

Article



Evening Primrose Oil improves chemotherapeutic effects in Human Pancreatic Ductal Adenocarcinoma cell lines. A preclinical study. 4

Laura Zeppa ^{1,2,†}, Cristina Aguzzi ^{1,2,†}, Giorgia Versari ¹, Margherita Luongo ³, Maria Beatrice Morelli ^{1,2}, Federica 5 Maggi⁴, Consuelo Amantini⁴, Giorgio Santoni¹, Oliviero Marinelli^{1,2,*}, Massimo Nabissi^{1,2,*} 6

- ¹ School of Pharmacy, University of Camerino, 62032 Camerino (MC), Italy; laura.zeppa@unicam.it (L.Z.); cristina.aguzzi@unicam.it (C.A.); giorgia.versari@studenti.unicam.it (G.V.); mariabeatrice.morelli@unicam.it (M.B.M.); giorgio.santoni@unicam.it (G.S.);
 - Integrative Therapy Discovery Lab, University of Camerino, 62032 Camerino (MC), Italy
- "Maria Guarino" Foundation-AMOR No Profit Association, 80078 Pozzuoli, Italy; margherita.lu-11 ongo@aslnapoli2nord.it (M.L.) 12 13
- School of Bioscience and Veterinary Medicine, University of Camerino, 62032 Camerino (MC), Italy; federica.maggi@unicam.it (F.M.); consuelo.amantini@unicam.it (C.A.)
- Correspondence: oliviero.marinelli@unicam.it (O.M.); massimo.nabissi@unicam.it (M.N.); Tel.: +39-0737-403306
- ⁺ These authors have equally contributed to this work.

Abstract: Evening Primrose Oil (EPO), obtained from the seeds of Evening Primrose (Oenothera L.), 18 was largely used as dietary supplement and users increased after cancer diagnosis. Human Pancre-19 atic Ductal Adenocarcinoma (PDAC) is an aggressive disease correlated with a poor clinical prog-20 nosis and a very low response rate to common chemotherapy. The aim of the work was to study the 21 potential improvement of EPO for chemotherapeutics effects, in PANC-1 and MIAPaCa-2 cell lines. 22 Cytotoxicity, cell death, ROS production and EPO anticancer activity associated with the main 23 chemotherapeutic drugs commonly used in therapy were investigated. Results showed that EPO 24 reduced PDAC cell viability and increased Paclitaxel (PTX) efficacy. These evidences suggested that 25 EPO may be used as potential supplement to increase chemotherapeutic efficacy in PDAC therapy. 26

Keywords: pancreatic cancer, human pancreatic ductal adenocarcinoma, evening primrose oil, Oe-27 nothera biennis, chemoresistance, Paclitaxel chemoresistance, cytotoxicity. 28

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1. Introduction

Research of natural derivatives as adjuvant in cancer therapy is of current interest 31 and several studies reported the potential anticancer activity of compounds derived from 32 medicinal plants [1–5]. Different studies indicate that a large population of cancer patients 33 make dietary changes following cancer diagnosis [6], as reported by the DietCompLyf 34 study for breast cancer cases. Among the main supplements, Evening Primrose Oil (EPO) 35 was largely used and the proportion of users significantly increased after diagnosis [7]. 36

Evening Primrose (Oenothera L.) belongs to the Onagraceae family and Oenothera bi-37 ennis is the most numerous and studied species. EPO, obtained from the seeds, is used as 38 dietary supplement [8–10] and it is composed for a 98% of a mixture of triacylglycerols 39 and for a 1-2% of non-saponifiable fraction, constituted of 53.16% of sterols. Among the 40 triacylglycerols, a 70-74 % is composed by linoleic acid (LA) and another 8-10% by 41 gamma-linolenic acid (GLA), which are essential polyunsaturated fatty acids (PUFAs), 42 belong to omega-6 acids family [8-10]. Beneficial effects of EPO consumption are 43

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associated with its high amount of PUFAs and several examples are well known such as 44 effects on the skin, in different autoimmune diseases, premenstrual syndrome and in re-45 ducing low-density lipoprotein (LDL) levels [8-10]. Moreover, some effects are associated 46 with the presence of sterols contained in the non-saponifiable fractions [8–10]. 47

Pancreatic cancer, including Pancreatic Ductal Adenocarcinoma (PDAC), is one of 48 the most aggressive and malignant solid cancer, with a 5-years survival of approximately 49 5–9%. PDAC is an infiltrating neoplasm with glandular differentiation derived from the 50 pancreatic ductal tree [11,12]. It was demonstrated a family genetic predisposition, but 51 also some precursor lesions within pancreatic tissue and somatic mutations of KRAS on-52 cogene and CDKN2A, TP53 and SMAD4 suppressor genes are implicated in PDAC path-53 ogenesis [13,14]. The main therapeutic approach in PDAC is the surgical resection with 54 adjuvant chemotherapy, but surgery is not always possible, especially in case of metasta-55 ses and, at the same time, PDAC response to chemotherapeutic drugs remains too low. 56 Given that PDAC is still considered an incurable cancer, new drugs and adjuvant supple-57 mentation are necessary to reduce mortality and/or to improve therapeutical outcomes 58 [4]. 59

Until today, there are no preclinical evidences regarding potential EPO anticancer 60 effects. In this study we evaluated the ability of EPO to promote cytotoxicity in human 61 PDAC cell lines and its role as adjuvant for chemotherapeutic drugs activity, in order to 62 support the use of EPO supplementation in the diet of PDAC patients. 63

2. Results	64
2.1. EPO reduces PANC-1 and MIAPaCa-2 cell viability	65
The cytotoxicy of EPO was investigated in PANC-1 and MIAPaCa-2 cells by MTT assay.	66
Cells were treated with different doses of EPO (from 0.024 up to 50 μ L/mL). After 72	67
hours, results showed a reduction of cancer cells viability in a dose-dependent manner	68
with an IC ₅₀ of 1.37 \pm 0.06 μ L/mL for PANC-1 and an IC ₅₀ of 0.89 \pm 0.02 μ L/mL for	69
MIAPaCa-2 (Figure 1A). MIAPaCa-2 cells resulted more sensible to treatment than	70
PANC-1.	71
The cytotoxic effect of EPO was subsequently evaluated in non-cancerous cell line such	72
as human keratinocytes HaCaT (Figure 1B). Cells were treated with the same doses of	73
oil used in PANC-1 and MiaPaCa-2 (dose range 0.024 - 50 µl/mL). After 72 hours the	74
viability of HaCaT is reduced only for doses higher than 6.25 µl/mL. This value of IC50	75

confirms that HaCaT is more resistant than PANC-1 and MiaPaCa-2.



Figure 1. (A) PANC-1 and MIAPaCa-2 cell viability after treatment with different concen-78 trations of EPO (μ L/mL) for 72 hours. Vehicle (DMSO) was used as negative control, 79 while Paclitaxel (PTX) 23.9 µg/mL as positive control. Data shown are expressed as mean 80 ± SD of three separate experiments. * p < 0.05 treated PANC-1 or MIAPaCa-2 vs vehicle, # 81 p < 0.05 treated PANC-1 vs treated MIAPaCa-2. (B) HaCaT cell viability after treatment 82 with different concentrations of EPO (µL/mL) for 72 hours. Vehicle (DMSO) was used 83 as negative control, while PTX 23.9 µg/mL as positive control. Data shown are expressed 84 as mean \pm SD of three separate experiments. * p < 0.05 treated HaCaT vs vehicle. 85

2.2. EPO induces cell death in PANC-1 and MIAPaCa-2 cell lines

 $\begin{array}{ll} \mbox{Propidium Iodide (PI) staining were used to evaluate cancer cell death. Cells were treated $$ 87$ with the lowest cytotoxic doses of EPO (0.39 <math display="inline">\mu$ L/mL and 0.78 μ L/mL) and after 48 hours it \$\$ 88\$ was observed an increase in cells undergoing cell death compared to the vehicle, in both \$\$ 89\$ cell lines. PANC-1 cell death was induced predominantly with the higher dose, while in \$\$ 90\$ MIAPaCa-2 was strongly induced already after treatment with 0.39 μ L/mL EPO (Figure \$\$ 91\$ 2). \$\$ 92\$ }



Figure 2. Cytotoxic doses of EPO induce cell death in PANC-1 and MIAPaCa-2 after 4894hours. Data represent the percentage of PI positive cells and are representative of one of95three separate experiments.96

To further confirm cell death EPO-dependent, Western Blot analysis was performed to 97 evaluate H2AX presence as marker of DNA damage in PANC-1 and MIAPaCa-2 cell lines. 98 PDAC cells were treated with EPO 0.39 μ L/mL and 0.78 μ L/mL for 48 hours. Results 99 showed a significant increase of H2AX protein in MIAPaCa-2 with both doses, while in 100 PANC-1 it was found an increase of H2AX only with 0.78 μ L/mL, confirming a lower 101 sensitivity of this cell line (Figure 3). 102



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Figure 3. H2AX densitometric values were normalized to GAPDH used as loading104control. Densitometric values shown are the mean \pm SD of three separate experiments. * p105< 0.05, ** p < 0.01, treated PANC-1 or MIAPaCa-2 vs vehicle cells.</td>106

2.3. EPO induces ROS production in PANC-1 and MIAPaCa-2 cell lines

Since EPO induced cell death, the involvement of intracellular reactive oxygen species 109 (ROS) production was evaluated. Thus, PANC-1 and MIAPaCa-2 cells were treated with 110 EPO at 0.39 μ L/mL and 0.78 μ L/mL and ROS production was analysed by cytofluorimetric 111 analysis after 2 hours and 4 hours of treatment. Results showed that both EPO doses 112

increased ROS production in PANC-1 cells, while for MIAPaCa-2 the increase of ROS 113 started with EPO 0.78 μ L/mL. ROS formation was confirmed through the pretreatment of 114 PANC-1 and MIAPaCa-2 cells with N-acetyl-l-cysteine (NAC) as inhibitor of ROS 115 production. Indeed, NAC reverted this EPO-induced effect (Figure 4) suggesting that 116 EPO-induced cytotoxicity is associated with ROS production. 117



Figure 4. EPO effect on ROS production in (A) PANC-1 and (B) MIAPaCa-2 cells after 2 119 and 4 hours of treatment. Results are expressed as the mean fluorescence intensity (MFI). 120

2.4. EPO potentiates Paclitaxel efficacy in PANC-1 and MIAPaCa-2 cell lines

EPO cytotoxic effect was evaluated in combination with PTX and Gemcitabine (GEM), the main chemotherapeutic drugs used in PDAC therapy nowadays [13]. PANC-1 and MIAPaCa-2 cells were treated with different doses of EPO (from 0.095 up to 0.39 μ L/mL), GEM (from 12.5 to 50 μ g/mL) and PTX (from 0.75 to 3 μ g/mL) alone or in combination for 72 hours.

Data showed that EPO was not able to increase the cytotoxicity of GEM (Figure 5) and 127 according to isobologram (data not shown) there are not synergistic/additive effects. 128

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On the contrary, some combinations of EPO and PTX showed synergistic or additive 135 effects (Figure 6). Indeed, combinations with PTX 3 µg/mL and each EPO dose showed a 136 synergistic effect as suggested from CI values (0.16979, 0.1869 and 0.20108 for PANC-1, 137 0.1009, 0.14078 and 0.19799 for MIAPaCa-2). Further, two synergistic combinations with 138 PTX 1.5 μ g/mL and EPO 0.19 μ L/mL or 0.39 μ L/mL (CI = 0.78758 and CI = 0.84974 139 respectively) and an additive effect by using PTX 0.75 µg/mL combined with EPO 0.19 140 μ L/mL (CI = 1.0412) were found for PANC-1 cells. 141

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Figure 6. Evaluation of PTX and EPO combination effect in PANC-1 and MIAPaCa-2 cells. 143 (A) PANC-1 and MIAPaCa-2 cell viability after treatment with different combinations of 144 PTX and EPO. Data shown are expressed as the mean \pm SD of three separate experiments. 145 * p < 0.05 treated PANC-1 or MIAPaCa-2 vs vehicle, # p < 0.05 treated PANC-1 or 146 MIAPaCa-2 vs PTX alone. (B) Isobologram plots for combination treatments of PTX and 147 EPO in PANC-1 and MIAPaCa-2 cell lines. Lower left of the hypotenuse synergism, on 148 the hypotenuse additive effect; upper right, antagonism. Synergistic activity of PTX-EPO 149 was calculated by CompuSyn software. (C) CI values for PANC-1 and MIAPaCa-2 cell 150 line. 151

2.5. EPO influences pERK/ERK protein levels and activation

It is demostrated that the Ras-ERK pathway contributes in oncogenic processes leading to 154 cancer progression [15] and reduced response to chemotherapeutic drugs [16]. Therefore, 155 the expression of ERK protein and its active phosphorylated form, pERK, was evaluated 156 by Western Blot analysis after treatment with EPO. Cancer cells were treated with EPO 157 0.39 $\mu L/mL$ and 0.78 $\mu L/mL$ for 12 and 24 hours.

In PANC-1 cells, data evidenced a slight reduction of pERK starting from 12 hours, 159 followed by a significant decrease of total ERK after 24 hours post-treatment with EPO 160 0.78 µL/mL. (Figure 7). 161



Figure 7. Evaluation of EPO effect in PANC-1. Western blot analysis of pERK and ERK 164 levels in PANC-1 cells after 12- and 24-hours treatment with EPO. ERK protein expression 165 was normalized to GAPDH protein expression used as loading control, pERK protein ex-166 pression was normalized to ERK protein expression. Densitometric values shown are the 167 mean \pm SD of three separate experiments. * p < 0.05 treated vs vehicle cells. 168

In MIAPaCa-2 cells, a reduction in pERK was detected at 24 hours post treatment with 169 EPO 0.78 $\mu l/mL$, while a significant reduction of total ERK was observed after 24 hours of 170 incubation with both doses of EPO (Figure 8). 171

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Figure 8. Evaluation of EPO effect in MIAPaCa-2. Western blot analysis of pERK and173ERK protein levels in MIAPaCa-2 cells after 12 and 24 hours treatment with EPO. ERK174ERK protein expression was normalized to GAPDH protein expression used as loading175control, pERK protein expression was normalized to ERK protein expression.176Densitometric values shown are the mean \pm SD of three separate experiments. * p < 0.05</td>177treated vs vehicle cells.178

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3. Discussion

Recently, plant derivatives are extensively studied to characterize their ability in improving therapy efficacy for many chronic diseases and cancer [17]. According to these evidence, *Oenothera* L. plants family is studied for its biological properties and EPO, obtained from Evening Primrose seeds, is rich in γ -linolenic and linoleic acid. However, in contrast to the high number of studies about GLA anticancer effect [18,19], data regarding the anticancer effect of EPO are few.

EPO was reported to reduce many inflammatory conditions, such as skin disorders, 187 atopic dermatitis and rheumatoid arthritis, and its activity was also demonstrated in dia-188 betes and in premenstrual syndrome [8,20,21]. Furthermore, some evidence showed its 189 potential efficacy in reducing side effects associated with chemotherapy. Indeed, in *in-vivo* 190 model EPO pre-treatment reduced the cyclophosphamide-induced hepatic and pancreatic 191 toxicity, ameliorating biochemical parameters and histopathological alterations [20]. In 192 addition, it reduced skin reaction induced by bortezomib injection in multiple myeloma 193 patients [22]. 194

We evidenced that EPO reduced PANC-1 and MIAPaCa-2 cell viability in a dose-195 dependent manner after a treatment of 72 hours. Similarly, different extracts obtained 196 from another variety of Evening Primrose induced reduction of cancer cell viability. An 197 extract obtained from the defatted seeds of Oenothera paradoxa reduced malignant pleural 198 mesothelioma cell viability and invasiveness, and induced apoptosis in Caco-2 cells 199 [17,23]; while phytosterols isolated from EPO and its main components (β -sitosterol and 200 campesterol) decreased human colon adenocarcinoma cell proliferation [24]. Then, our 201 results showed that EPO induced a cell death in PDAC cells confirmed by an increase of 202 PI positive cells and H2AX protein expression. It has been demonstrated that Evening 203 Primrose seeds extract induces apoptosis in Ehrlich ascites tumor cells [21] and cell death 204

in HT-29 cells [24]. In agreement, we demonstrated that cancer cell death was more evi-205 dent in MIAPaCa-2 cells as shown by the lower IC50 value obtained from the cell viability 206 assay. 207

Moreover, to examine the mechanism of EPO-induced cell death, we evaluated if 208 EPO enhances the ROS production. ROS are often associated with cell damage, and, in 209 cancer, their increase is often associated with cell death given that cancer cells are more 210 sensitive to oxidative stress [25,26]. Our data showed that EPO induced ROS production 211 in both cell lines. 212

Since the aim of integrated therapy is to improve the efficacy of common chemother-213 apy, we investigated EPO effect in combination with PTX and GEM. EPO showed syner-214 gistic and/or additive effect in combination with some PTX doses; in particular, synergism 215 was evident with the higher dose of PTX after 72 hours of administration on PANC-1 and 216 MIAPaCa-2. On the other hand, EPO was not able to increase the efficacy of GEM. Among 217 the main pathways that mediate the response to chemotherapeutic drugs, 218 RAS/RAF/MEK/ERK are attractive targets for cancer therapy [27]. Indeed, ERK is involved 219 in many biological processes including cancer progression and resistance [28]. 220

There are not previous data about the combined effect between EPO and chemother-221 apeutic drugs. Studies reported that the combination between Trametinib, a selective in-222 hibitor of MEK1/2 kinase activity, and GEM does not lead to an efficient clinical response 223 in PDAC phase I clinical trial, while in non-small-cell lung cancer (NSCLC) Selumetinib, 224 another MEK inhibitor, demonstrated some benefits combined with Docetaxel. This sup-225 ports the potential synergistic effect of MEK inhibitors with taxane derivatives [16]. Simi-226 larly, we demonstrated that EPO reduced ERK phosphorylation after 24 hours and total 227 ERK levels in both cell lines and this may justify the increasing of PTX efficacy. 228

Furthermore, EPO is rich in PUFAs and it was demonstrated that they are able to 229 affect MEK/ERK pathway; indeed, dietary long-chain n-3 PUFAs are able to inhibit the activation of this pro-survival pathway in in vitro and in vivo breast cancer models [29], 231 supporting our evidences.

4. Materials and Methods

4.1. Cell Lines

Human Pancreatic Ductal Adenocarcinoma (PANC-1 and MIAPaCa-2) cell lines 235 were obtained from Sigma Aldrich (Milan, Italy) and Immortalized human keratinocytes 236 cell line (HaCaT), furnished by IFOM (Institute of Molecular Oncology, Rome, Italy), 237 were maintained in DMEM glucose high medium (EuroClone, Milan, Italy) supplemented 238 with 100 IU/ml penicillin, 100 mg streptomycin, 10% of fetal bovine serum (FBS), 1 mM sodium pyruvate and 2 mM L glutamine. Cell lines were cultured at 37 °C with 5% CO₂ 240 and 95% of humidity. 241

4.2. Reagents

Evening Primrose oil (EPO), derived from Oenothera biennis, was purchased (Product n° PHR 2978; Sigma Aldrich, Milan, Italy) as pharmaceutical standard, certified reference 245 material (composition described in Table 1) and diluted in DMSO 1:2 and it was freshly 246 prepared for each experiment. Gemcitabine (GEM; 50 mg/mL) and Paclitaxel (PTX; 6 247 mg/mL) were acquired from Sigma Aldrich (Milan, Italy), solubilized in water and stored 248 at -20 °C. 249

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Fatty Acid Methil Esters	USP Comp %
(FAME)	
Methyl palmitate	6.00
Methyl stearate	1.91
Methyl oleate	6.93
Methyl linoleate	74.18
Methyl-y-linolenate	9.98
Methyl-o-linolenate	0.22
Methyl arachidate	0.49
Methyl eicosenoate	0.16

Table.1. Evening Primrose oil major component, as described by the manufacturer.

4.3. MTT Assay

In 96-well plates, cells were seeded at concentration of 3×10^4 cells/mL in a final volume of 100 μ L/well. After 24 hours of incubation, treatments were administrated in six 264 replicates for each. After 72 hours, cell viability was investigated by adding 0.8 mg/mL of 265 MTT obtained from Sigma Aldrich (Milan, Italy) to the media, according to the protocol 266 previously described [4].

4.4. Cell Death Assay

To evaluate cell death on PANC-1 and MIAPaCa-2 cells, PI staining was used and 269 analyzed by FACScan. Cells were plated at a density of 5×10^4 cells/mL and two doses of 270EPO were added for 48 hours. After treatment, cells were stained with 20 μ g/mL PI for 10 271 minutes at room temperature and washed. CellQuest software was used to determine the 272 percentage of positive cells. All experiments were repeated three times. 273

4.5. Western Blot Analyses

Lysates of PANC-1 and MIAPaCa-2 cell lines, untreated or treated with EPO for 12 275 and 24 hours, were obtained with lysis buffer, composed as previously described [4]. Ly-276 sates were separated on a SDS polyacrylamide gel, transferred onto Hybond-C extra 277 membranes (GE Healthcare, Chicago, IL, USA), blocked with 5% of Bovine Serum Albu-278 min (BSA) in PBS-Tween 20, immunoblotted with rabbit anti-phospho-histone H2AX 279 (Ser139) (1:1000, #9718, Cell Signaling Technology, Danvers, MA, United States), mouse 280 anti-pERK (1:2.000, Cell Signaling Technology, Danvers, MA, United States) and rabbit 281 anti-ERK (1:1.000, Cell Signaling Technology, Danvers, MA, United States) Abs incubated 282 overnight, and mouse anti-glyceraldehyde-3-phosphate dehydrogenase (GAPDH, 1:1000, 283 Santa Cruz, California, USA) Abs incubated one hour and then all incubated with their 284 respective HRP-conjugated anti-rabbit secondary Abs (1:5.000, Jackson Immuno Research 285 Europe Ltd, Cambridge, UK) and anti-mouse secondary Abs (1:2.000, Cell Signaling Tech-286 nology, Danvers, MA, United States) for one hour. The detection was performed using the 287 LiteAblot ®PLUS or the LiteAblot ®TURBO (EuroClone, Milano, Italy) kits and a Chemi-288 doc and densitometric analysis was carried out using the Quantity One software (BioRad, 289 Hercules, USA). H2AX and ERK densitometry values were normalized to GAPDH used 290 as loading control and normalized with vehicle, while pERK densitometry value was 291

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normalized to ERK. Densitometric values shown are the mean ± SD of three separate ex-292 periments. 293

4.6. ROS Assay

In order to assess the oxidative stress it was used a fluorescent probe dichlorodihy-295 drofluorescein diacetate (DCFDA). Briefly, 5×10^4 cells, seeded on a 12-well plate and 296 treated with two EPO doses, were incubated with 20 µM DCFDA (Life Technologies Italia, 297 Italy) 20 min prior to the time point. The harvest was carried out after 2 and 4 hours. As 298 control it was used 10 mM N-acetylcysteine (NAC) with preincubation of 3 hours. After 299 washing the intensity of the fluorescence was analyzed using FACScan and CellQuest 300 software. 301

4.7. Statistical Analysis

Mean and standard deviation are the result of three independent experiments. The 303 statistical significance was determined by One-Way ANOVA test with a Tukey's multi-304 ple comparisons post-hoc test. Synergistic and additive effects were calculated by the 305 Chou-Talalay method as previously described [4]. CompuSyn Software (ComboSyn, Inc., 306 Paramus, NJ, USA, 2007) was used for automatically determining synergism and antago-307 nism. The statistical analysis of IC⁵⁰ was performed by Prism 5.01 (Graph Pad). 308

5. Conclusions

In conclusion, EPO significantly reduced PDAC cells viability, inducing cell death 310 and improving PTX efficacy. These evidences suggest its potential use as an adjuvant in 311 PDAC therapy. Further studies could be performed to elucidate other molecular mecha-312 nisms involved in EPO-induced anticancer activity. 313

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