA oligonucleotides targeting human PGAP1 mRNA were cloned into pRSI17-U6-(sh)-UbiC-GFP-2A-Puro linearized vector according to the manufacturer's instructions (Cellecta; sh#1, 5'-ACCGGCTAAATGCTCGACACATAAATGTTAATATTCATAGCATTATGTGTCGAGCATTAGTTTT-3'; sh#3, 5'-ACCGGCATGCCACAATCTATATTATGTTAATATTCATAGCATAATATAGATTGTGGGCATGTTTT-3'). A lentiviral plasmid expressing a scrambled shRNA was used as control (5'-ACCGGATATCTCGCAA TGTGTTGTTGTTAATATTCATAGCAACACCAACATTGCGAGATATTTTT-3'). sh#57 was purchased from Sigma-Aldrich (TRCN0000047157). Lentivirus production and GBM TIC transduction were performed as previously described (21).

RNA extraction and real-time quantitative PCR

RNA was isolated from GBM TICs using Quick-RNA Miniprep Kit (Zymo Research, #R1054) following the manufacturer's specifications. cDNA was synthesized with high-capacity cDNA reverse transcription kit (Thermo Fisher Scientific). Real-time quantitative PCR was performed by Vii7 Real-Time PCR system (Thermo Fisher Scientific) using Fast SYBR Green (Applied Biosystems) according to standard protocols. Threshold cycle (C_t) values for each gene were

normalized to housekeeping genes expression level. The primers used are listed in table S3.

Library preparation, RNA sequencing, gene set enrichment analysis, and in silico analysis

Libraries were prepared using the TruSeq Stranded Total RNA Kit (Illumina, #20020598) according to the manufacturer's instructions. Libraries were multiplexed, clustered, and sequenced on an Illumina NovaSeq 6000. RNA sequencing (RNA-seq) fastq files were processed using RSEM v 1.3.1 (115). Reads were aligned to the human genome version hg38. Gene annotations were downloaded from Ensembl GRCh38/hg38 v100. Corresponding gct matrix file was used as input for gene set enrichment analysis (GSEA) 4.3.2 to perform a set of functional enrichment analyses of LSD1i versus vehicle cells with respect to Human MitoCarta3.0 gene sets (42) selecting a custom list of significantly enriched terms among the ones reporting $|\text{NES}| > 1$ (where NES is normalized enrichment score) and $\text{FDR} < 0.05$.

mRNA-seq expression data for LSD1^{Sens} and LSD1^{Res} TICs were obtained from Lazzarini *et al.* (116). LSD1^{Sens} versus LSD1^{Res} TICs were also analyzed using GSEA 4.3.2 performing a functional enrichment analysis with respect to set Hallmark gene sets from the MSigDB selecting a custom list of significantly enriched terms among the ones reporting $|\text{NES}| > 1$ and $\text{FDR} < 0.05$. Moreover, a similar GSEA analysis was used to compare LSD1iSens and LSD1^{Res} TICs using a custom GSEA reference dataset built from the molecular signatures published by Garofano and colleagues (5) in table S6J (GBM MTC, NEU, and PPR signatures).

cBioPortal (117) was used to download GBM samples from the TCGA Firehose Legacy dataset, selecting only samples characterized by a PGAP1 expression level of $|z\text{-score}| > 1.2$ based on the log RNA-seq V2 RSEM pipeline of analysis. Samples were subsequently divided, on the basis of the score expression value of PGAP1, into two sets: PGAP1^{Low} and PGAP1^{High} samples. PGAP1^{Low} and PGAP1^{High} samples underwent a GSEA functional annotation analysis based on Hallmark gene sets from the MSigDB with GSEA 4.3.2, selecting a subset of Hallmark gene sets reporting $|\text{NES}| > 1$ and $\text{FDR} < 0.05$.

For all GSEA, permutation type was set on gene sets. Dot plot reporting selectively enriched terms were produced using "ggplot2" library in R (<https://ggplot2.tidyverse.org>).

PGAP1 expression level from GBM tissues and normal brain samples were downloaded from GEPIA2 website (<http://gepia2.cancer-pku.cn/#index>) (118).

Statistical analysis

All experiments were performed at least three times with a minimum of three independent replicates, unless otherwise specified. Data were statistically analyzed by unpaired Student's *t* test, or Mann-Whitney *U* test, or one-way analysis of variance (ANOVA) with Kruskal-Wallis correction using GraphPad Prism, as described in figure legends. Kaplan-Meier curves were generated by GraphPad Prism, and log-rank test was used to assess the significance of survival outcomes.

Mixed effect model was applied considering group and treatment as categorical variables and time as fixed effect. Basal values were also included as covariate. Interaction (group*treatment) was also considered in the analyses. Outcome changes over time were evaluated, and stratified group analyses were performed to assess differences between treatments. Logarithmic transformation was applied to reach normal distribution of residuals. All statistical tests

were two sided, and results with $P < 0.05$ were considered statistically significant. Statistical analyses were performed using the R statistical software (version 4.2.3).

For the experiment shown in Fig. 7C, selected lists of enriched Hallmark gene sets from the GSEA results from patients with PGAP1^{Low} versus PGAP1^{High} and LSD1i-sensitive versus LSD1i-resistant TICs were compared using the implementation of the hypergeometric test “phyper” in R. The hypergeometric P values were corrected using Benjamini-Hochberg correction. Corrected hypergeometric P values ($-\log_{10}$) are reported as bar plots. Only a selection of tested hallmarks is reported.

The correlation analysis between the expression of LSD1 and the pathways of glycolysis and OXPHOS was conducted as follows. First, the Gliovis database (43) was interrogated to extract Spearman correlation values between the expression level of LSD1 and all genes in the human genome, using the CGGA and Gravendeel datasets. Only samples with tumor type “primary” and subtype defined as “all” were used. We then selected gene pairs associated with $|\text{correlation index}| > 0.3$ and an adjusted $P < 0.05$. Subsequently, complete gene sets for glycolysis and OXPHOS were retrieved from the Kyoto Encyclopedia of Genes and Genomes database (119), for a total of 67 glycolysis-related genes and 135 genes related to OXPHOS. Last, correlation plots were generated using the “corrplot” package in R, displaying only the intersections among the genes belonging to the selected pathways and characterized by significant correlations with LSD1.

All data are represented as mean and SD or SEM and described in the figure legends. Statistical significance was defined as $*P < 0.05$; $**P < 0.01$; $***P < 0.001$.

Supplementary Materials

The PDF file includes:

Figs. S1 to S6

Tables S1 and S3

Legend for table S2

Other Supplementary Material for this manuscript includes the following:

Table S2

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