



# Human Homeobox Genes in Development and Cancer

**Samuel Adinoyi Adavba<sup>a\*</sup>**

<sup>a</sup> Kaduna State University, Kaduna, Nigeria.

## **Author's contribution**

*The sole author designed, analysed, interpreted and prepared the manuscript.*

## **Article Information**

### **Open Peer Review History:**

This journal follows the Advanced Open Peer Review policy. Identity of the Reviewers, Editor(s) and additional Reviewers, peer review comments, different versions of the manuscript, comments of the editors, etc are available here: <https://www.sdiarticle5.com/review-history/109384>

**Review Article**

**Received: 15/09/2023**

**Accepted: 22/11/2023**

**Published: 08/12/2023**

## **ABSTRACT**

The homeobox (HOX) genes encode highly conserved, homeodomain-containing transcriptional factors that play a central role in embryonic development and the maintenance of cellular identity crucial to the differentiation of adult stem cells. Implicitly, the pathophysiological relevance of these genes is life-long as evident in many developmental anomalies and adult disorders, particularly cancers. This review considers the normal pattern of HOX gene expression and the signalling pathways involved in its regulation, discusses the consequences of HOX gene dysregulation associated with dysmorphogenesis and carcinogenesis, and the plausibility of a common mechanism underlying both processes. Finally, it looks at the mechanisms that underlie potential interventions in cases where cancers are promoted by HOX gene dysregulation.

*Keywords: Homeobox genes; transcription factors; gene dysregulation; stem cell; carcinogenesis.*

## **1. INTRODUCTION**

The development of a multicellular organism from a single cell is a programmed and finely tuned process as epitomized by the

developmental journey of the single-celled zygote (a totipotent cell) through a complex process of morphogenesis to a fully formed, normal fetus. This process imposes the necessity to organize and position different cell types

*\*Corresponding author: E-mail: samueladavba@gmail.com;*

during development and retain the positional information throughout the organism's life [1].

A myriad of genes, transcription factors, and signalling molecules are employed promptly for this process to deliver the expected outcome. One group of transcription factor-encoding genes, the HOX genes, have captivated the interest of many researchers in the biomedical disciplines over the years because of their crucial role in this developmental process. In bilaterian embryos, they play a pivotal role in patterning body structures and in defining the body plan along the head-tail axis [2].

The HOX genes are a subset of the homeobox genes family. The latter constitute the second largest transcription factor-encoding genes in the human genome, comprising about 257 genes, 39 of which form the human HOX genes. All homeobox genes contain a well-conserved signature DNA sequence of around 180 base pairs long [3]. This DNA sequence, ubiquitous in homeobox genes, was the reason for the coinage "HOX genes", derived from the contraction of **homeobox**. However, because it later became clear that HOX genes are not the only ones possessing the homeobox, they are no longer synonymous with homeobox genes [4].

The first homeobox sequence was discovered by Walter Gehring in 1983 when he isolated this DNA segment from a mutated gene responsible for a developmental anomaly in *Drosophila*, where legs grow from the head instead of the antennae [5]. This phenomenon is referred to as a homeotic transformation (a change of one complete body structure into another). The mutated gene responsible for this phenotype was identified as *antennapedia*, which expectedly contains the 180-base pair sequence that encodes a DNA binding domain [4]. Because the transcription factors encoded by HOX genes regulate gene expression and cell differentiation early in embryonic development, particularly the differentiation of embryonic stem cells (ESC), mutations in HOX genes are likely to result in developmental disorders.

HOX genes continue to be expressed throughout adult life. The topographic identity ingrained by their expression during development is retained in many adult tissues, specifically in ESC-derived adult stem cells (ASCs) such as hematopoietic stem cells (HSCs), mesenchymal stem cells

(MSCs), epithelial stem cells (EpSCs), and neural stem cells (NSCs) [6,7]. This intrinsic positional specificity is maintained during various stages of cell differentiation and provides a mechanism for retaining cell identity and fate restriction in distinct cell types [8]. Therefore, the consequences of aberrations in HOX gene expression are life-long [9]

## 2. STRUCTURAL ARRANGEMENT AND FUNCTIONS OF HOX GENES

The HOX genes in many animal species are organized as clusters, each cluster containing many genes. This pattern is evident in humans, where the 39 HOX genes are organized in four clusters (A, B, C, and D), mapped at 7p15, 17q21.2, 12q13, and 2q31, respectively on the human chromosomes [10].

The first cluster contains genes expressed primarily in the head and neck regions. The genes of the second cluster have their transcriptional influence in the thoracic and lumbar regions of the spine. The genes of the third cluster are expressed in the thoracic and lumbar regions and the limbs, while the fourth cluster contains genes expressed primarily in the pelvic and tail regions. The orderly expression and regulation of the HOX genes depend on their arrangement so rearrangements and, of course, mutations of the genes can lead to developmental abnormalities and diverse functional disorders, including cancer [11].

HOX-encoded transcription factors bind to specific DNA sequences (enhancers) through which they regulate the expression of downstream target genes, by either repressing or activating the expression of numerous genes. The binding capability is conferred by a 60-amino acid protein, the homeodomain, translated from the 180 base pair homeobox sequence [12]. The homeodomain folds into the helix-turn-helix motif, a structural conformation that is the substructure of many DNA-binding proteins. Each helix-turn-helix consists of two  $\alpha$  helices linked by a short strand of amino acids that binds to the major groove of DNA [12]

Several cellular processes are involved in normal human development, including (1) cell migration from primordial sites to where they will ultimately function, (2) the terminal differentiation of precursor cells into specialized cells, (3) the association of groups of cells with similar fates,

and (4) the carving of structures and segmental boundaries. As a result, targets of the *HOX*-encoded transcription factors promote processes such as cell migration, cell division, cell adhesion, and apoptosis, which underlie these cellular processes. In doing so, the *HOX* genes can act at different hierarchies of development, from the regulation of the entire framework for limb formation, at the top level, to effector genes acting to ultimately form organs, tissues, and other finer details of a given body part [13].

Similarly, cancer is a multistage disease in which cells journey from normalcy by acquiring specific capabilities which pave the way to a neoplastic change [14]. Several mutational events are involved in this transformation. Aberrations in *HOX* genes contribute to the acquisition of this set of functional capabilities that constitute the hallmarks of cancer [15].

(A) *HOX* genes comprise two exons separated by one intron; exon 2 has a 180-nucleotide sequence (homeobox) encoding the 60 amino acid DNA-binding domain called the homeodomain. (B) The 39 human *HOX* genes are clustered into the four *HOX* families, *HOXA*, *HOXB*, *HOXC*, and *HOXD*, with each family consisting of nine to eleven paralogues (related by gene duplication) assigned by numbers based on sequence similarity and cluster positions. These arrangements are responsible for the anterior-posterior specification of body segments. *HOX* gene expressions exhibit spatial and temporal collinearity: nested domains of *HOX* genes are generated (the anterior *HOX* expressions operating earlier in development and posterior *HOX* expressions occurring later) (Adapted from [16, 8])

### 3. REGULATION OF HUMAN HOX GENES

The critical role of *HOX* genes in human development necessitates tight control of both the timing and pattern of their expression. This occurs mainly at the transcriptional level, but some regulation at the translational level has been documented [17]. Transcriptional regulation is achieved within the framework of the clustered organization of the genes, which allows each cluster to share nuclear space and chromatin structure and have common regulatory elements like enhancers and promoters. The timing and the site of *HOX* gene expression depend on the relative position of the genes within the cluster [18]. This phenomenon, referred to as

collinearity, is both temporal and spatial. In temporal collinearity, the genes are expressed in a time-specific order during embryonic development, while spatial collinearity refers to the expression of the genes in a specific order along the body axis, with the 3' end of the gene cluster being expressed earlier in the anterior (head) region and the 5' end being expressed later in the posterior (tail) region [19].

These highly coordinated expression patterns of *HOX* genes suggest a degree of global transcriptional regulation of the gene clusters. However, it has been observed that single *HOX* genes often retain their anterior-posterior expression profile when randomly integrated as transgenes. Furthermore, the disintegration of the clusters in two or more pieces remains compatible with correct spatial expression patterns during development. The presence of cis-regulatory elements (the enhancers and silencers) close to the *HOX* genes might explain these observations [18]. The trans-regulators, conversely, constitute gene products, usually proteins, but also miRNAs that bind *cis*-elements to influence the transcription of *HOX* genes or bind to mRNA to prevent the translation of *HOX* transcription factors [2]. There are at least three putative *trans* regulators of *HOX* genes: retinoic acid (RA), fibroblast growth factors (FGF), and Wnt signalling [2].

Evidence suggests that the *Cdx* gene family mediates these signalling pathways, making them the direct regulators of *HOX* gene expression [20, 21]. The CDX proteins act upstream of *HOX* genes, relaying signals from RA, FGF, and Wnt canonical pathways to *HOX* promoters [22].

The *Cdx* gene family, also called caudal genes, is a group of three genes in humans, *Cdx1*, *Cdx2*, and *Cdx4*, which play significant roles during development, especially the anterior-posterior patterning of the body [23]. However, the exact mechanisms by which *Cdx* genes regulate *HOX* gene expression are still not fully understood. More research would be needed to elucidate the molecular interactions between *Cdx* and *HOX* genes.

#### 3.1 Retinoic Acid Signalling

Retinoic acid signalling involves cell communication through a vitamin A derivative, retinoic acid. This signalling is mediated by a

family of nuclear receptors, namely retinoic acid receptors (RARs) and retinoid X receptors (RXRs), which bind to retinoic acid, and form heterodimers called retinoic acid response elements (RAREs). RAREs regulate the expression of target genes [24] and are found in regulatory regions of many HOX genes [25]. It is well-documented that hypervitaminosis A causes a range of congenital malformations, including anomalies such as situs inversus, malpositioned hind limbs, spinal bifida, pituitary, and thyroid defects in mammals exposed to abnormally high levels of vitamin A during gestation [26]. Human fetuses inadvertently exposed to RA show similar profiles of defects [27], and interestingly, the timing and dose of RA exposure are crucial factors in the type and severity of malformations observed in the embryos [26].

Multiple RAREs occur in the cis-acting elements associated with *HOX1* to *HOX5* [28], and when motor neuron cultures are exposed to RA, this group of HOX genes are activated [29].

Even the more “central” genes (*HOX6* to *HOX8*) get activated by RA and tend to be progressively more sensitive with advancing developmental time [30]. The diverse and significant teratogenic effects of RA suggest its crucial role as a signalling molecule during embryonic development.

### 3.2 Fibroblast Growth Factor

Fibroblast growth factors, identified initially as proteins capable of promoting fibroblast proliferation, are made up of 22 cell-signalling proteins produced by macrophages. They exert multiple functions through their binding to and activation of fibroblast growth factor receptors (FGFRs) [31]. FGFs have quite a wide range of effects, which may include regulatory, morphological, and endocrinal functions but commonly mitogenesis [32]. In addition, they are promiscuous signalling molecules (many of the different molecules bind to the same receptor to elicit diverse effects); typically, four receptor subtypes (FGFR1, FGFR2, FGFR3, and FGFR4) are activated by the 22 FGFs to elicit diverse

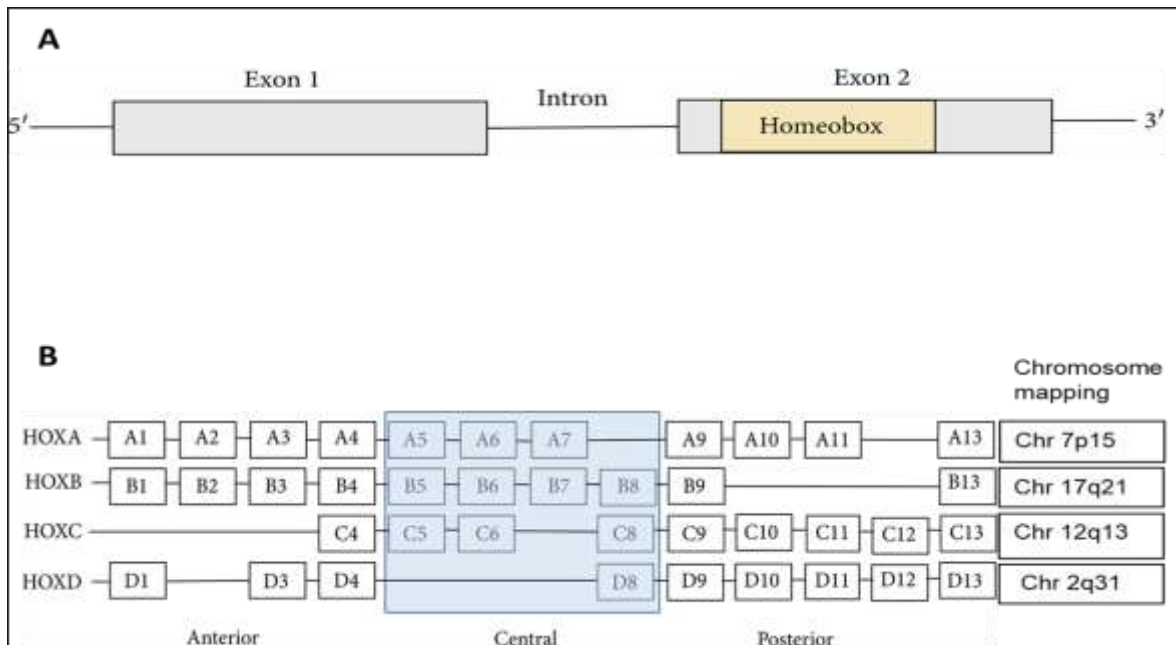
functions like anterior-posterior patterning, mesoderm induction, neural induction, limb development, and neural development, and in mature tissues angiogenesis, keratinocyte organization, and wound healing [33]. The expression of *HOX6* to *HOX9* is associated with FGF signalling and treatment of chick neural tube cultures with FGF elicits the anterior expression of *HOX6* to *HOX9*, perhaps due to the upregulation of *Cdx* [34].

### 3.3 The Wnt Signalling Pathway

In humans, the **Wingless-related integration site (WNT)** signalling pathways comprise a family of nineteen proteins whose signal transduction regulates a variety of cellular processes, including fate determination, cell migration, cell polarity, neural patterning, and organogenesis during embryonic development [35].

There are three characterized Wnt signalling pathways: the canonical Wnt pathway, the noncanonical planar cell polarity pathway, and the noncanonical Wnt/calcium pathway. They are all activated by binding a Wnt-protein ligand to a Frizzled family receptor (a transmembrane protein), activating the downstream Dishevelled protein inside the cell. Although most studies suggest that HOX gene regulation occurs primarily by the canonical Wnt signalling pathway, non-canonical Wnt signalling has been shown to also influence *HOX* regulation through crosstalk with the canonical Wnt signalling pathway [36].

The relationship between aberrant Wnt signalling and disease is quite complex, needing further studies for its elucidation. However, mutations affecting this pathway have been shown to lead to various disorders, including breast and prostate cancer, glioblastoma, and type II diabetes [35, 37]. Also, behavioural disorders have been attributed to signalling defects during the early stages of neural development [38]. Furthermore, aberrant Wnt signalling is also associated with disorders like Alzheimer's disease and lung diseases [39,40].



**Fig. 1. HOX gene structure and genome organization (schematic representation)**

#### 4. DISORDERS OF HOX GENES DYSREGULATION IN DEVELOPMENT AND DISEASE

As earlier reviewed, the expression of the HOX genes begins from early life, when they direct the differentiation of the ESC during embryogenesis and persists till later life when they maintain cell identity through ASC-specific *HOX* expression. Accordingly, the consequences of *HOX* dysregulation are life-long. Mutations in these genes affect the differentiation of the various categories of stem cells (ESC, ASC, and even the induced pluripotent stem cell [iPSC]) [41,16]. Thus, *HOX* aberrations affect embryonic development through the differentiation of ESC and influence adult pathological processes, especially carcinogenesis, through ASC differentiation in later life [42]

##### 4.1 Developmental Disorders Associated with Embryonic Stem Cell

HOX genes-associated developmental disorders derive from germline mutations in the affected genes and are heritable. Reflecting the highly conserved nature of the HOX genes, human phenotypes tend to resemble homologous mouse mutants [43]. In humans, only 10 of the 39 HOX genes, namely *HOXA1*, *HOXA2*, *HOXA11*, *HOXA13*, *HOXB1*, *HOXB13*, *HOXC13*, *HOXD4*, *HOXD10*, AND *HOXD13* have been implicated [43].

The duplication and divergence of ancestral HOX genes in vertebrates have afforded functional redundancy such that each paralogous group, composed of 2 to 4 genes, shares the ability to influence the final phenotype of the embryo. This is shown in studies where a normal or mild phenotype results from single HOX loss-of-function mutations, but a much more severe phenotype follows double or triple knockouts [44]. Accordingly, heterogeneity, variability of penetrance, and expressivity are observed in these disorders [43]. Some documented germline mutations in the 10 genes are presented in Table 1.

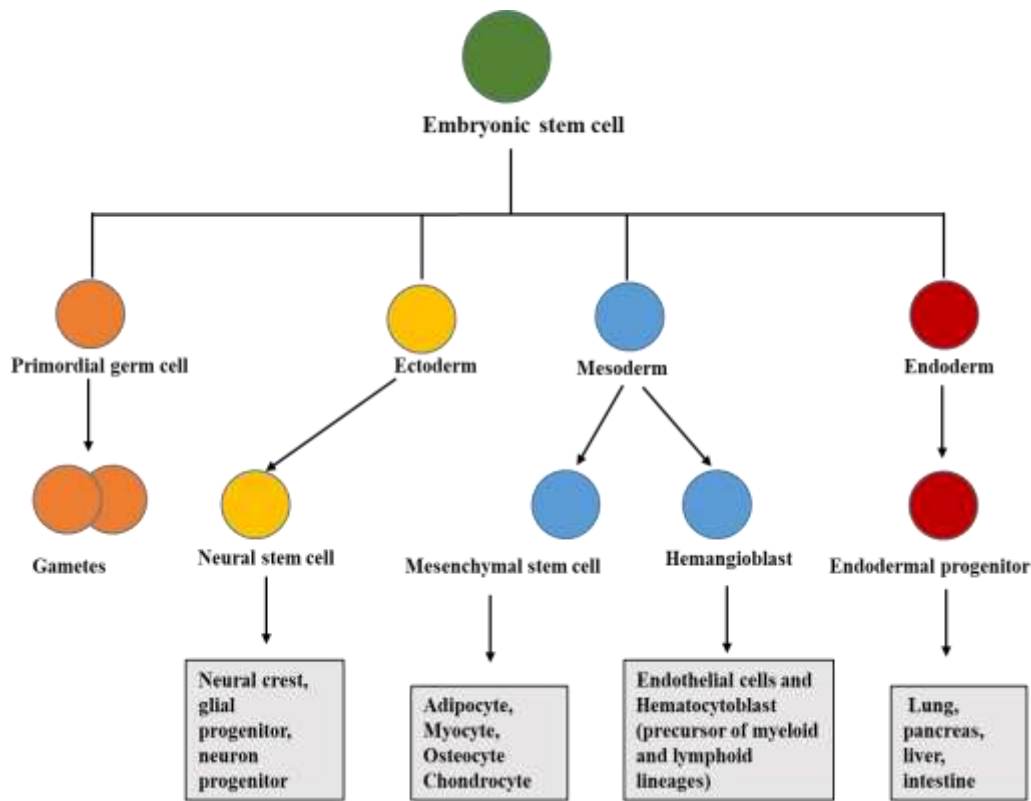
##### 4.2 Disorders Associated with Adult Stem Cells (ASCs)-Carcinogenesis

Also known as somatic stem cells, ASCs are tissue-specific cells that are precursors of different cell types peculiar to particular tissues and organs. They include hematopoietic Stem Cells (HSCs) or hematocytoblasts that generate entire blood cell lineages (Bhatleka, et al., 2018), neural stem cells (NSCs) credited with giving rise to the entire nervous system [45], and mesenchymal stem cells (MSCs) capable of differentiating into various mesoderm-derived cells (Fig. 2). Interestingly, tumour suppressor genes and oncogenes known to play central roles in carcinogenesis also play essential roles in embryogenesis, which suggests that cellular

mechanisms involved in lineage determination and differentiation during development potentially underlie tumorigenic mechanisms and differentiation during development may when dysregulated [46].

**Table 1 Human HOX gene disorders linked to germline mutations.**

HOX gene	Clinical syndrome	Molecular genetics/Mutations	References
<i>HOXA1</i>	Bosley–Salih–Alorainy Syndrome (BSAS)  Athabaskan brainstem dysgenesis syndrome(ABDS)	In BSAS: c.185delG, c.175– 176insG and c.84C>G) In ABDS: homozygous c.76CNT	[47]
<i>HOXA2</i>	Autosomal recessive microtia (a short and narrowed auditory canal, cleft palate, and sometimes unilateral facial paresis)	homozygous mutation (c.556CNA; p.Q186K)	[48]
<i>HOXA11</i>	Radioulnar synostosis and thrombocytopenia (RUSAT)	<i>HOXA11</i> deletion (c.872delA)- affects the homeodomain of exon 2, resulting in a frameshift and premature translational stop	[49]
<i>HOXA13</i>	Hand–foot–genital syndrome(HFGS) and Guttmacher syndrome(GS)	HFGS ( <i>HOXA13</i> nonsense mutation [c.1107GNA, W369X]- converts a highly conserved tryptophan residue in the homeodomain of <i>HOXA13</i> to a stop codon).	[50]
		GS (missense mutation, c.1112ANT; Q371L)	[51]
<i>HOXB1</i>	Hereditary congenital facial paresis (characterised by congenital facial palsy, hearing loss, strabismus, midface retrusion, and an upturned nose)	homozygous c.619CNT; R207C mutation in <i>HOXB1</i> , affecting a highly conserved arginine residue	[52]
<i>HOXB13</i>	Early-onset prostate cancer	<i>HOXB13</i> missense mutation (G84E)- has low penetrance	[53]
<i>HOXC13</i>	Hair and nail type ectodermal dysplasia characterised by hypotrichosis and nail dystrophy	Truncating mutations in exon 1 of <i>HOXC13</i> (c.390CNA, p.Y130X  27.6 kb deletion involving exon 1 and part of the intron; c.355delC  c.200_203dupGCCA, p.H68Qfs*84; c.404CNA, p.S135X)	[54]
<i>HOXD4</i>	Lymphoid malignancy and skeletal malformations (including bilateral cervical ribs and right sacralization of L5)	<i>HOXD4</i> missense mutation, c.242A>T; p.E81V	[55]
<i>HOXD10</i>	Congenital vertical talus (CVT)and Charcot–Marie–Tooth disease(CMT)	heterozygous missense mutation (c.956TNA; M319K) in <i>HOXD10</i>	[56]
<i>HOXD13</i>	Brachydactyly types D and E	Missense mutations (c.947CNG, S316C; c.964ANC, I322L) within the homeodomain of <i>HOXD13 c</i>	[57]
	Syndactyly type II	Mutations (c.916CNT, R306W; c.683GNT, G228V) within <i>HOXD13</i>	[58]
	Brachydactyly–syndactyly	Deletion (c.157_177del) in <i>HOXD13</i>	[58]



**Fig. 2. Different lineages of ASCs after differentiation from ESC**  
<https://www.cellsignal.com/pathways/stem-cell-and-lineage-markers-pathways?requestid=1751872&requestid=2188300>

Accordingly, these vast repertoires of stem cells and their descendants create endless tumorigenic potential in the context of HOX gene dysregulation. This is especially relevant in renewing systems with high turnovers such as hematopoietic tissue and gut epithelia. Here, stem cells are the only ones that persist long enough in the tissue to be able to go through the prolonged sequence of successive mutation and selection requisite for the multistage concept of carcinogenesis [59]. Indeed, abnormalities of HOX gene expression have been observed in many haematological malignancies and solid tumours. The next section of this review focuses on a few examples of HSC and Endodermal Stem cells.

#### 4.2.1 Dysregulation of HOX genes in hematopoietic stem cells (HSCs)

HSCs are the foundation of hematopoiesis, generating all terminally differentiated and functional hematopoietic lineages. These cells develop from two direct descendants of the HSC namely, the lymphoid progenitor (gives rise to lymphocytes) and myeloid progenitor cell from

which neutrophils, basophils, eosinophils, monocytes, and platelets develop [60].

The expression of Hox genes in hematopoiesis is lineage-specific, and within a given lineage, differentiation-restricted. For instance, in HSC, the expression of *HOXA9*, *HOXB4*, and *HOXB6* regulate self-renewal while *HOXA5* and *HOXA9* expression are involved in HSC proliferation and differentiation to common myeloid progenitors (CMP). *HOXA9* regulates the differentiation of HSC into common lymphoid progenitor (CLP), and *HOXA5* and *HOXC8* are known to be expressed during the erythroid differentiation of megakaryocyte-erythrocyte progenitors (MEP). *HOXC8* play a regulatory role during the differentiation of granulocyte-monocyte progenitor (GMP) cells [16].

Chromosomal translocations that create fusion genes commonly underlie transcriptional perturbation observed in many leukaemia. Changes in HOX gene expression associated with chromosomal translocation have been demonstrated in acute myelogenous leukaemia (AML) [1]. But of particular interest are

leukaemias harbouring the mixed lineage leukaemia (MLL) gene mutation. The mutations usually involve the fusion of *MLL* to a partner gene. Over 50 different such partners are known but fusion to *AF4* to produce *MLL-AF4* is the most common [61]). *MLL* encodes a histone methyltransferase, a transcription factor of HOX genes, which it positively regulates upon direct binding. *MLL* mutations result in hematological malignancies from sustained *HOX* expression and stalled differentiation [62]. Characteristically, tumours (AML and ALL) harbouring *MLL* mutations are aggressive and associated with poor prognosis [62].

#### 4.2.2 Dysregulation of HOX genes in endodermal stem cells

The definitive endoderm forms at gastrulation when epiblast cells migrate through the primitive streak to form a layer beneath the mesoderm. This sheet of endoderm folds to form the primitive gut tube and comprises three portions, the foregut (eventually giving rise to the oesophagus, trachea, lungs, thyroid, parathyroid, thymus, stomach, liver, biliary system and pancreas), the midgut (forming small intestine and part of the colon) and the hindgut, which forms the rest of the colon and upper anal canal [63]. Various tissue-specific stem cells exist in these histological domains and retain the capacity for self-renewal and tissue-specific differentiation during which HOX gene expression plays a role. Dysregulation of HOX gene expression in these tissues can promote carcinogenesis.

In the colon, for instance, the colonic crypts formed by the invagination of the lining simple columnar epithelia, house the tissue-specific stem cells at its base, capable of regenerating all intestinal cell types (Humphries and Wright, 2008). *HOXA4*, *HOXA9*, and *HOXD10* are expressed in normal colonic stem cells during self-renewal and differentiation and dysregulation of these genes produces aberrant stem cells that promote the development of colorectal cancer (CRC). In particular, *HOXB9* is known to be an upregulated gene at all stages of CRC development [64]. On the other hand, the loss of expression of *CDX2* and *NKX3.1* in colon cancer represents a case of HOX gene down-regulation [1].

#### 4.2.3 Related therapeutic prospects

Although the mechanisms underlying many cancers have not been fully elucidated, some

therapeutic options, including gene therapy, small molecule inhibitors or RNA interference (RNAi), and epigenetic modification to modulate transcription, are already under consideration.

RNAi is being evaluated as an inhibitor of *HOXB7*, a gene-silencing mechanism to ameliorate the growth of prostate cancer cells [65]. In addition, the RNAi-mediated knockdown of *HOXA10* can be used as a treatment option in multi-drug resistance CML [66]. Gene therapy targeting the replacement of functional copies of the dysregulated genes has also been explored. In one study, it was shown that overexpression of *HOXA5* inhibits the proliferation and induces the apoptosis of cervical cancer cells [67]

Finally, epigenetic reprogramming (DNA methylation and histone acetylation) of the HOX genes can also be used to regulate their expression in the therapy of cancers in which HOX dysregulation is a driving force. Such drugs would be inhibitors of DNA-methyltransferases (DNMTs), histone methyltransferases (HMTs), demethylases (HDMs) or deacetylases (HDACs), reversing the epigenetic tags on gene promoters [68].

## 5. CONCLUSION

The timely, orderly pattern of HOX gene expression spanning embryonic development to adulthood is a compelling example of the general dynamism of genetic expression and lays bare the potential consequences of its perturbation. Additionally, the fact that some molecular pathways contribute to both normal development and disease suggests that wellness is maintained within a finely regulated balance. A lot still needs to be elucidated about the full profile of HOX gene functions and regulation, which hopefully, would open new vistas to more intervention targets, especially in the enduring battle against cancer.

## CONSENT AND ETHICAL APPROVAL

It is not applicable.

## COMPETING INTERESTS

The author has declared that no competing interests exist.

## REFERENCES

1. Grier D, Thompson A, Kwasniewska A, McGonigle G, Halliday H, Lappin T. The



- pathophysiology of HOX genes and their role in cancer. *The Journal of Pathology*. 2005;205(2):154-171.  
Available:<https://doi.org/10.1002/path.1710>
2. Montavon T, Soshnikova N. Hox gene regulation and timing in embryogenesis. *Seminars in Cell & Developmental Biology*. 2014;34:76-84.  
Available:<https://doi.org/10.1016/j.semcd.2014.06.005>
  3. Bürglin TR, Affolter M. Homeodomain proteins: an update. *Chromosoma*. 2016; 125(3):497–521.  
DOI:10.1007/s00412-015-0543-8.  
PMC 4901127.  
PMID 26464018.
  4. Holland PW, Booth HA, Bruford EA. Classification and nomenclature of all human homeobox genes. *BMC Biology*. 2007;5:47.  
DOI:10.1186/1741-7007-5-47. PMC
  5. Brinkman J. Walter jakob gehring (1939-2014)". *Embryo Project Encyclopedia* ISSN: 1940-5030; 2014.  
Available:<https://hdl.handle.net/10776/8274>
  6. Dulak J, Szade K, Szade A, Nowak W and Józkwicz A. Adult stem cells: Hopes and hypes of regenerative medicine. *Acta Biochim. Pol.* 2015;62:329–337.  
DOI:10.18388/abp.2015\_1023
  7. Cable J, Fuchs E, Weissman I, Jasper H, Glass D, Rando TA et al. Adult stem cells and regenerative medicine symposium report. *Ann. N.Y. Acad. Sci.* 2020; 1462:27–36.  
DOI:10.1111/nyas.14243
  8. Steens J, Klein D. HOX genes in stem cells: Maintaining cellular identity and regulation of differentiation. *Frontiers in Cell and Developmental Biology*. 2022; 10:1002909.  
Available:<https://doi.org/10.3389/fcell.2022.1002909>
  9. Lappin TR, Grier DG, Thompson A, Halliday HL. HOX Genes: Seductive science, mysterious mechanisms. *The Ulster Medical Journal*. 2006;75(1):23-31.  
Available:<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1891803/>
  10. Duboule D. The vertebrate limb: A model system to study the Hox/HOM gene network during development and evolution. *Bioessays*. 1992;14(6):375–84.
  11. Kappen C. Disruption of the homeobox gene Hoxb-6 in mice results in increased numbers of early erythrocyte progenitors. *Am J Hematol.* 2000; 65(2):111-118.  
DOI:10.1002/1096-8652(200010)65:2<111::aid-ajh4>3.0.co;2-z
  12. Bürglin TR, Affolter M. Homeodomain proteins: An update. *Chromosoma*. 2016;125:497–521.  
Available:<https://doi.org/10.1007/s00412-015-0543-8>
  13. Pearson JC, Lemons D, McGinnis W. Modulating HOX gene functions during animal body patterning. *Nature Reviews. Genetics*. 2005;6(12):893–904.  
Developmental genetics of the vertebrate axial skeleton. *Curr Opin Genet Dev.*; 2005;10(3):337-342.  
DOI:10.103(2000)
  14. Douglas H. Hallmarks of cancer: New dimensions. *Cancer Discov.* 2022;12(1): 31–46.  
Available:<https://doi.org/10.1158/2159-8290.CD-21-1059>
  15. Brotto DB, Siena ÁDD, de Barros II, Carvalho SDCES, Muys BR, Goedert L, Cardoso C, Praça JR, Ramão A, Squire JA, Araujo LF, Silva WAD Jr. Contributions of HOX genes to cancer hallmarks: Enrichment pathway analysis and review. *Tumour biology: The Journal of the International Society for Oncodevelopmental Biology and Medicine*. 2020;42(5):1010428320918050.  
Available:<https://doi.org/10.1177/1010428320918050>
  16. Bhatlekar S, Fields, JZ, Boman BM. Role of HOX Genes in Stem Cell Differentiation and Cancer. *Stem Cells International*. 2018;3569493.
  17. Kondrashov N, Pusic A, Stumpf CR, Shimizu K, Hsieh AC, Xue S, Ishijima J, Shiroishi T, Barna M. Ribosome-mediated specificity in Hox mRNA translation and vertebrate tissue patterning. *Cell*. 2011;145(3):383-397.  
Available:<https://doi.org/10.1016/j.cell.2011.03.028>
  18. Duboule D. The rise and fall of Hox gene clusters. *Development*. 2007;134 (14): 2549–2560.  
DOI: <https://doi.org/10.1242/dev.001065>

19. Mallo M, Alonso CR. The regulation of Hox gene expression during animal development. *Development*. 2013; 140(19):3951-3963. DOI 10.1242/dev.068346
20. Bel-Vialar S, Itasaki N, Krumlauf R. Initiating Hox gene expression: In the early chick neural tube, differential sensitivity to FGF and RA signalling subdivides the HoxB genes into two distinct groups. *Development (Cambridge)*. 2002;129(22):5103-5115. Available:<http://dev.biologists.org/content/129/22/5103>
21. Wang Y, Yabuuchi A, Ducharme DM, Ray MK, Chawengsaksophak K, Arche, TK, Daley GQ. Cdx gene deficiency compromises embryonic hematopoiesis in the mouse. *Proceedings of the National Academy of Sciences*. 2008;105(22):7756-7761. Available:<https://doi.org/10.1073/pnas.0708951105>
22. Lohnes, David. The Cdx1 homeodomain protein: An integrator of posterior signalling in the mouse. *BioEssays*. 2003; 25(10):971–980.
23. Neijts R, Amin S, van Rooijen C, Deschamps J. Cdx is crucial for the timing mechanism driving colinear Hox activation and defines a trunk segment in the Hox cluster topology. *Dev Biol*. 2017; 422(2):146-154. DOI:10.1016/j.ydbio.2016.12.024
24. Rhinn M, Dolle P. Retinoic acid signalling during development. *Development*, 2012;139:843–58.
25. Loring JF, Porter JG, Seilhammer J, Kaser MR and Wesselschmidt R. Expression Profile of Embryonic Stem Cells and Embryonic Stem Cell-derived Neurons, *Restorative Neurology and Neuroscience*. 2001;18:81-88.
26. Shenefelt RE. Morphogenesis of malformations in hamsters caused by retinoic acid: relation to dose and stage at treatment. *Teratology*. 1972;5(1):103–118. Available:<https://doi.org/10.1002/tera.1420050115>
27. Lammer EJ, Chen DT, Hoar RM, Agnish ND, Benke PJ, Braun JT, Curry CJ, Fernhoff PM, Grix AW, Jr, Lott IT. Retinoic acid embryopathy. *The New England Journal of Medicine*. 1985;313(14):837–841. Available:<https://doi.org/10.1056/NEJM198510033131401>
28. Nolte C, Jinks T, Wang X, Martinez Pastor MT, Krumlauf R. Shadow enhancers flanking the HoxB cluster direct dynamic Hox expression in early heart and endoderm development. *Dev Biol*, 2013; 383:158–73
29. Mazzoni EO, Mahony S, Peljto M, Patel T, Thornton SR, McCuine S et al. Saltatory remodelling of Hox chromatin in response to rostrocaudal patterning signals. *Nat Neurosci*. 2013;16:1191–8.
30. Oosterveen T, Niederreither K, Dollé P, Chambon P, Meijlink F, Deschamps J. Retinoids regulate the anterior expression boundaries of 5' Hoxb genes in the posterior hindbrain. *The EMBO Journal*. 2003;22(2):262-269. Available:<https://doi.org/10.1093/emboj/cdg029>
31. Yun R, Won JE, Jeon E, Lee S, Kang W, Jo H, Jang H, Shin US, Kim W. Fibroblast growth factors: biology, function, and application for tissue regeneration. *Journal of Tissue Engineering*; 2010. Available:<https://doi.org/10.4061/2010/218142>
32. Grieb TA, Burgess WH. The mitogenic activity of fibroblast growth factor-1 correlates with its internalization and limited proteolytic processing. *Journal of cellular physiology*. 2000;184(2):171–182. Available:[https://doi.org/10.1002/1097-4652\(200008\)184:2<171::AID-JCP4>3.0.CO;2-J](https://doi.org/10.1002/1097-4652(200008)184:2<171::AID-JCP4>3.0.CO;2-J)
33. Bottcher R, Niehrs C. Fibroblast growth factor signalling during early vertebrate development. *Endocrine Reviews*. 2005; 26(1):63-77. Available:<https://doi.org/10.1210/er.2003-0040>
34. Van den Akker E, Forlani S, Chawengsaksophak K, de Graaff W, Beck F, Meyer BI et al. Cdx1 and Cdx2 have overlapping functions in anteroposterior patterning and posterior axis elongation. *Development*. 2002;129:2181–93.
35. Komiya Y, Habas R. Wnt signal transduction pathways. *Organogenesis*. 2008;4(2):68-75. Available:<https://doi.org/10.4161/org.4.2.5851>
36. Rella L, Fernandes Póvoa EE, Mars J, Ebbing AL, Schoppink L, Betist MC, Korswagen HC. A switch from noncanonical to canonical Wnt signalling

- stops neuroblast migration through a Slit–Robo and RGA-9b/ARHGAP–dependent mechanism. *Proceedings of the National Academy of Sciences*. 2021; 118(12):e2013239118. Available: <https://doi.org/10.1073/pnas.2013239118>
37. Logan CY, Nusse R. The Wnt signalling pathway in development and disease; 2004. Available: <https://doi.org/10.1146/annurev.cellbio.20.010403.113126>
  38. Mulligan KA, Chetty NR. Neurodevelopmental perspectives on WNT signalling in psychiatry. *Molecular Neuropsychiatry*. 2017;2(4):219-246. Available: <https://doi.org/10.1159/000453266>
  39. Arnés M, Casas Tintó S. Aberrant Wnt signalling: A special focus in CNS diseases. *Journal of Neurogenetics*. 2017;31(4):216–222. Available: <https://doi.org/10.1080/01677063.2017.1338696>
  40. Aros CJ, Pantoja CJ, Gomperts BN. Wnt signalling in lung development, regeneration, and disease progression. *Communications Biology*. 2021;4(1):1-13. Available: <https://doi.org/10.1038/s42003-021-02118-w>
  41. Kitajima K, Nakajima M, Kanokoda M, Kyba M, Dandapat A, Tolar J, Saito MK, Toyoda M, Umezawa A, Hara T. GSK3β inhibition activates the CDX/HOX pathway and promotes hemogenic endothelial progenitor differentiation from human pluripotent stem cells. *Experimental Hematology*. 2016;44(1):68-74.e10. Available: <https://doi.org/10.1016/j.exphem.2015.09.007>
  42. Bhatlekar SJ, Fields JZ, Boman BM. HOX genes and their role in the development of human cancers, *Journal of Molecular Medicine*. 2016; 92:8(811–823).
  43. Quinonez SC, Innis JW. Human HOX gene disorders. *Mol Genet Metab*. 2014;111(1):4-15. doi:10.1016/j.ymgme.2013.10.012
  44. Wellik DM. Chapter 9 Hox genes and vertebrate axial pattern. *Current Topics in Developmental Biology*, 2009;88:257-278. Available: [https://doi.org/10.1016/S0070-2153\(09\)88009-5](https://doi.org/10.1016/S0070-2153(09)88009-5)
  45. Zhao X, Moore DL. Neural stem cells: developmental mechanisms and disease modelling. *Cell and Tissue Research*. 2018; 371(1):1–6.
  46. Available: <https://doi.org/10.1007/s00441-017-2738-1> Feng Y, Zhang T, Wang Y, Xie M, Ji X, Luo X, Huang, W, Xia L. Homeobox Genes in Cancers: From Carcinogenesis to Recent Therapeutic Intervention. *Frontiers in Oncology*. 2021;11. Available: <https://doi.org/10.3389/fonc.2021.770428>
  47. Bosley TM, Alorainy IA, Salih MA, Aldhalaan HM, Abu-Amero KK, Oystreck DT, Tischfield MA, Engle EC, Erickson RP. The clinical spectrum of homozygous HOXA1 mutations. *American Journal of Medical Genetics Part A*. 2008;146A(10): 1235-1240. Available: <https://doi.org/10.1002/ajmg.a.32262>
  48. Alasti F, Sadeghi A, Sanati MH, Farhadi M, Stollar E, Somers T, Van Camp G. A mutation in HOXA2 is responsible for autosomal-recessive microtia in an Iranian family. *The American Journal of Human Genetics*. 2008;82(4):982-991. Available: <https://doi.org/10.1016/j.ajhg.2008.02.015>
  49. Thompson AA and Nguyen LT. Amegakaryocytic thrombocytopenia and radio-ulnar synostosis are associated with HOXA11 mutation. *Nat. Genet*. 2000; 26(397–398)
  50. Mortlock DP, Innis JW. Mutation of HOXA13 in hand-foot-genital syndrome. *Nature Genet*. 1997;15:179-181.
  51. Guttmacher AE. Autosomal dominant preaxial deficiency, postaxial polydactyly, and hypospadias. *American Journal of Medical Genetics*, 1993;46(2):219-222. Available: <https://doi.org/10.1002/ajmg.1320460223>
  52. Webb BD, Shaaban S, Gaspar H, Cunha LF, Schubert CR, Hao K, Robson CD, Chan W, Andrews C, MacKinnon S, Oystreck DT, Hunter DG, Iacovelli AJ, Ye X, Camminady A, Engle E. C, Jabs EW. HOXB1 founder mutation in humans recapitulates the phenotype of Hoxb1–/– mice. *The American Journal of Human Genetics*. 2012;91(1):171-179. Available: <https://doi.org/10.1016/j.ajhg.2012.05.018>

53. Ewing CM, Ray AM, Lange EM, Zuhlke KA, Robbins CM, Tembe WD et al. Germline mutations in HOXB13 and prostate-cancer risk. *N. Engl. J. Med.* 2012;366:141–149.
54. Lin Z, Chen Q, Shi L, Lee M, Giehl KA, Tang ZZ et al. Loss-of-function mutations in HOXC13 cause pure hair and nail ectodermal dysplasia. *Am. J. Hum. Genet.* 2012;2:906–911. DOI:10.1002/bies.10340. PMID 14505364
55. Thim S, Remacle S, Picard J, Cornu G, Gofflot F, Rezsohazy R, Verellen-Dumoulin C. Mutation analysis of the HOX paralogous 4–13 genes in children with acute lymphoid malignancies: Identification of a novel germline mutation of HOXD4 leading to a partial loss-of-function. *Human Mutation.* 2005;25(4):384-395. Available:https://doi.org/10.1002/humu.20155
56. Shrimpton AE, Levinsohn EM, Yozowitz JM, Packard DS, Cady RB, Middleton FA, Persico AM, Hootnick DR. A HOX gene mutation in a family with isolated congenital vertical talus and Charcot-marie-tooth disease. *The American Journal of Human Genetics.* 2004;75(1):92-96. Available:https://doi.org/10.1086/422015
57. Goodman F, Giovannucci-Uzielli M, Hall C, Reardon W, Winter R, Scambler P. Deletions in HOXD13 Segregate with an Identical, Novel Foot Malformation in Two Unrelated Families. *The American Journal of Human Genetics.* 1998;63(4):992-1000. Available:https://doi.org/10.1086/302070
58. Zhao X, Sun M, Zhao J, Leyva JA, Zhu H, Yang W, Zeng X, Ao Y, Liu Q, Liu G, Lo WH, Jabs EW, Amzel LM, Shan X, Zhang X. Mutations in HOXD13 underlie syndactyly type v and a novel brachydactyly-syndactyly syndrome. *The American Journal of Human Genetics.* 2007;80(2):361-371. Available:https://doi.org/10.1086/511387
59. Moolgavkar SH, Luebeck EG. Multistage carcinogenesis and the incidence of human cancer. *Genes, chromosomes & cancer.* 2003;38(4):302–306. Available:https://doi.org/10.1002/gcc.10264
60. Dzierzak E, Speck NA. Of lineage and legacy: The development of mammalian hematopoietic stem cells. *Nat Immunol.* 2008;9(129-136).
61. Meyer C, Hofmann J, Burmeister T, Gröger D, Park TS, Emerenciano M, Pombo de Oliveira M, Renneville A, Villarese P, Macintyre E, Cavé H, Clappier E, Mass-Malo K, Zuna J, Trka J De Braekeleer E, De Braekeleer M, Oh SH, Tsaur G, Fechina L, Marschalek R. The MLL recombinome of acute leukaemias in 2013. *Leukaemia.* 2013;27(11):2165–2176. Available:https://doi.org/10.1038/leu.2013.135
62. Muntean AG, Hess J.L. The pathogenesis of mixed lineage leukemia. *Annual Review of Pathology.* 2012;7:283. Available:https://doi.org/10.1146/annurev-pathol-011811-132434
63. Cheng X, Tyaboonchai A, Gadue P. Endodermal Stem Cell Populations Derived from Pluripotent Stem Cells. *Current Opinion in Cell Biology.* 2013; 25(2):265. Available:https://doi.org/10.1016/j.ceb.2013.01.006
64. Bhatlekar S, Addya S, Salunek M, Orr CR, Surrey S, McKenzie S, Fields JZ and Boman BM. Identification of a developmental gene expression signature, including hox genes, for the normal human colonic crypt stem cell niche: Overexpression of the signature parallels stem cell overpopulation during colon tumorigenesis. *Stem Cells and Development.* 2014;23(2):167-179. Available:https://doi.org/10.1089/scd.2013.0039
65. Kim JH, Dhanasekaran SM, Mehra R, Tomlins SA, Gu W, Yu J, Kumar-Sinha C, Cao X, Dash A, Wang L, Ghosh D, Shedden K, Montie JE, Rubin MA, Pienta KJ, Shah RB, Chinnaiyan AM. Integrative analysis of genomic aberrations associated with prostate cancer progression. *Cancer Research.* 2007;67(17):8229–8239. Available:https://doi.org/10.1158/0008-5472.CAN-07-1297
66. Yi YJ, Jia XH, Wang JY, Li YJ, Wang H, Xie SY. Knockdown of HOXA10 reverses the multidrug resistance of human chronic myelogenous leukaemia K562/ADM cells by downregulating P-gp and MRP-1. *International journal of molecular medicine.* 2016;37(5):1405–1411. Available:https://doi.org/10.3892/ijmm.2016.2539Humphries A, Wright NA. Colonic crypt organization and tumorigenesis.

- Nature Reviews Cancer, 2008;8(6):415-424.  
Available:<https://doi.org/10.1038/nrc2392>
67. Wang Z, Yu C, Wang H. HOXA5 inhibits the proliferation and induces the apoptosis of cervical cancer cells via regulation of protein kinase B and p27. *Oncology reports*, 2019;41(2):1122–1130. Available:<https://doi.org/10.3892/or.2018.6874>
68. Paço A, Garcia B, Freitas R. Methylation in HOX Clusters and its applications in cancer therapy. *Cells*. 2020;9(7). Available:<https://doi.org/10.3390/cells9071613>

© 2023 Adavba; This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/4.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

*Peer-review history:*

*The peer review history for this paper can be accessed here:*  
<https://www.sdiarticle5.com/review-history/109384>