Mechanistic modeling of metastasis: cancer at the organism scale

S. Benzekry Inria Bordeaux Sud-Ouest

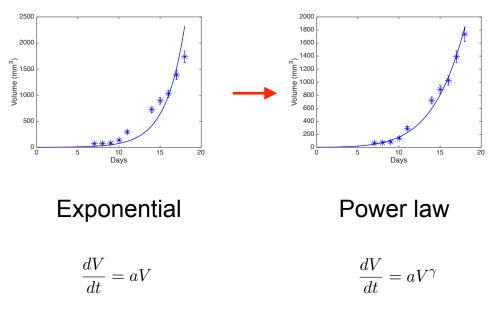
> ISoP workshop July 11th, 2019





Understand (biology)

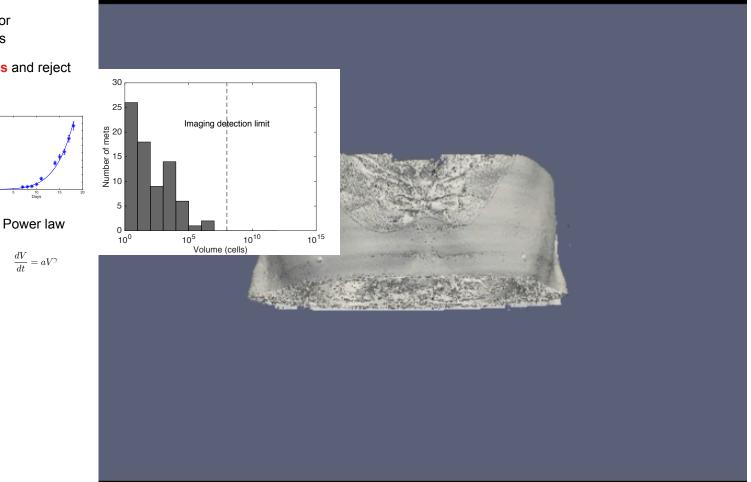
- Theoretical framework for description of the process
- Test different hypotheses and reject non-valid ones



Benzekry et al., PloS Comp Biol, 2014

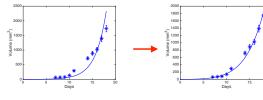
Predict and control (clinic)

Predict tumor growth



Understand (biology)

- Theoretical framework for description of the process
- Test different hypotheses and reject non-valid ones



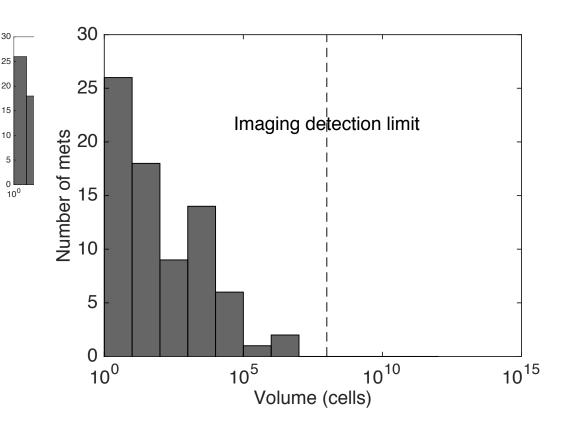
Exponential

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\frac{dV}{dt} = aV
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Jouganous, Colin, Saut et al., 2014

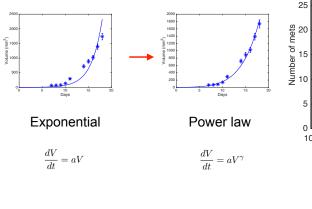
Predict and control (clinic)

- Predict metastasis
- Personalize (adjuvant) therapy



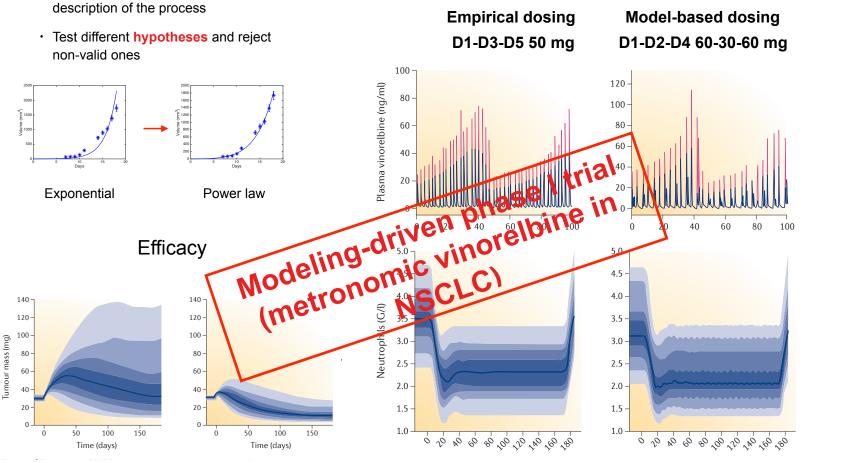
Understand (biology)

- Theoretical framework for description of the process
- Test different hypotheses and reject non-valid ones



Predict and control (clinic)

Rational and individual design of drug regimen



Understand (biology)

· Theoretical framework for

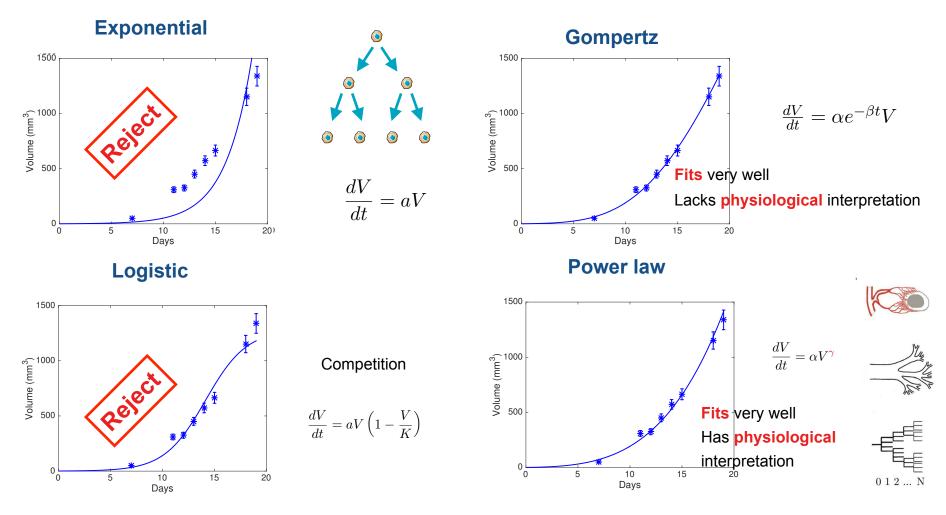
Toxicity

Tumor growth

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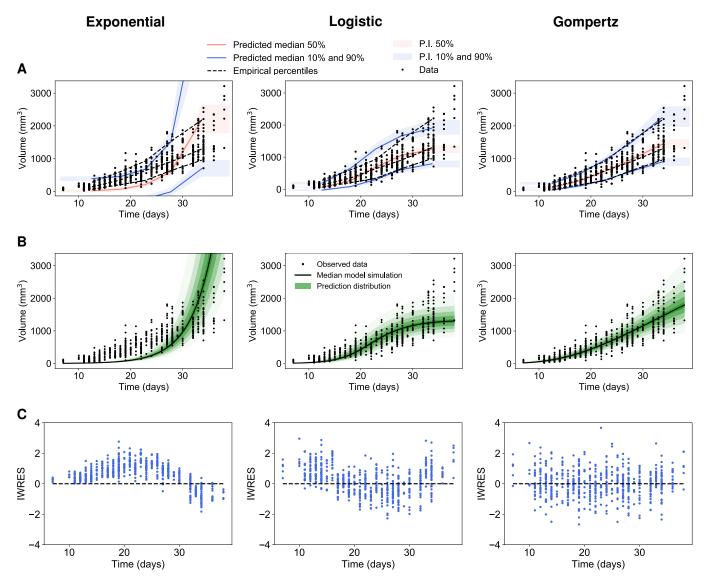
Tumor growth

What are **minimal** biological processes able to recover the **kinetics** of (experimental) tumor growth?



Benzekry et al., PloS Comp Biol, 2014

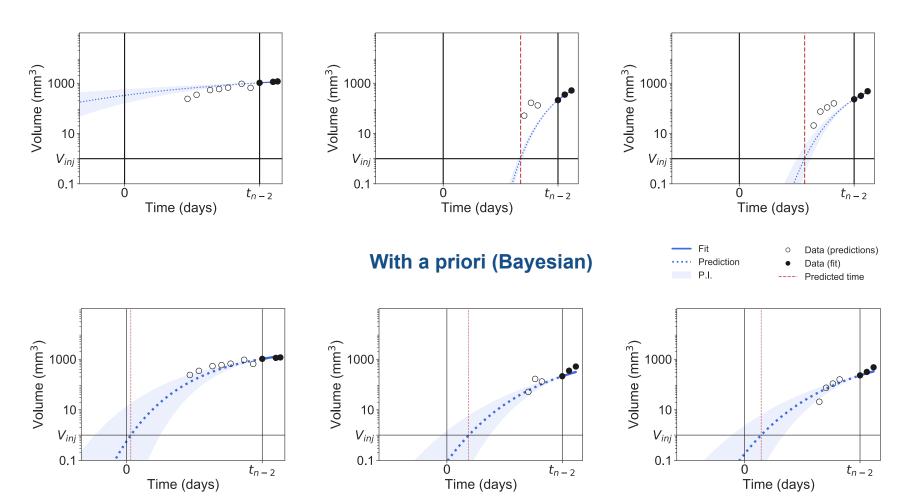
Population fit of tumor growth models



Vaghi et al. (Benzekry), bioRxiv, 2019

Bayesian estimation for prediction of tumor age

No a priori (MLE)

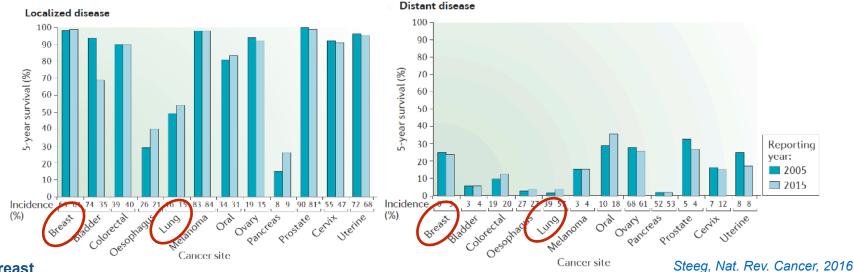


Metastasis



Metastasis (μετά = beyond, στάσιζ = place)

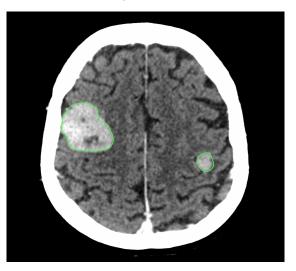
Metastases are the main cause of death (>90%) from solid cancers Lambert and Weinberg, Cell, 2017



Breast

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- 94% of cases are local or regional at diagnosis but 30% will relapse Pollard, N Eng J Med, 2016
- Estimate the amount of residual distant disease at diagnosis in order to personalize the adjuvant (chemo)-therapy
- · Avoid heavy toxicities for low risk patients
- Lung
 - 57% of cases are metastatic
 - Decide whether to use whole brain radiation therapy or just (stereotactic) surgery
 - · Avoid cognitive impairment of the patient



Institut Bergonié, Bordeaux

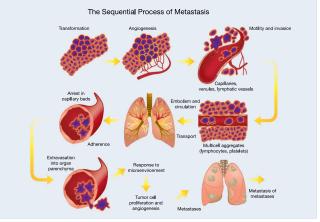
Some biological questions of interest to mathematical modeling

Minimal model of metastatic dissemination and colonization able to reproduce the **systemic** dynamics of a solid cancer disease

- Investigate the relevance of several processes:
 - (early VS late event Klein, Nat Rev Cancer, 2009)
 - (metastases of metastases Gundem et al., Nature, 2015)
 - (dormancy Chambers and Groom, Nat Rev Cancer, 2002)
 - tumor-tumor interactions

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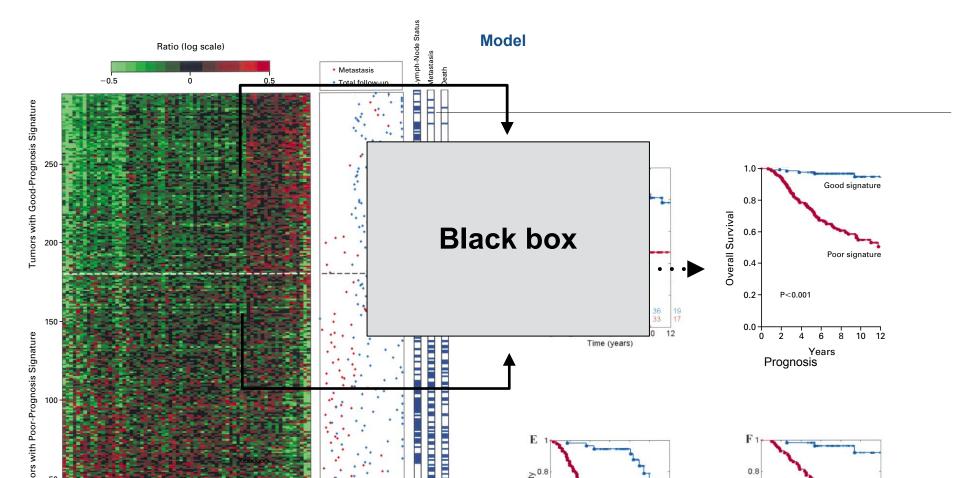
- (cancer-immune interactions)
- differential effect of therapy Ebos et al. (Kerbel), Cancer Cell, 2009
- ((pre-)metastatic niche Peinado et al. (Lyden), Nature, 2005)
- systemic inhibition of angiogenesis O'Reilly et al. (Folkman), Cell, 1990s
- (self-seeding Norton, Nat Med, 2001)



Talmadge and Fidler, Cancer Res, 2010

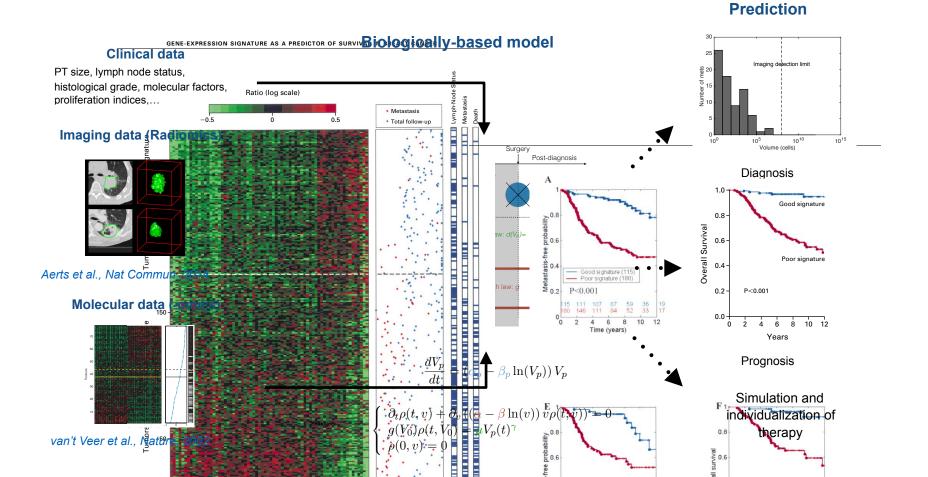
Metastasis: a forgotten major player in modeling

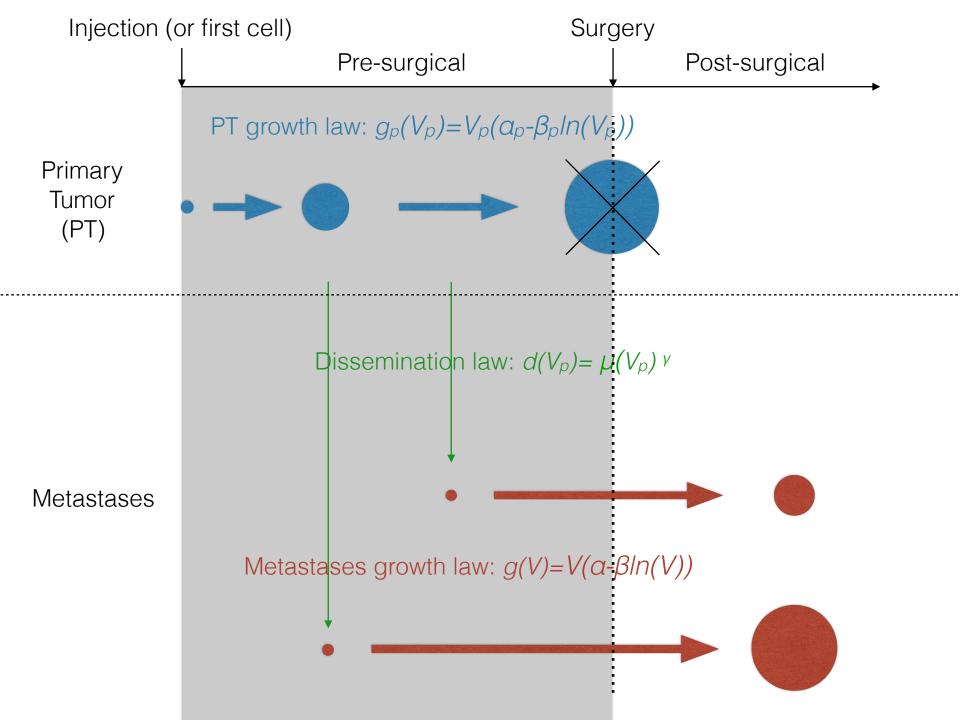
- The majority of mathematical modeling efforts in oncology are focused on (primary) tumor growth
- Existing models are based on a statistical, biologically agnostic, prediction of survival



Metastasis: a forgotten major player in modeling

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Mathematical formalism

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• Primary tumor V_{ρ} grows with rate g_{ρ} [size.day⁻¹]

$$\frac{dV_p}{dt} = \mathbf{g}_{\mathbf{p}}(\mathbf{V}_{\mathbf{p}}), \quad V_p(t=0) = V_i$$

- **Population** of metastases represented by a **density** $\rho(t, v)$ [size⁻¹] structured in **size** v
- Secondary tumors grow in size with rate g(v)

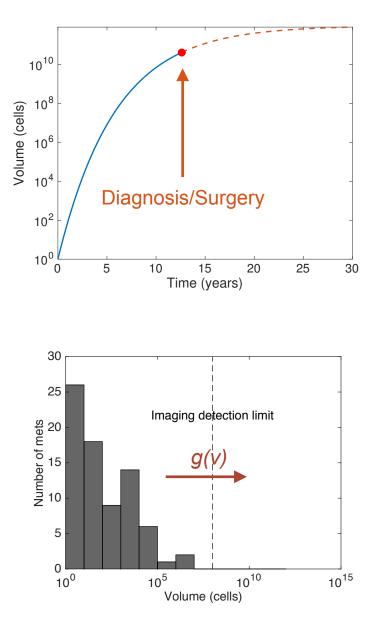
 $\partial_t \rho(t, v) + \partial_v (g(v)\rho(t, v)) = 0$

They are spread by the PT with **dissemination rate** $d(V_{\rho}(t))$ [day⁻¹]

$$g(V_0)\rho(t,V_0) = d(V_p(t))\left(+\int_{V_0}^{+\infty} d(v)\rho(t,v)dv\right)$$

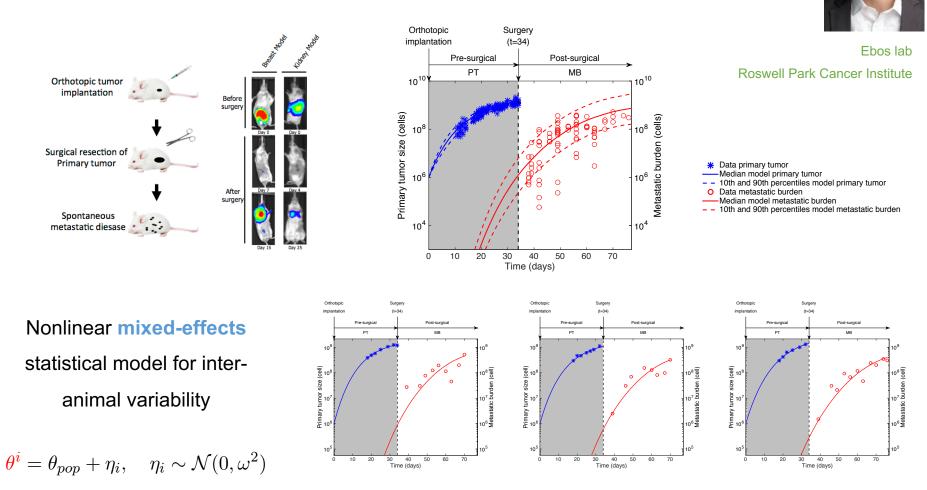
fast computation of the metastatic burden

$$M(t) = \int_{V_0}^{+\infty} v\rho(t, v) dv = \int_0^t d(V_p(t-s)) V(s) ds$$



Iwata, Kawasaki, Shigesada, J Theor Biol, 2000

Validation on animal data



 \Rightarrow same growth for PT and mets: $\alpha_p = \alpha$, $\beta_p = \beta$

Benzekry et al. (Ebos), Cancer Res, 2016

Differential effects of anti-angiogenic therapies between primary tumor and metastases



Cancer Cell Report

Accelerated Metastasis after Short-Term Treatment with a Potent Inhibitor of Tumor Angiogenesis

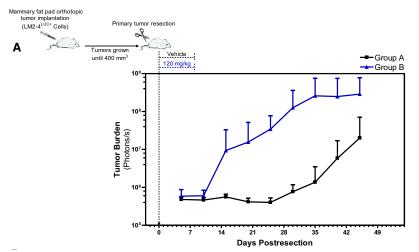
John M.L. Ebos, 1,2 Christina R. Lee, 1 William Cruz-Munoz, 1 Georg A. Bjarnason, 3 James G. Christensen, 4 and Robert S. Kerbel 1,2,*

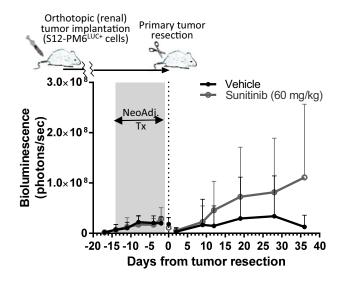


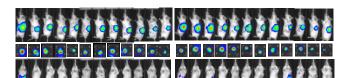


Neoadjuvant antiangiogenic therapy reveals contrasts in primary and metastatic tumor efficacy

John M L Ebos^{1,*}, Michalis Mastri¹, Christina R Lee², Amanda Tracz¹, John M Hudson², Kristopher Attwood³, William R Cruz-Munoz², Christopher Jedeszko², Peter Burns^{2,4} & Robert S Kerbel^{2,4}







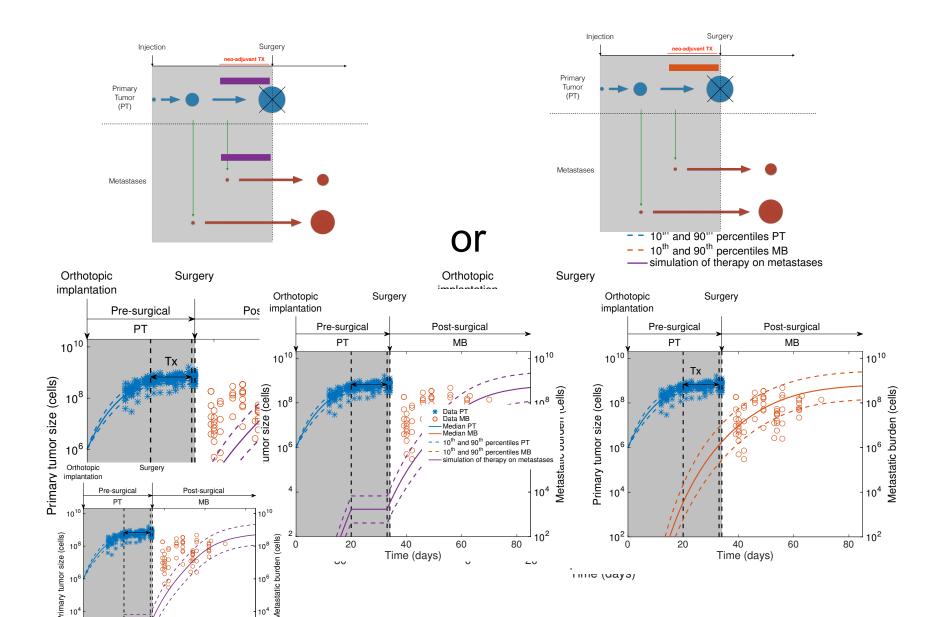


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Testing hypotheses for neo-adjuvant TKI effect



Clinical application - Brain Metastasis from NSCLC

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