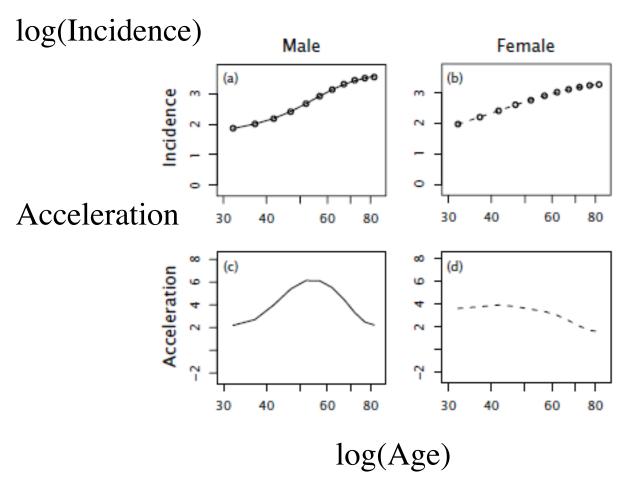
# **Mathematics and Physics of Cancer: Questions**

## Robijn Bruinsma, UCLA KITP Colloquium May 6, 2009

- 1) Cancer statistics and the multi-stage model.
- 2) Cancer microevolution and clonal expansion.
- 3) Metastasis: "Weinberg model" and homeostatic pressure.

Incidence ≡ total # US cancer cases/10<sup>5</sup> citizens Acceleration ≡ Incidence/age slope on log-log scale.



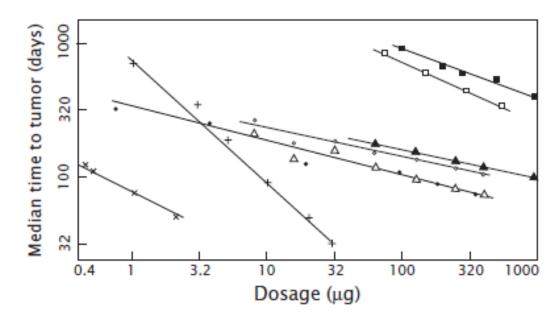
Frank, Dynamics of cancer

Power-Law:  $I(t) \square nb(D)t^{n-1}$  Acceleration = n-1

 $D \equiv \text{amount of carcinogen/day}$ 

M = median duration to tumor onset

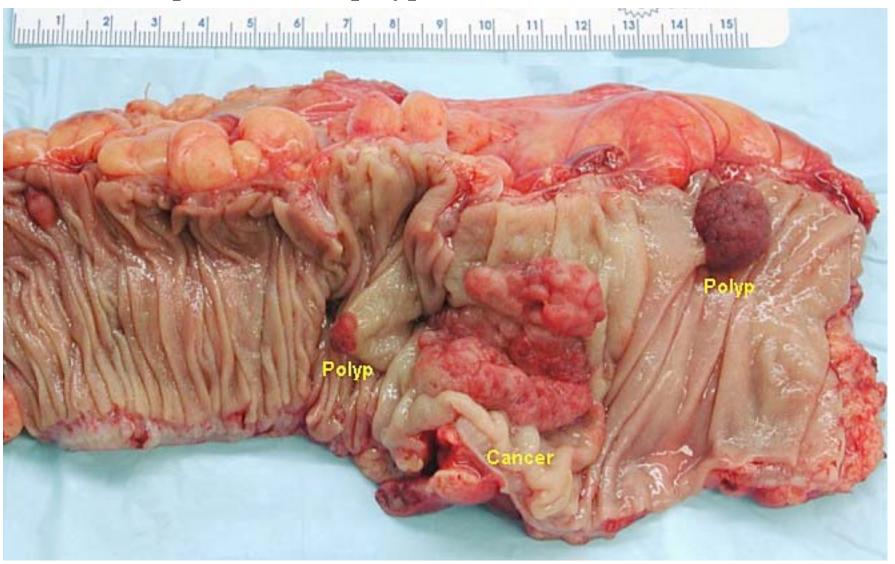
$$b(D) = \frac{\ln 2}{M(D)^n}$$



"dose-response"

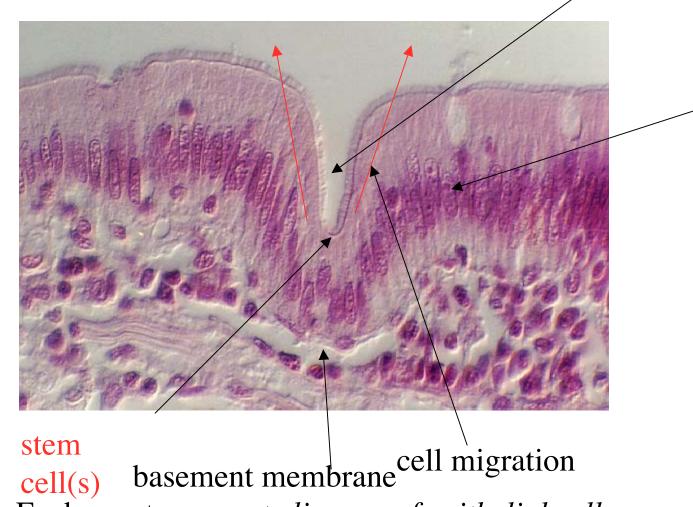
"Druckney Formula"  $DM^s = k$ 

Colorectal cancer pedunculated polyp sessile polyp



Polyp ("adenoma") → Carcinoma → Metastasis (liver)

Normal colon epithelial tissue: highly organized / colon "crypt"



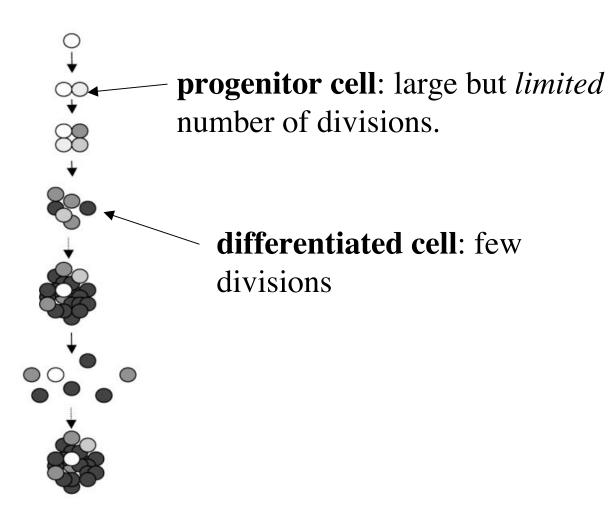
cell nuclei

H&E stain

• Each crypt: separate lineage of epithelial cells.

- Normal epithelial cells respond to anti-growth signals.
- Cells with damaged DNA and "misplaced" cells: commit suicide. ("apoptosis")

## stem cell: unlimited number of divisions

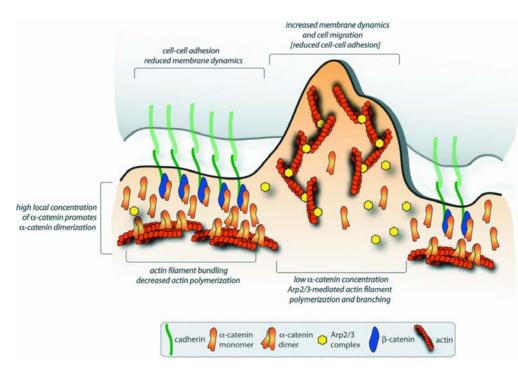


# colon cancer cells: disorganized (x 3000, SEM)

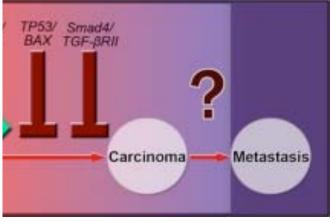




- Cells do not respond to anti-growth signals.
- Cells with damaged DNA do not undergo apoptosis.
- Cells can carry *hundreds* of mutations.



<u>colorectal cancer</u> (Vogelstein group)



380%

APC/β-catenin:

K-Ras: "oncogene"

p53: "tumor suppressor gene".

Regulates # cell divisions. Cell adhesion

Activates cell growth and division.

Repairs mutations, initiates apoptosis of cells with damaged DNA

# Armitage-Doll Multistage Model

Cancerous lineage: accumulate sequence of specific mutations ("hits").

No mutations  $0 \stackrel{u_0}{\longrightarrow} 1 \stackrel{u_1}{\longrightarrow} 2 \stackrel{u_2}{\longrightarrow} 3 \stackrel{u_3}{\longrightarrow} 4 \stackrel{u_4}{\longrightarrow} 5 \stackrel{u_5}{\longrightarrow} 6 \longleftarrow$  Cancer

 $x_i(t) = \#$  stem cells having i mutations at time t.

 $x_i(0) = x_0(0) \delta_{i,0}$ : # initial cell lineages/stem cells

 $u = mutation rate of a gene (~10^{-7} per generation for colorectal cancer)$ 

"Master Equation"

$$\frac{dx_0(t)}{dt} = -ux_0(t)$$

$$\frac{dx_j(t)}{dt} = ux_{j-1}(t) - ux_j(t)$$

$$\frac{dx_n(t)}{dt} = ux_{n-1}(t)$$

\* Size lineage: not important.

Frank, Dynamics of cancer

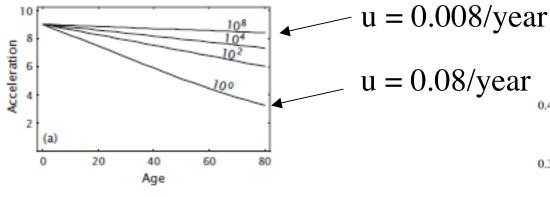
 $x_{i}(t)/x_{0}(0) = \frac{e^{-ut}(ut)^{i}}{i!} \qquad Poisson Distribution$ Solution: sequential  $\mathbf{X}_{i}$ t = 1/u t = 4/u t = 10/u0.3 0.2  $\langle i \rangle = ut$ 0.1 0.0 10 15 i

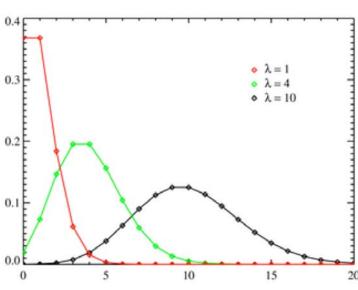
i) Incidence:

$$I(t) = \frac{dx_n(t) / dt}{\sum_{i=0}^{n-1} x_i(t)} = \frac{u(ut)^{n-1}}{(n-1)! \sum_{i=0}^{n-1} \frac{(ut)^i}{i!}}$$

Early times: power-law, Acceleration = n-1

ii) Late times: acceleration decreases monotonically with age.





\* Tests of the Multistage Model:

i) Inherited vs. sporadic tumors: n->n+1

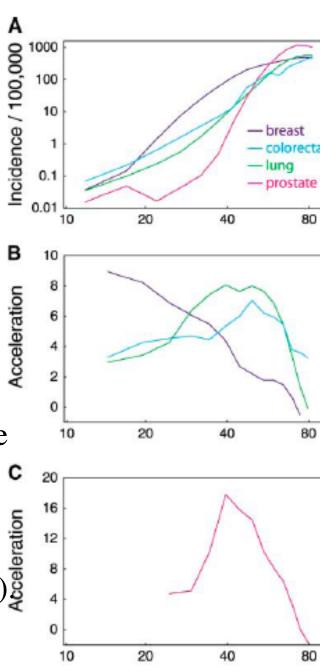
ii) Retinablastoma: n=2

(Knudson, 1970-1990)

\* Problems with the Multistage Model:

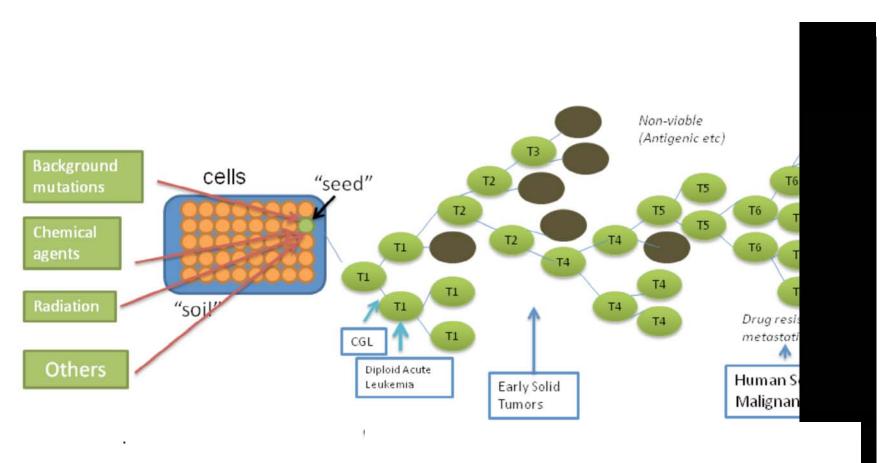
1) For u of about  $10^{-7}$  per gene per generation, an incidence of  $(ut)^{n-1}$  is *much too low* for large n (6, 7...) cancers (Loeb, 2001)

2) Acceleration of certain cancers show pronounced *maxima*. (colorectal, prostate, lung)



Age

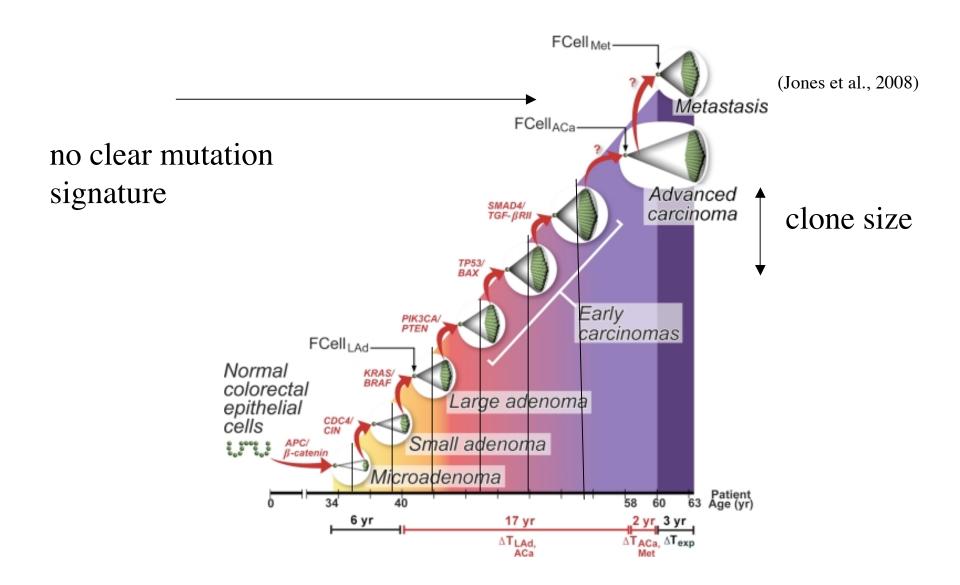
# II) Microevolution and Clonal Expansion Nowell, 1970



- Most mutations: neutral or detrimental.
- Some rare mutations are "beneficial": increased division rate.
- Number of cells with that mutation grows: clonal expansion.
- Cancer clones evolve by Darwinian natural selection.

# Colorectal cancer clonal expansions: "lesion sequencing" all mutations

• From *total* # of mutations of clone k compared to k-1: estimate founding date of clone k: "*molecular clock*"



# Generalized Multistage Model

Current Biology, Vol. 14, 242-246, February 3, 2004,

$$\frac{dx_{0}(t)}{dt} = -u_{0}(t)x_{0}(t)$$

$$\frac{dx_{j}(t)}{dt} = u_{j-1}(t)x_{j-1}(t) - u_{j}(t)x_{j}(t)$$

$$\frac{dx_{n}(t)}{dt} = u_{n-1}(t)x_{n-1}(t)$$

lineage transition rates: proportional to mean lineage size  $\langle N_k \rangle$ 

 $u_k(t) \sim u < N_k(t) >$  averaged over clone foundation times

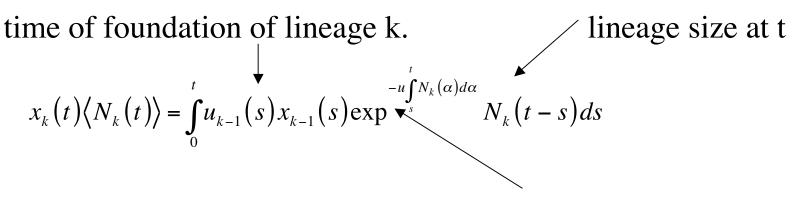
 $N_k(t-s)$ : size of cell lineage/clone at time t with k mutations.

*Stochastic* quantity: time *s* of clone foundation is random.

$$\frac{d}{dt}N_k = r_k N_k (1 - N_k / K_k)$$

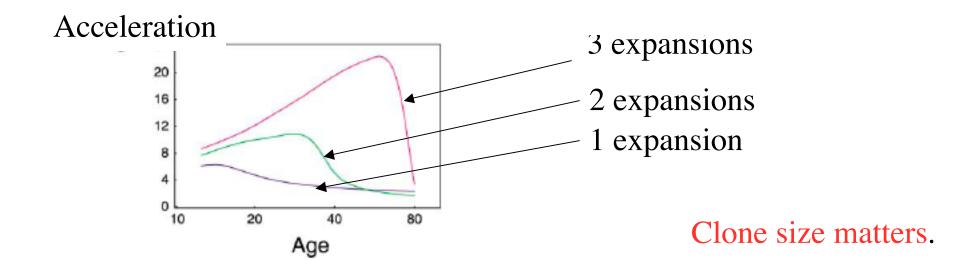
$$r_k = \text{clone division rate}$$

$$K_k = \text{maximum size}$$



\* recursive definition, "mean-field"

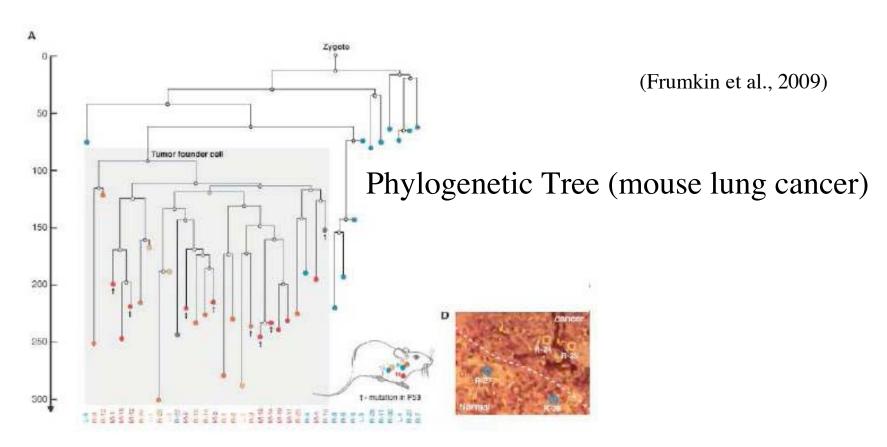
probability *no* transition k -> k+1 between times s & t



# Small u and acceleration problems solved?

# Question:

\* Measure # generations/clone ("micro-satellite mutations" clock)



\* Assumption of unrestricted cancer cell division: cancer much too large.

- \* What fraction of tumor cells are "stem-like"?
  - \* Can early progenitor cells start clonal expansion?

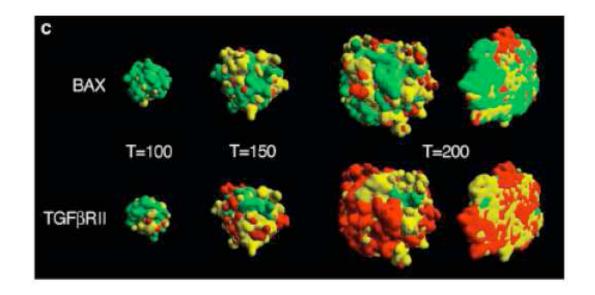
Probably not for early colorectal cancer: Nature Reviews Cancer 9, 2 (01 February 2009)

- \* Is clonal expansion important *not* because of size but because it increases stem-cell division rates?  $u_k(t) \propto \frac{d}{dt} \log \langle N_k(t) \rangle$
- \* Healing after repeated tissue insult accelerates cancer development.

Ganguly R, Puri IK (February 2006). "Mathematical model for the cancer stem cell hypothesis". Cell proliferation 39 (1): 3-14

## **Natural Selection**

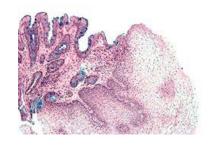
- \* Multistage models neglect *competition* between clones for space and nutrient. Important? (Gatenby and Vincent, 2003)
- \* Cancer: an ecological community of clones?



Ecological Diversity

# "Barrett's esophagus"

- Growth of esophagus ("neoplasm").
- risk of transition to cancer: 0. 5% per patient per year.



A: p53 & D9S1121 mutations.

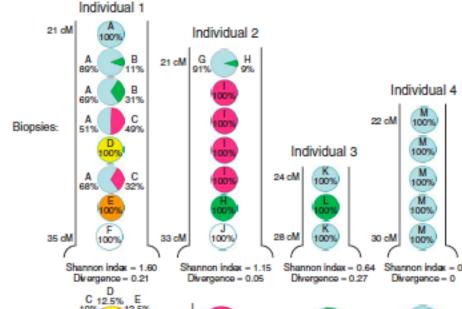
B: A + chromosome abnormality.

C: A + tetraploidy.

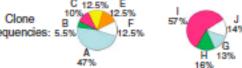
D: A + 2 other D9S mutations.

Biopsy clonal population:

(Maley et al., 2004)



Measure *frequency*  $p_k$  of clone k:



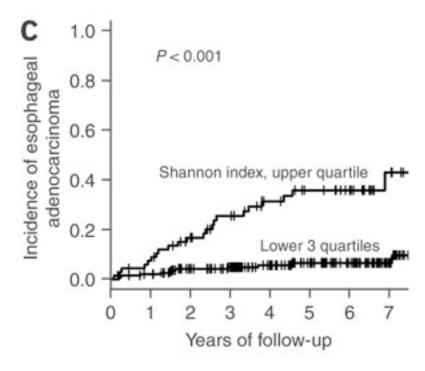




Shannon Diversity Index: 
$$H = -\sum_{k} p_k \ln p_k$$

\* maximized if (i) there are many clones (ii) all of similar size.

"Kaplan-Meier Plot"



- Diversity index: good predictor for transition to cancer for Barrett's.
- Number of clones, genetic divergence between clones also work.

## Question:

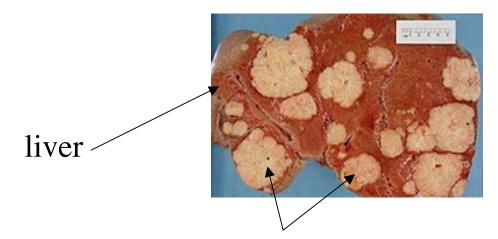
What is the optimal game strategy for a cancer? (Shibata, commentary)

A) Maximize clonal diversity: more efficient search for combinations of mutations that have high cell division rate. **Low clone size**. Minimal clonal competition.

or

B) Maximize clone size: larger clone size increases probability for making the *next* hit of the mutation sequence. **Low diversity**.

# III) <u>Metastasis</u>



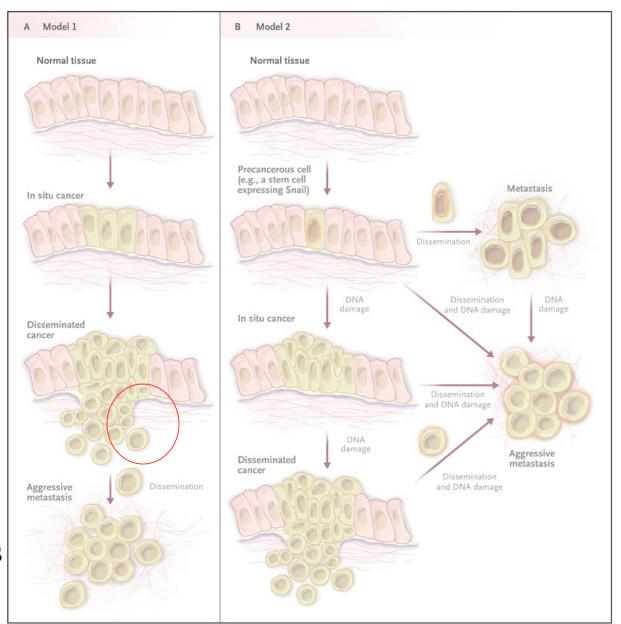
liver tumors, from a pancreatic tumor

- Metastasis main cause of cancer mortality. No clear mutation signature.
- Many cancer cells leave a colorectal cancer: "seeds".
- Small fraction (1/1000) grow new tumors on specific organs: "soil".
- Cells secreted by a tumor are *motile*. *No longer epithelial cells*. Resemble cells of "loose connective tissue" (mesenchyme).

# Classical model

time

# mutations

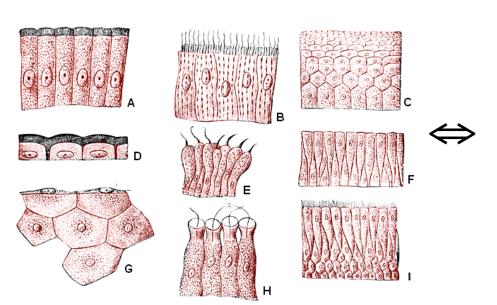


Weinberg model.

Epithelial-to-Mesenchymal Transition: EMT

Mesenchymal-to-Epithelial Transition: MET

#### Reversible



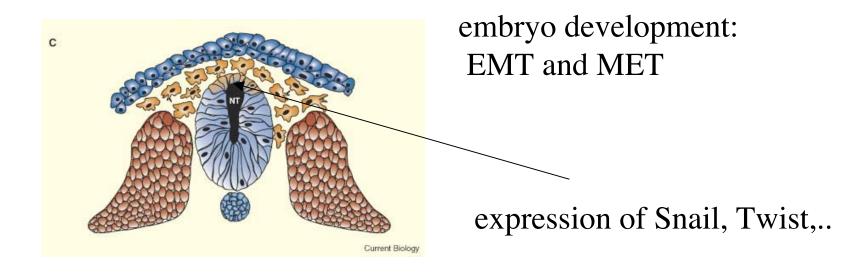
epithelial tissue

differentiated, sessile

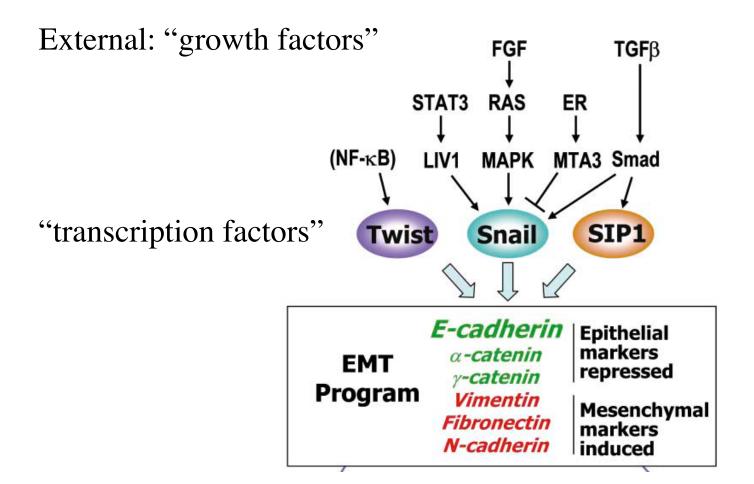


fibroblasts

weakly differentiated, motile



# What triggers EMT?



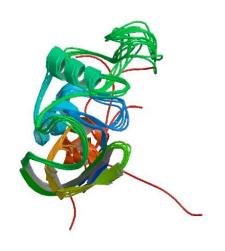
Y .Kang & J.Massague Cell, 118, 2777, 204

<sup>\*</sup> Could the Twist, Snail, .. proteins trigger metastasis?

\* Over-express "Snail" and "Twist" in immortal mammary epithelial cells

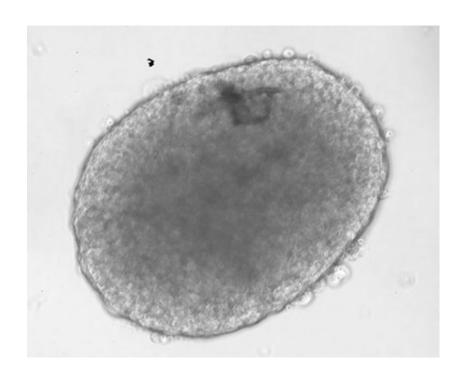
Snail Normal **Twist** TGFβ1

• CD44 adhesion molecule appears on cell surface. cancer stem-cell "marker"



(Mani et al, 2008)

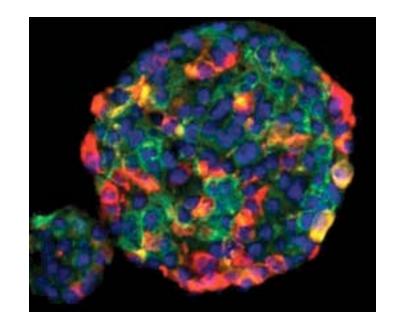
- 1) Cells spontaneously self-assemble into "mammospheres"
- 2) Revert back to epithelial cells: in-vitro metastasis!



(Mani et al, 2008)

surface markers

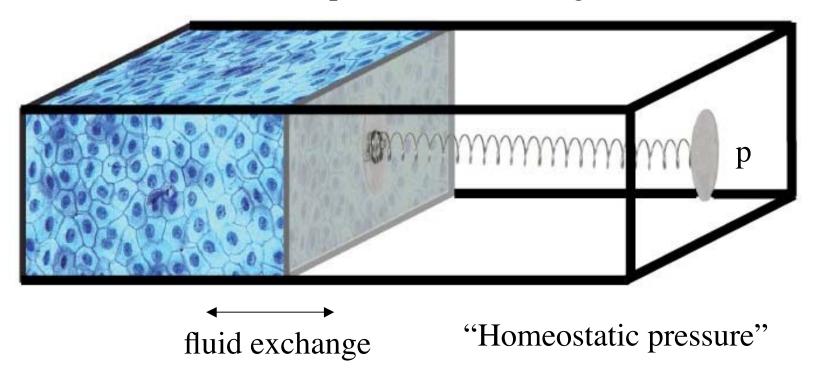
yellow: pluripotent mammary cells blue: differentiated cells. MET



# Why are metastatic nuclei so rare and so organ selective?

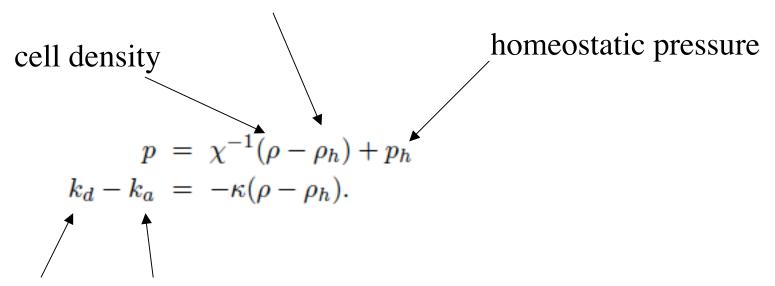
Basan, Risler, et al, 2009

\* Interaction between tissue samples with different growth rates.



• p *not* hydrostatic pressure; generated by *cell division* 200 nanoNewton/ $(50\mu)^2 \sim 100$  Pa  $\sim$  blood pressure

# homeostatic cell density



division rate

apoptosis rate

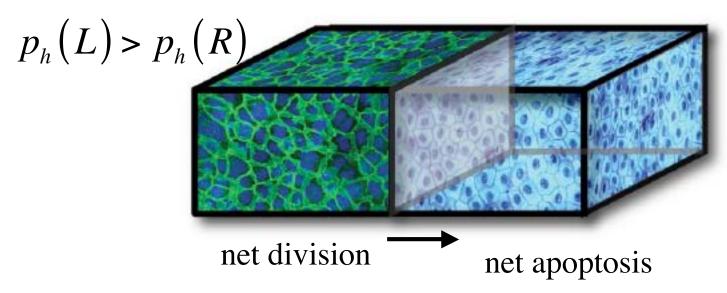
$$\frac{\partial}{\partial t} \rho + \nabla \cdot (\rho \mathbf{v}) = (k_d - k_a) \rho,$$

$$\eta \Delta \vec{v} = \vec{\nabla} p$$
non-conserved, viscous fluid flow

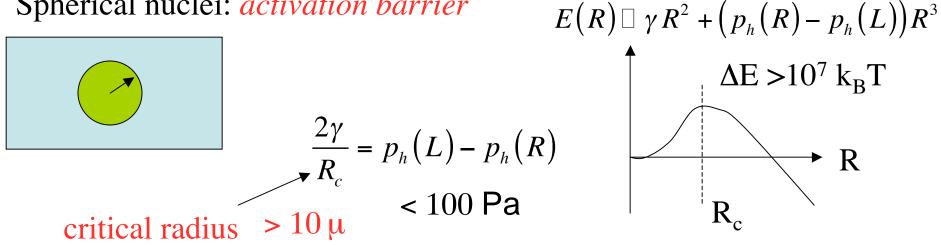
\* System evolves to the homeostatic state:  $p = p_h$ ;  $\rho = \rho_h$ 

# Two tissue samples in contact with different homeostatic pressures

tissue-tissue "interfacial energy" γ (~10<sup>3</sup>J/m<sup>2</sup>)



Spherical nuclei: activation barrier

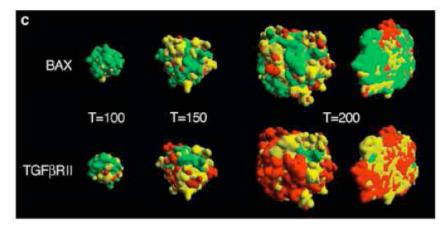


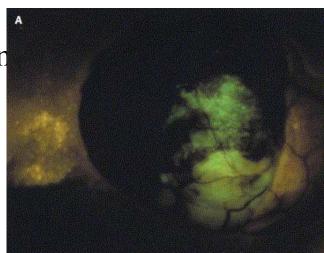
\* exponentially sensitive to interface energy/geon

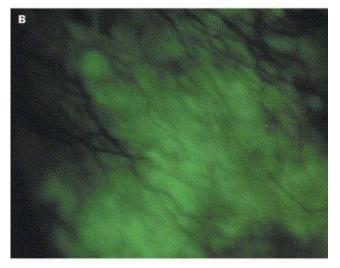
Question: Angiogenesis

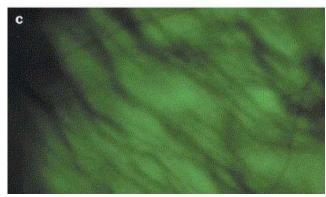
Larger tumors (R >1mm) grow channels open to the blood circulation system.

- \* Is homeostatic pressure of large tumors *fixed*?
- \* Homeostatic pressure competition between clones?



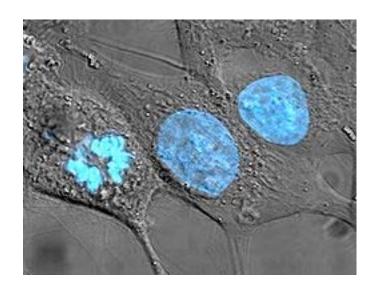






• Can mutations really speed up division rates?

Current champions: "HeLa" cells

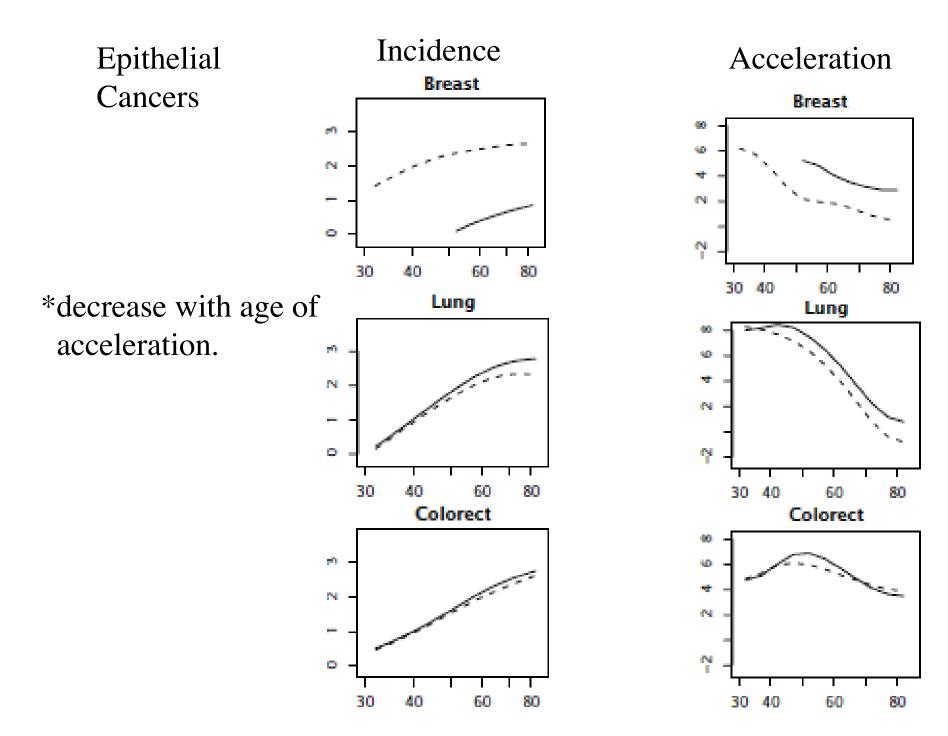


- no apoptosis.
- division rate 1/hour
- robust: contaminate laboratory cell lines!

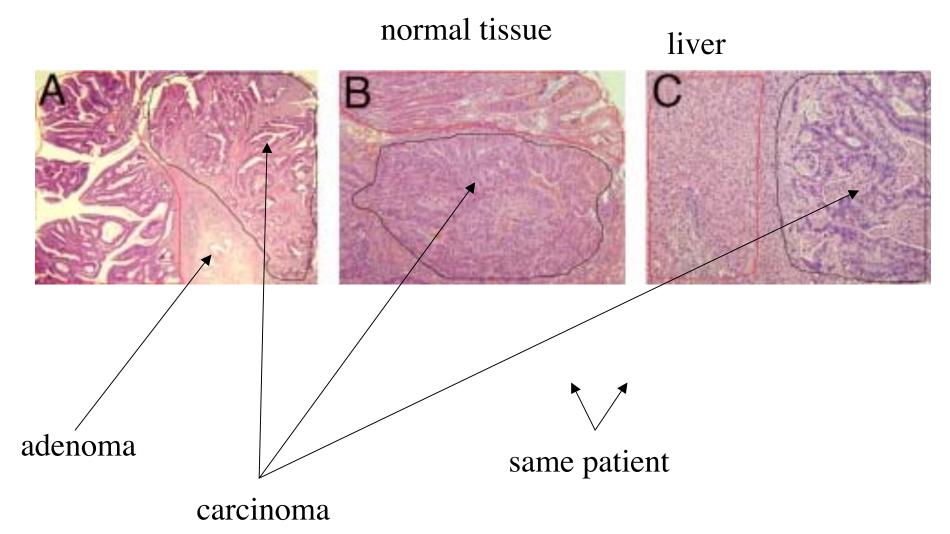
# **Colorectal Cancer**

Colonoscopy (Crohn's disease)

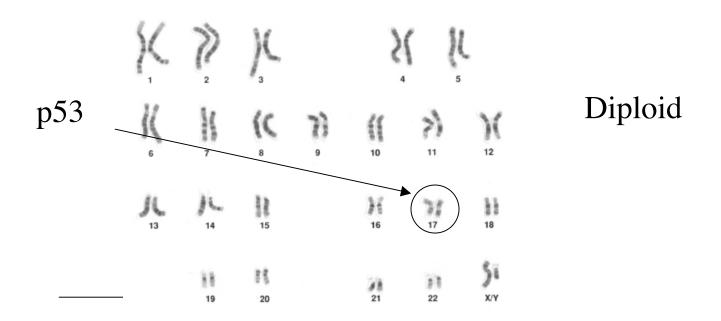




## metastasis



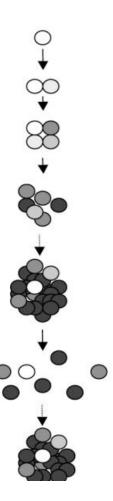
### Chromosomal Instabilities



- \* Breakage: section of chromosome 17 with p53 broken off.
- \* Tetraploidy: 4 sets of chromosomes.

#### Asymmetric selfrenewal divisions

- O Stem cell
- Multipotent progenitor
- Lineage restricted progenitor
- Differentiated, lineage committed cell
- Differentiated, lineage committed cell



- \* What fraction of tumor cells are stem-like?
- \* Can early progenitor cells start clonal expansion? Mutate into stem cells

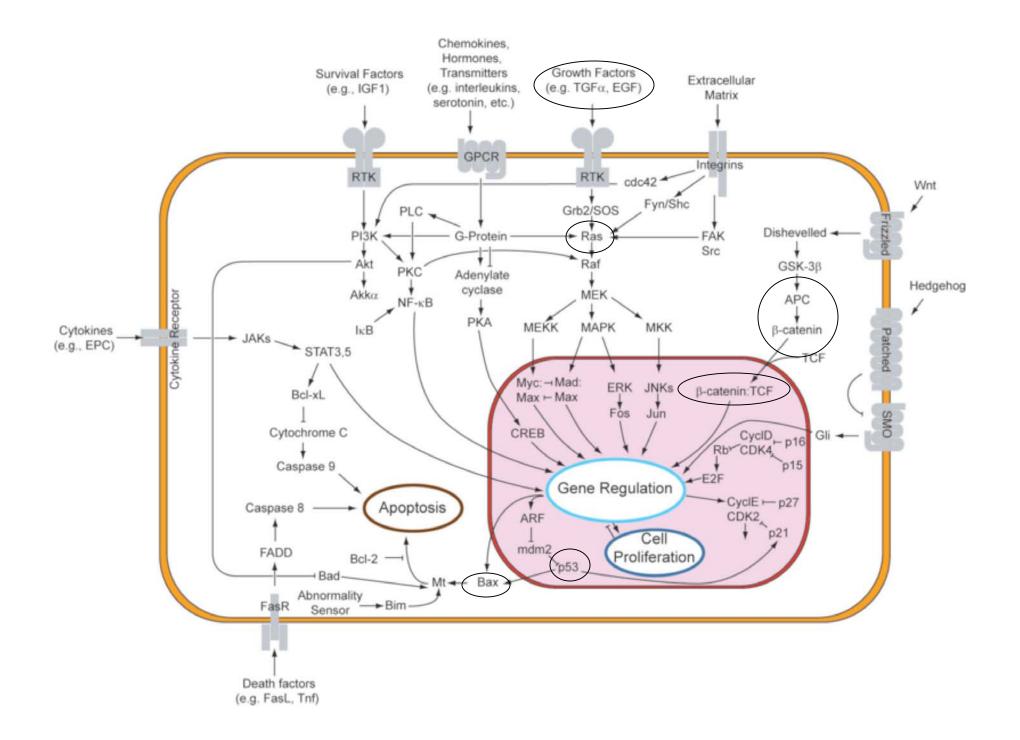
Probably not for early colorectal cancer: Nature Reviews Cancer 9, 2 (01 February 2009): Size does not matter?

#### Unresolved issue:

- 1) What is the optimal game strategy for a cancer? (Shibata, commentary)
- A) Maximize clonal diversity: more efficient search for combinations of mutations that have high cell division rate. **Low clone size**. Minimal clonal competition.
- B) Maximize clone size: larger clone size increases probability for making the *next* hit of the mutation sequence. **Low diversity**.
- 2) What is the role of <u>epigenesis</u> and <u>phenotypic persistance</u>? The same clone can have regions of cells with different DNA methylation patterns altering gene expression.

## Colorectal cancer: 10<sup>2</sup> mutations/cell

3) Apart from the major mutations (APC, p53, K-Ras, PTEN,...), do a *large* number of mutations with a *small* differential advantage have important effects? Diversity produce "mutational robustness"? (Beerenwinkel et al., 2007)



# Does clonal expansion matter?

# Example:

$$A -> B -> C -> D -> E$$

1) Growth Rate: non-linear dependence on # mutations

A cell: 1.01. A + B cell: 1.05. A + B+ C cell: 5.

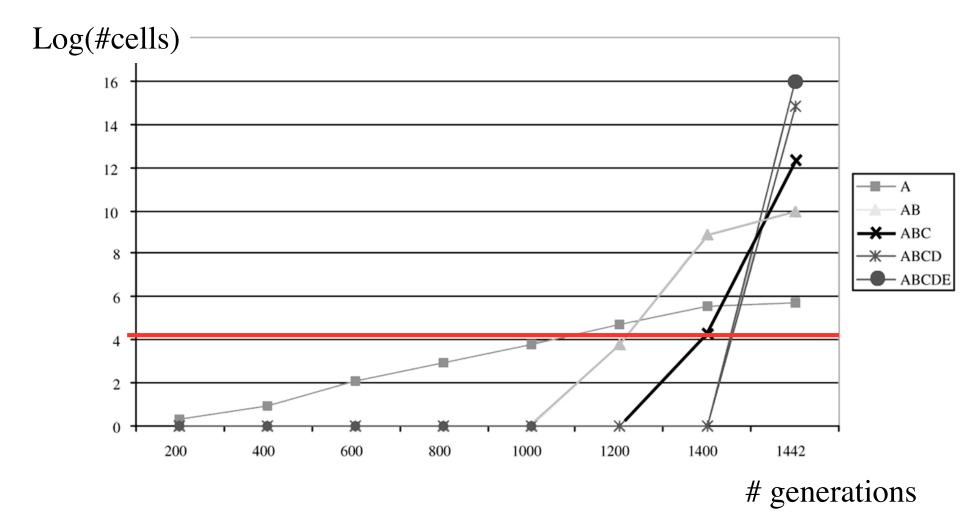
A + B + C + D cell: 20. A + B + C + D + E: 100.

2) Let all cancer cells undergo an unlimited number of divisions.

#### numerical simulation

\* Mutation rate:  $u = 2x10^{-7}$  per generation per gene

Tomlinson Breast Cancer Res. 2001 3:299



<sup>\*</sup> Solves small-u problem? Clone size amplifies mutation probability.