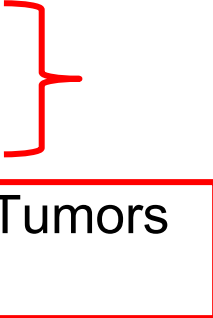




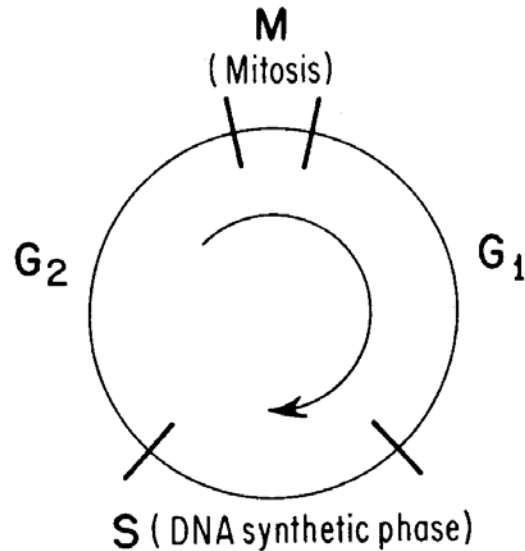
# Chapter 22 – Cell, Tissue, and Tumor Kinetics

11/25/2024

# Outline

- **Quantitative Assessment of the Constituents of the Cell Cycle**
    - Mitotic Index and Labeling Index
    - The Percent Labeled Mitoses Technique
    - Experimental Measurements of  $T_c$  *In Vitro* and *In Vivo*
  - Tumor Volume Doubling
  - Growth Fraction
  - Cell Loss
  - Growth Kinetics of Human Tumors
  - Tumor Control Probability
- 

# Cell Cycle



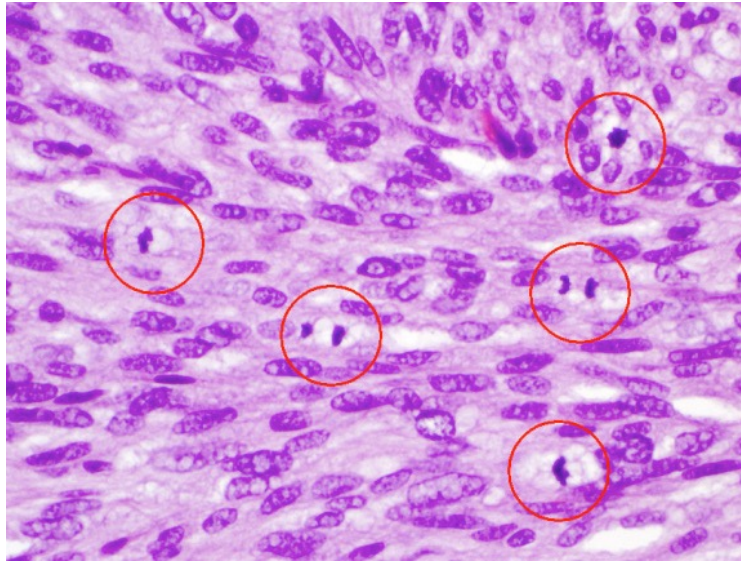
Mammalian cells replicate and increase in number by **mitosis**

Cell cycle in dividing mammalian cells are divided into 4 phases – mitosis (**M**) and DNA synthetic phases (**S**) are separated by 2 gaps (**G<sub>1</sub>** and **G<sub>2</sub>**)

The average interval between successive mitoses is called the **cell cycle time** or **mitotic-cycle time**

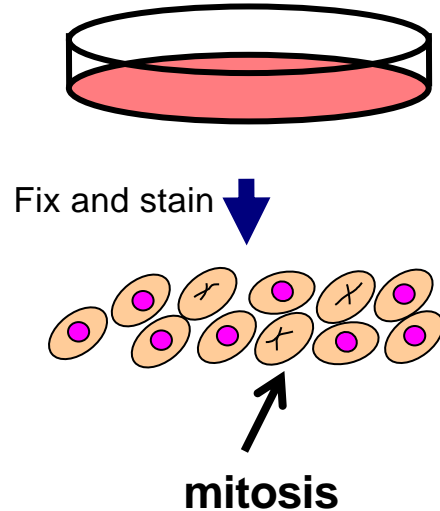
Goal - to obtain the **length** of each phase of the cell cycle

# Cell Labeling Technique



Using conventional light microscope, the only event that can be distinguished is the process of **mitosis**

# Mitotic Index

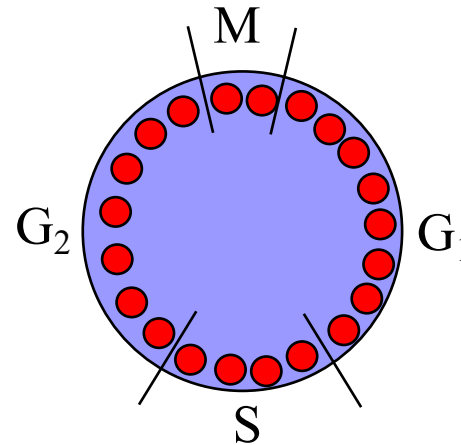


The proportion of cells in mitosis can be counted, this is known as the **mitotic index (MI)**

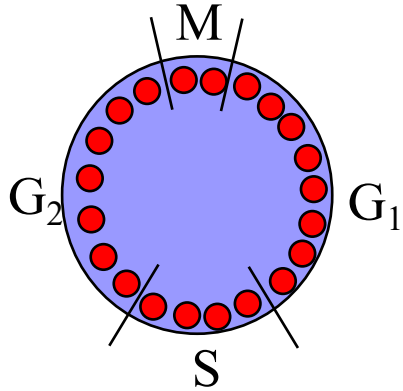
If we assume that all of the cells are dividing, and all cells have the same mitotic cycle then,

$$MI = T_M / T_C$$

$T_M$  is the length of mitosis,  $T_C$  is the length of cell cycle



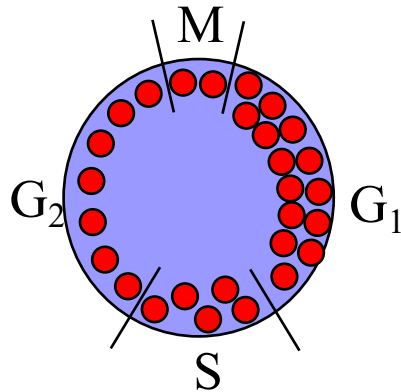
# Mitotic Index



However, cells cannot be distributed uniformly in time around the cell cycle because they double during mitosis, therefore a correction factor,  $\lambda$ , is needed



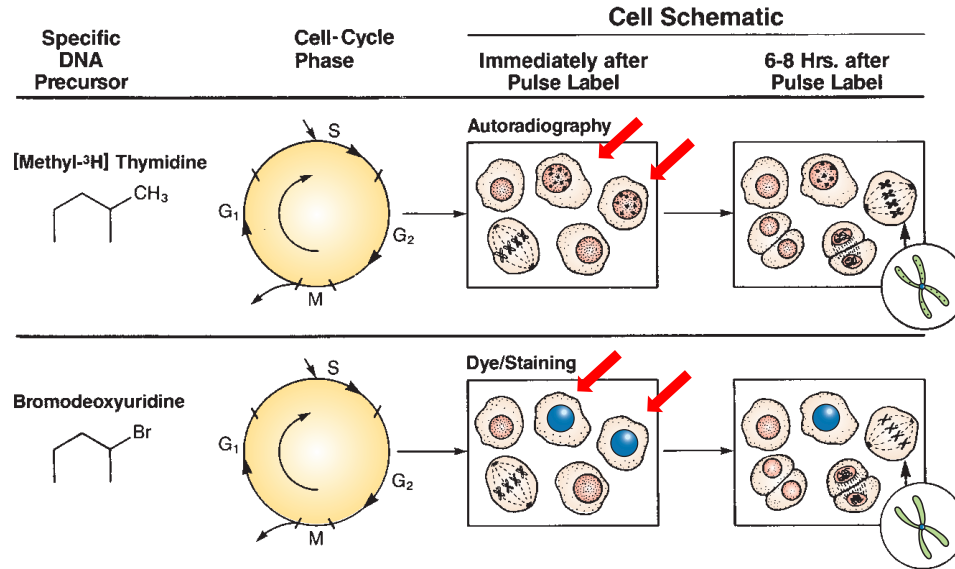
$$MI = \lambda T_M / T_C$$



The simplest assumption is that cells are distributed around the cycle exponentially in time, in which case  $\lambda = 0.693$

$\lambda$  is an unimportant correction factor

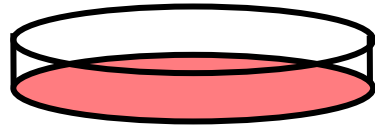
# Cell Labeling Technique



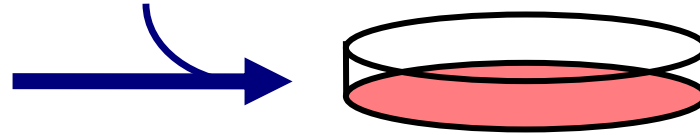
**Cell labeling technique** using either tritiated thymidine or BrdU allows us to follow the progression of cell cycle

Pulse label is only incorporated in cells undergoing DNA synthesis (**S phase**)

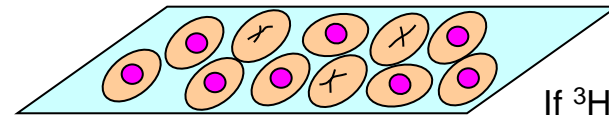
# Labeling Index



Label with  $^3\text{H-TdR}$  or BrdU for 20 mins



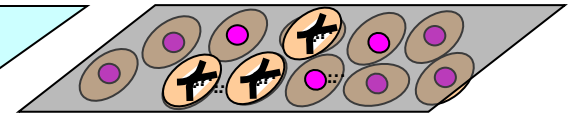
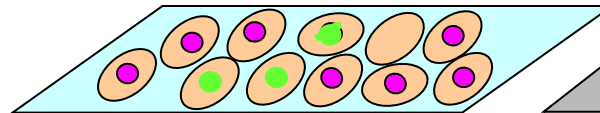
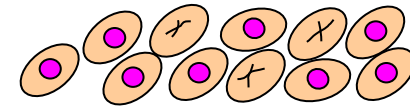
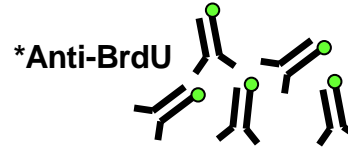
Fix



If BrdU labeled

If  $^3\text{H-TdR}$  labeled

AR film



If cells are **flash-labeled** before fixing, proportion of cells in synthetic phase (S) can be counted, and we can define **labeling index (LI)**

$$LI = \lambda T_S / T_C$$

$T_S$  is the length of DNA synthesis



# MI and LI

$$\text{Mitotic Index (MI)} = \lambda T_M/T_C$$

$$\text{Labeling Index (LI)} = \lambda T_S/T_C$$

Note that these are **ratios**

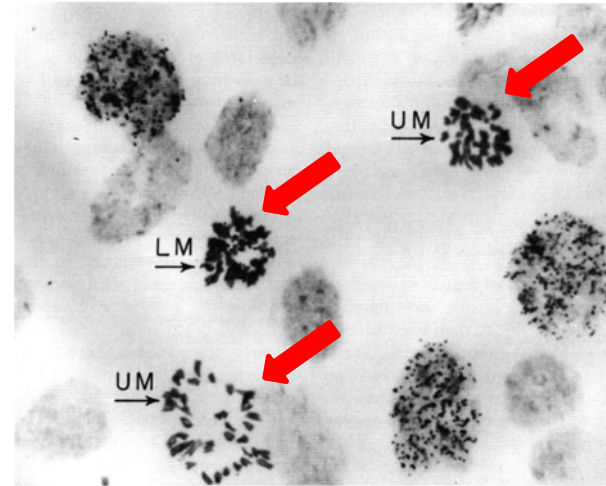
To obtain the **length of each phase**, we need to use the **percent labeled mitoses technique**

# Percent Labeled Mitoses Technique

The entire cell population (*in vitro*) or specimen (*in vivo*) is flash labeled

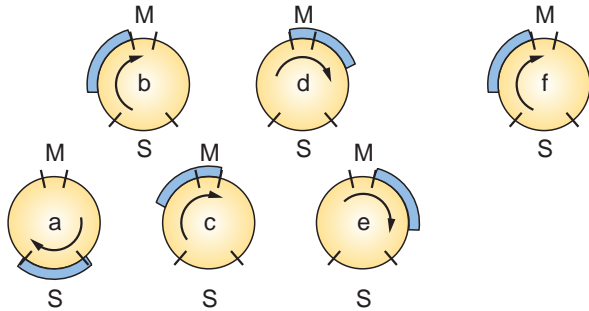


Collect samples each hour (for total time  $> T_C$ ), fix, stain & count % of mitotic cells that carry a radioactive label

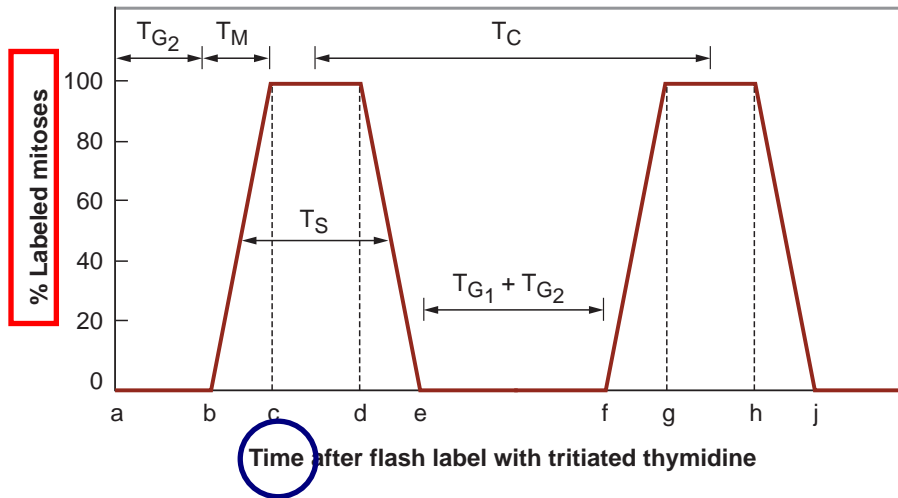


This is a very laborious process because only 1-2% of cells are in mitosis at any given time point, and only a fraction of these will be labeled

# Percent Labeled Mitoses Curve



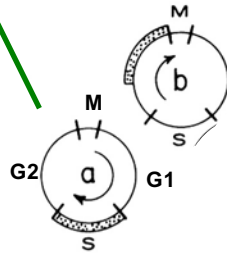
The movement of the labeled cells through the cell cycle is followed



← % of labeled mitoses is plotted as a function of time

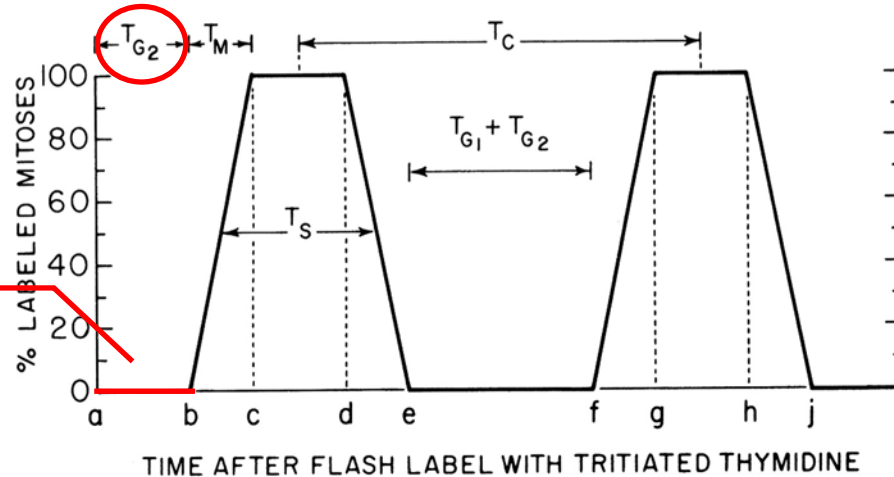
# Length of $G_2$

At time a, there will be no cells with labeled mitosis



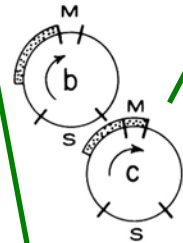
The first labeled mitotic figure appears as the leading edge of the cohort of labeled cells reaches M

The length of time **ab** thus equals length of  $G_2$



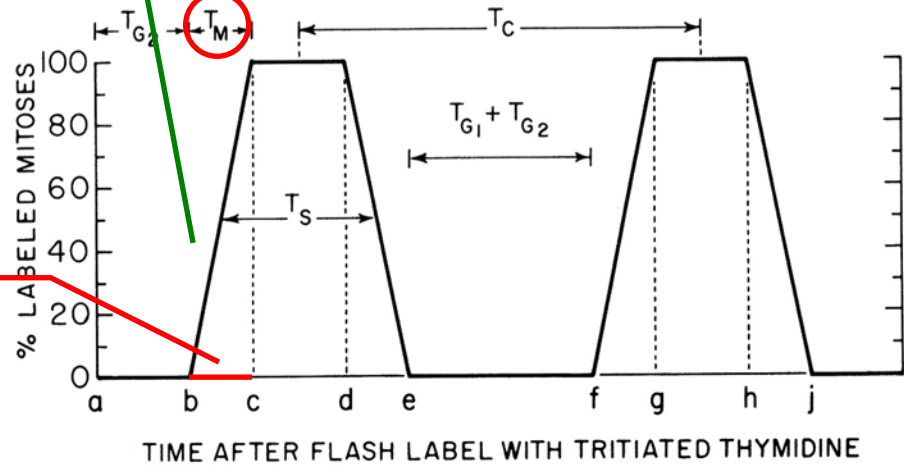
# Length of M

The % of mitotic figures labeled  $\uparrow$  rapidly as the leading edge of the labeled cohort of cells passes through the M phase



When the leading edge reaches the end of the M phase, all mitotic figures are labeled (position c)

The length of **bc** thus equals length of **M**



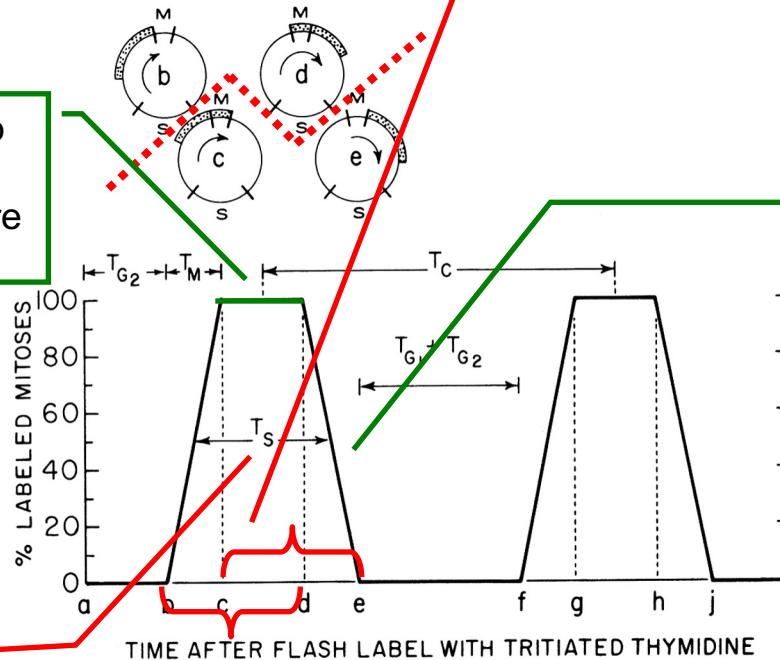
# Length of S

The duration **bd** or **ce** is the length of DNA synthesis ( $T_S$ )

From time **c** to **d**, all of the mitotic cells are labeled

Once the trailing edge reaches the beginning of the mitosis (**d**), the % of labeled mitoses rapidly ↓ and becomes 0% when the trailing edge reaches the end of mitosis (**e**)

In practice,  $T_S$  usually is taken to be the **width of the curve at the 50% level**

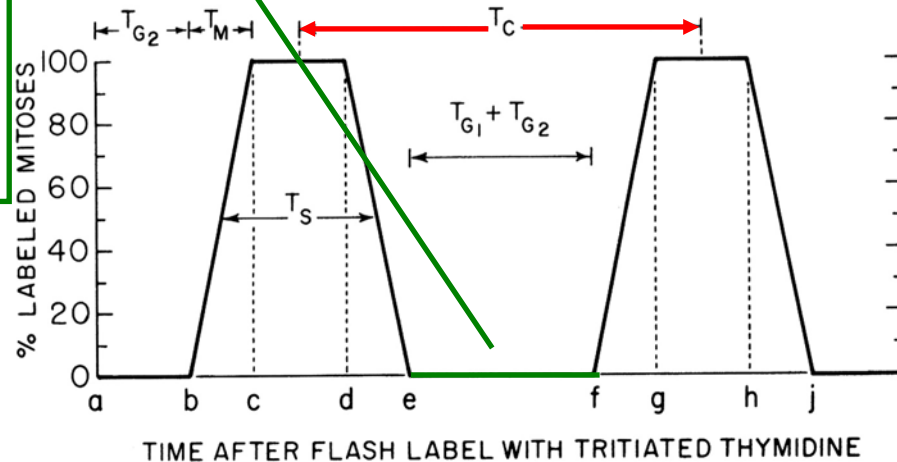


TIME AFTER FLASH LABEL WITH TRITIATED THYMIDINE

# Length of $T_C$

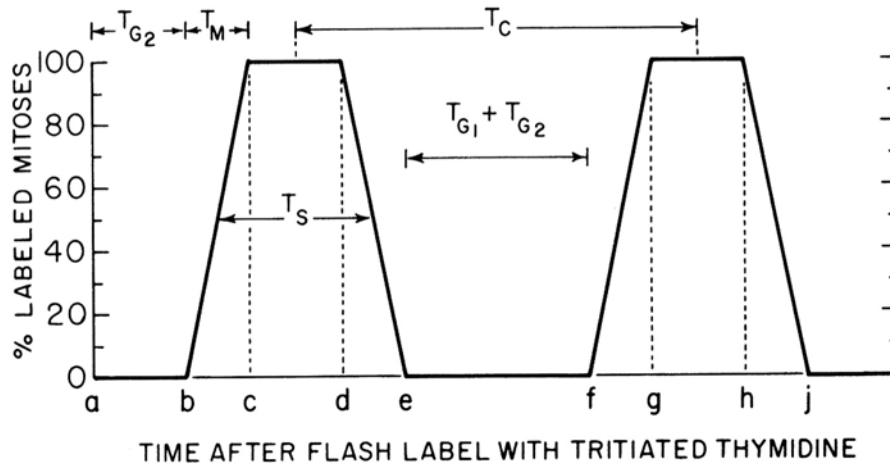
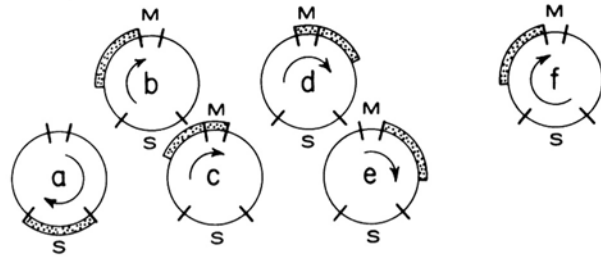
After the trailing edge moves through the end of mitosis (**e**), there is a long interval during which no labeled mitotic figures are seen until the labeled cohort of cells goes around the entire cycle and comes up to mitosis again (**f**)

The total cycle ( $T_C$ ) is the distance b/w corresponding points on the first and 2<sup>nd</sup> wave (**bf**, **cg**, **dh**, or **ej**) or the **distance b/w the centers of the 2 peaks**



TIME AFTER FLASH LABEL WITH TRITIATED THYMIDINE

# Length of G<sub>1</sub>

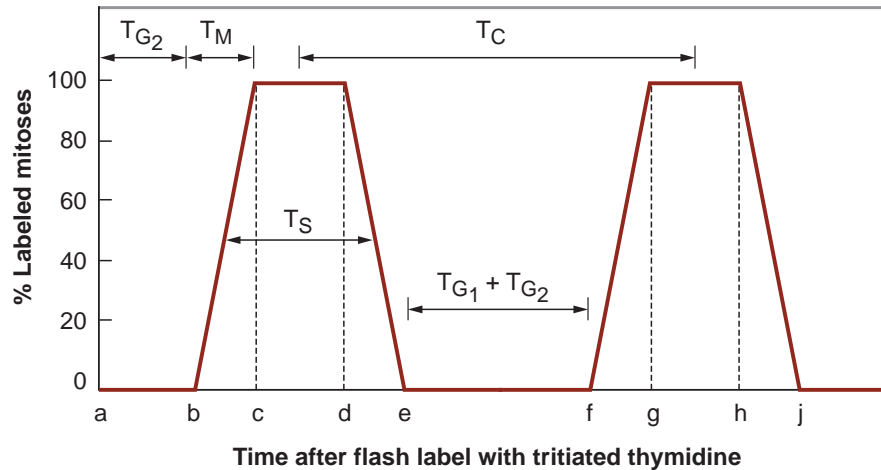
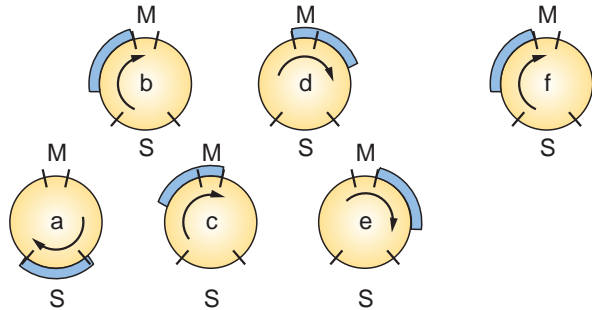


**T<sub>G1</sub>** can be calculated by subtracting the sum of all the other phases of the cycle from the total cell cycle

$$T_{G1} = T_C - (T_S + T_{G2} + T_M)$$



# % Labeled Mitoses Summarized



$$T_{G2} = ab$$

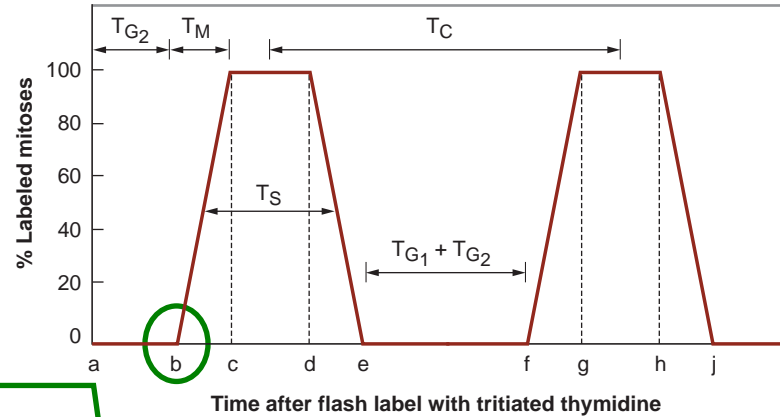
$$T_M = bc$$

$$T_S = bd \text{ or } ce \text{ (or as in figure)}$$

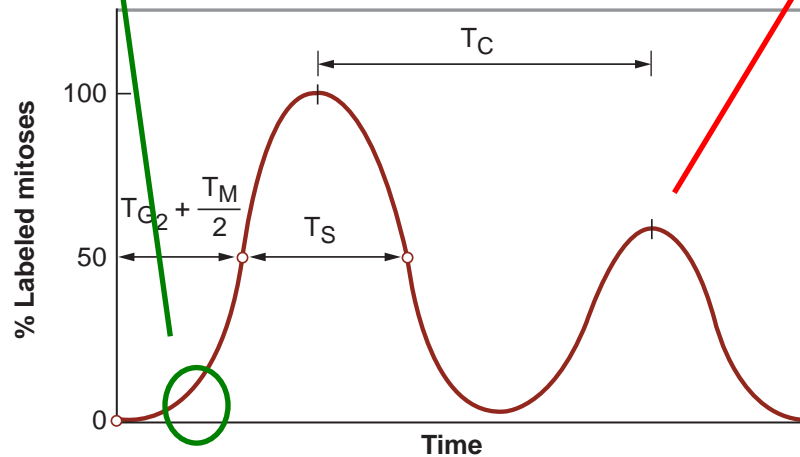
$$T_C = \text{peak 1} - \text{peak 2}$$

$$T_{G1} = T_C - (T_S + T_{G2} + T_M)$$

# % Labeled Mitoses in Practice



Points such as b and e are poorly defined

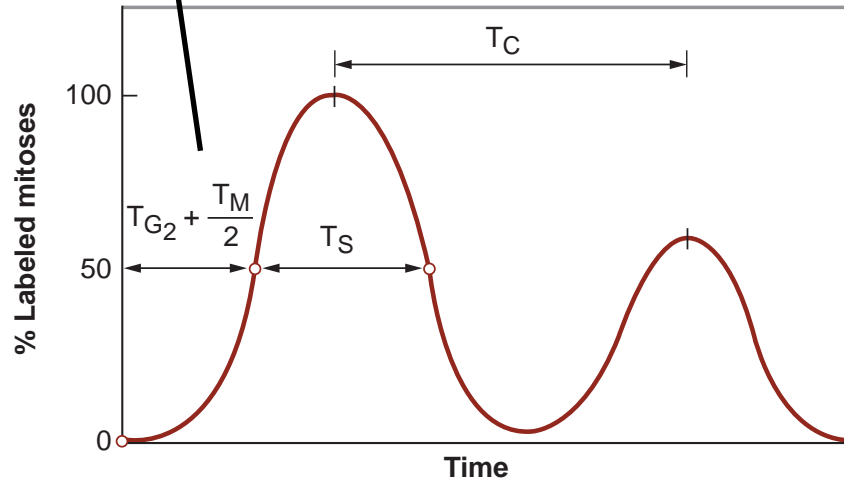


2<sup>nd</sup> wave has a smaller peak

# % Labeled Mitoses in Practice

Only points discernable are the peaks and the 50% levels

3.  $T_{G2}$  may be calculated

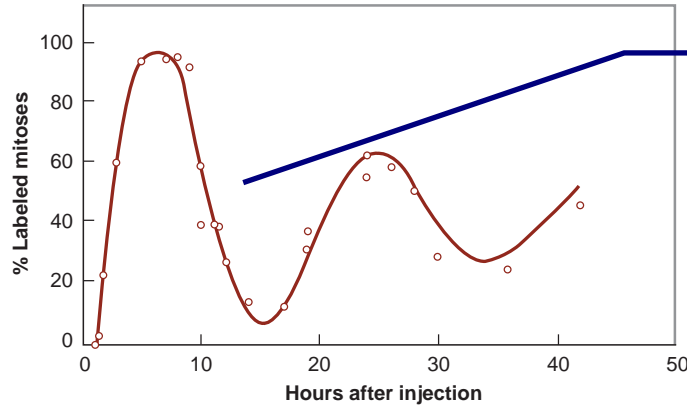


1.  $T_C$  and  $T_S$  are obtained the same way as discussed before

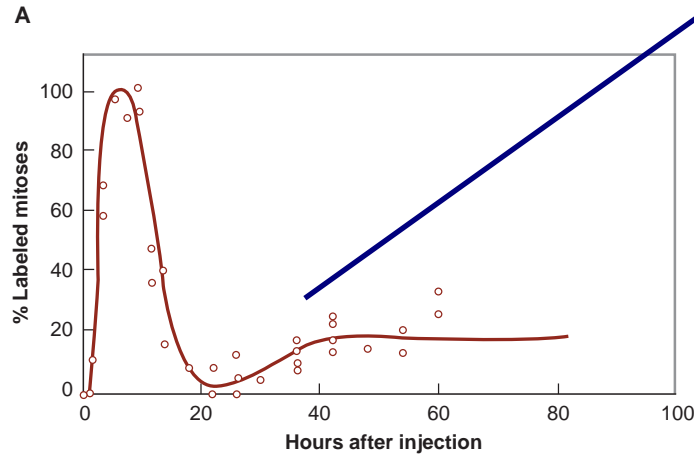
2. To obtain  $T_M$ , we have to determine MI from a separate experiment  
 $MI = \lambda T_M / T_C \rightarrow T_M = MI \times T_C / \lambda$

4.  $T_{G1}$  may be calculated by subtraction

# Experimental Data – 2 Rat Sarcomas



The first wave is not symmetric – the downswing is shallower than the upswing

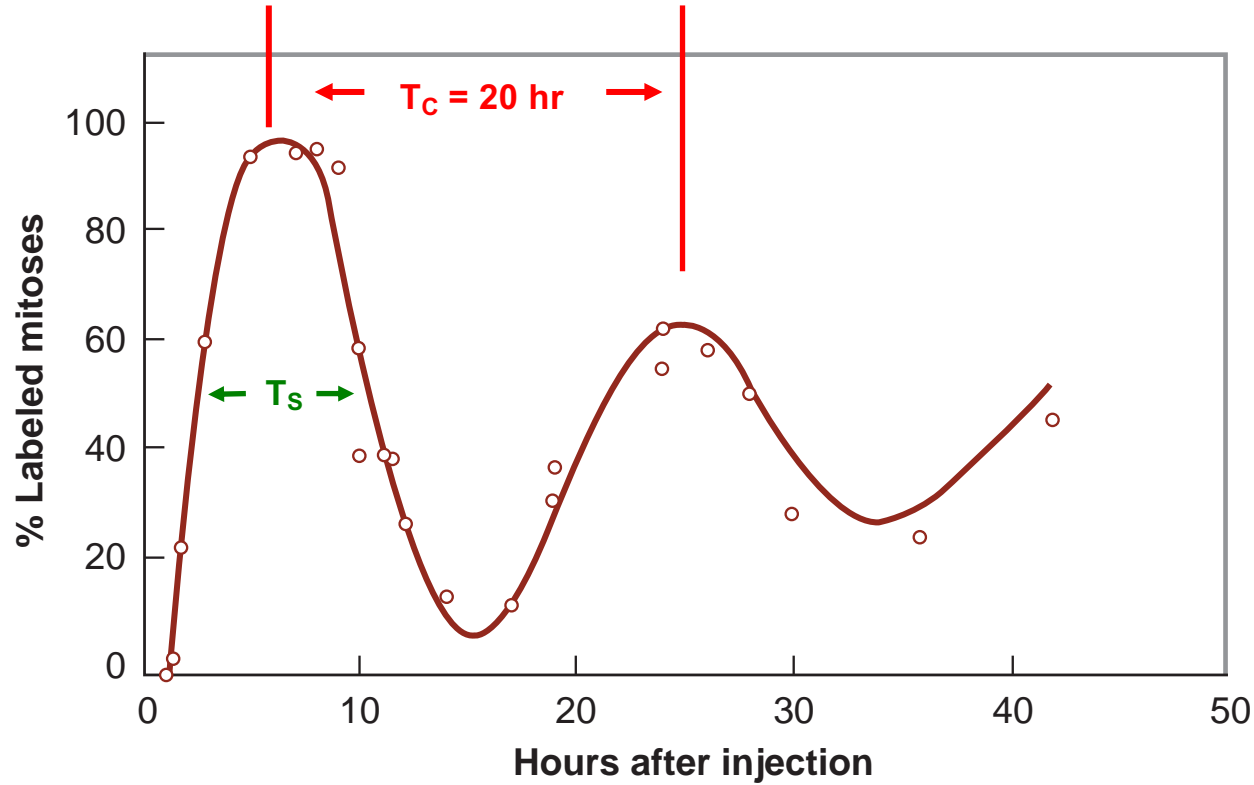


The 2<sup>nd</sup> wave is smaller, and in some instances, barely discernible

Both are due to the fact that the population is made up of cells with a wide range of cycle times

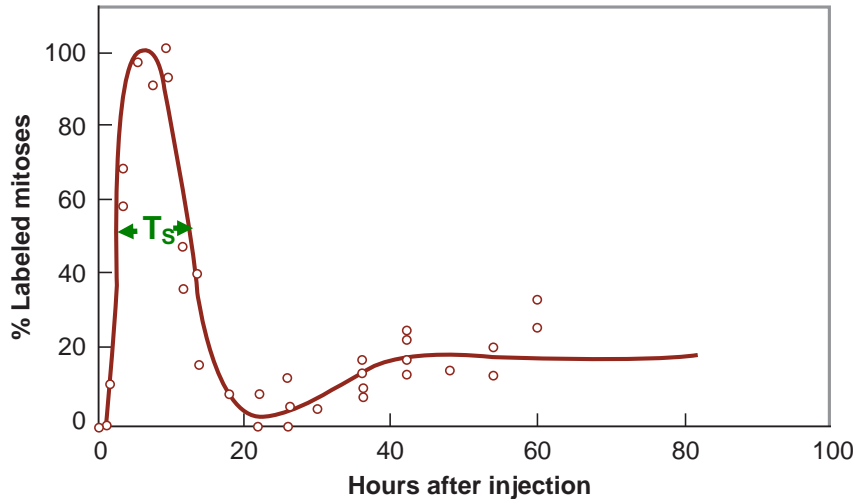
B

# Experimental Data – Rat Sarcomas



A

# Experimental Data – Rat Sarcoma



B

$T_C$  cannot be simply obtained by measuring the distance b/w the 2 peaks

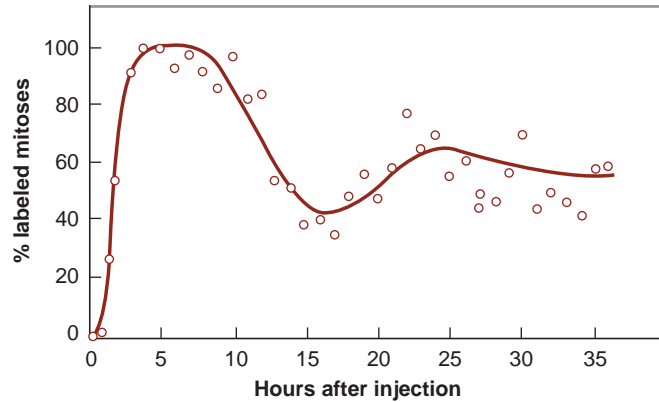
$T_S$ , however, can still be read off the curve ( $\sim 10$  h)

If we know the labeling index, then,  
 $LI = \lambda T_S / T_C \rightarrow T_C = \lambda T_S / LI$

In this case, LI is  $\sim 3.6\%$   $\rightarrow T_C (0.693 \times 10) / (3.6/100) = 192.5$  hours

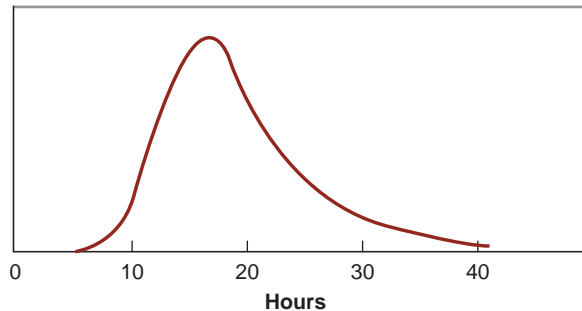
The absence of a 2<sup>nd</sup> peak is a clue to the fact that there is a range of cell-cycle times for the cells of this population, so 192.5 hours is very much **an average value**

# Experimental Data – EMT6 Mouse Tumor



B

The shallower downward swing and barely discernible 2<sup>nd</sup> peak indicates a wide range of cell cycle times for this tumor



A

Distribution of cell-cycle times estimated by computer analysis – varies from 10 to 40 hours, with a modal value of ~ 19 hours

# Cell Cycle Time *In Vitro* and *In Vivo*

Authors	Cell or Tissue	$T_C$	$T_S$	$T_M$	$T_{G_2}$	$T_{G_1}$
Bedford	Hamster cells <i>in vitro</i>	10	6	1	1	2
	HeLa cells <i>in vitro</i>	23	8	1	3	11
Steel	Mammary tumors in the rat					
	BICR/M1	19	8	~1	2	8
	BICR/A2	63	10	~1	2	50
Quastler and Sherman	Mouse intestinal crypt	18.75	7.5	0.5	0.5–1.0	9.5
Brown and Berry	Hamster cheek pouch epithelium	120–15	28.6	1.0	1.9	108–140
	Chemically induced carcinoma in pouch	10.7	5.9	0.4	1.6	2.8

Note that in general, the malignant cells have a shorter  $T_C$  than their normal-tissue counterparts

$T_{G_1}$  varies widely and is the major contributor to the widely different  $T_C$  values observed



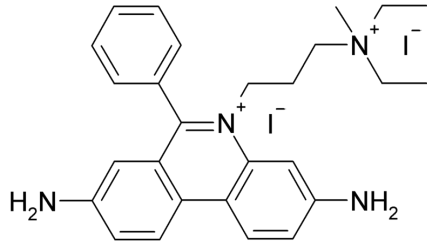


# Pulsed Flow Cytometry

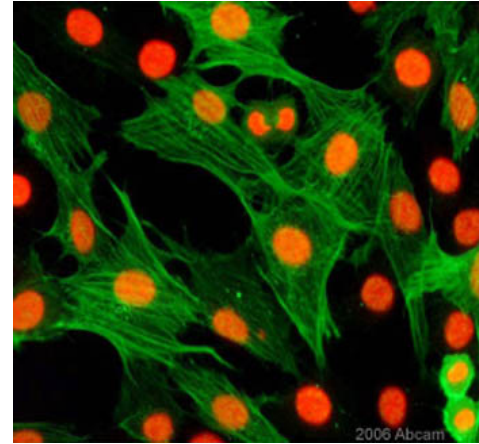
Classic autoradiography gives precise, meaningful data. However, they are laborious and so slow that information is never available quickly enough to act as a predictive assay to influence treatment options of an individual patient

During the past several decades, autoradiography has largely been replaced by **pulsed flow cytometry**, which provide data within a few days

# Flow Cytometry



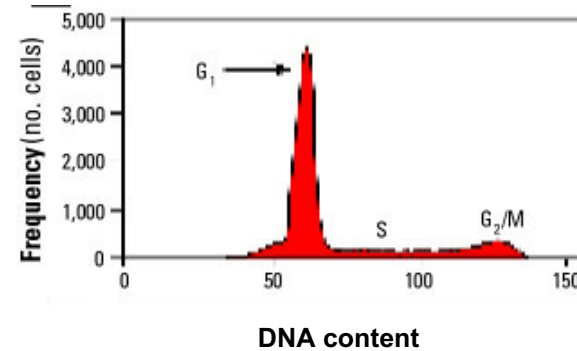
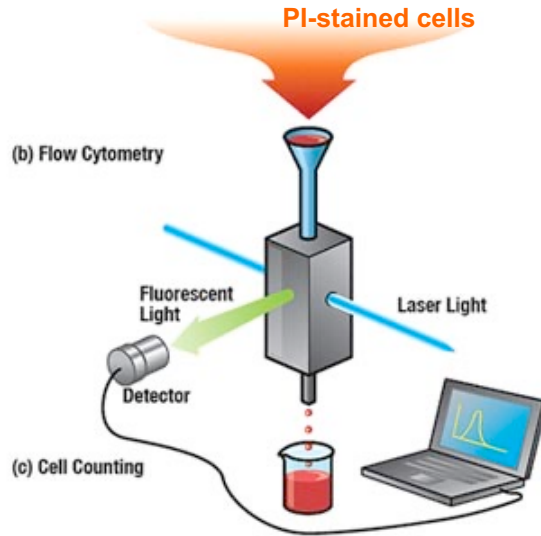
Propidium iodide (PI)



Propidium iodide is an **intercalating agent** and a **fluorescent molecule**

It binds to DNA by intercalating between the bases with ***little sequence preference***  
→ amount of fluorescence is proportional to the **DNA content**

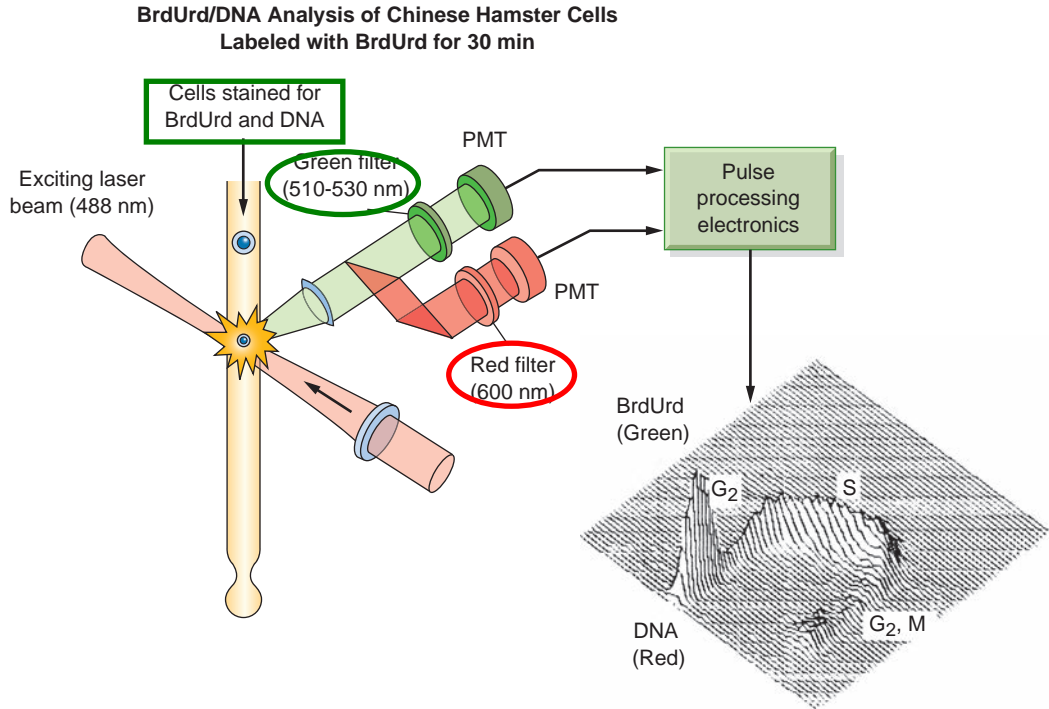
# Flow Cytometry



Suspensions of fluorescent-stained single cells flow **one at a time** through a light beam, with its wavelength adjusted to excite the fluorescent dye

Thousands of cells can be measured each second and the results accumulated to form a DNA distribution

# Pulsed Flow Cytometry – Double Labeling

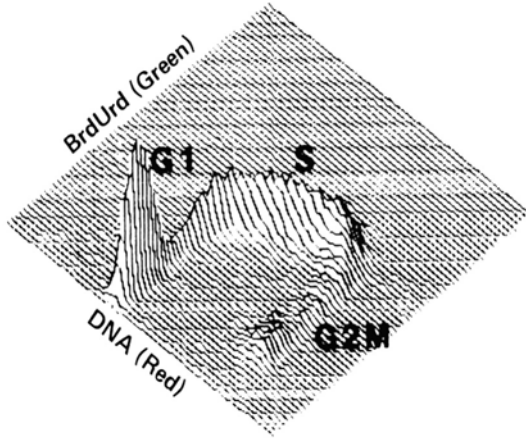


Cells labeled with **BrdUrd** are removed from the tumor in a biopsy specimen **4-8 h after labeling** and are detected with a fluorescent-labeled antibody (**green fluorescence**)

The biopsy specimen is treated with **PI (red fluorescence)**

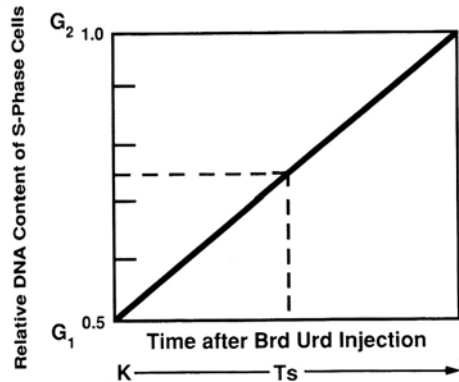
A 3D graph of **labeled cells (green)** vs. **DNA content of cells (red)** is generated

# Pulsed Flow Cytometry – Double Labeling



**Labeling Index (LI)** = the proportion of cells that show green fluorescence

**$T_s$**  can be calculated from the mean red fluorescence of S cells relative to  $G_1$  and  $G_2$  cells

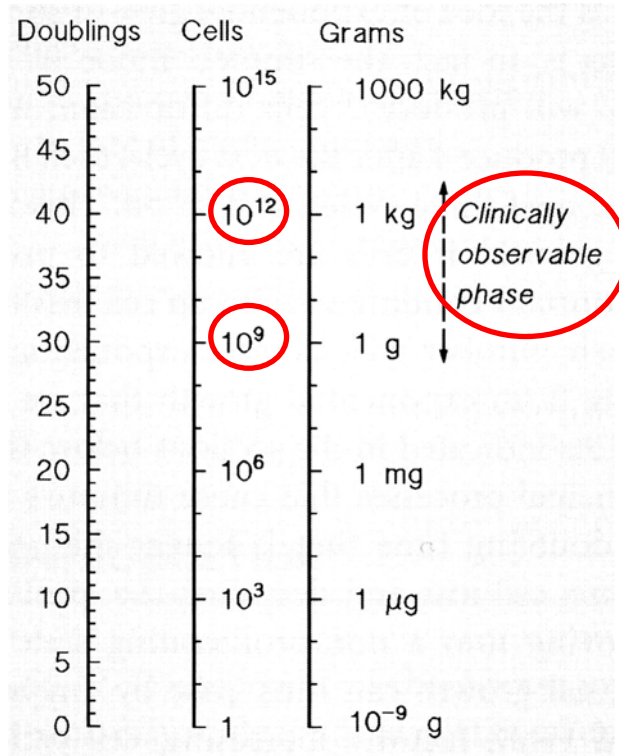


The method assumes that the red fluorescence of BrdU labeled cells (i.e., the DNA content of cells in S phase) increases linearly with time. If, for example, the biopsy specimen were obtained 6 hours after administration of BrdU, and the relative DNA content of cells labeled with BrDU (i.e., in S phase) were 0.75, midway between that characteristic of  $G_1$  and that of  $G_2$ ,  $T_s$  would be simply 12 hours.

# Outline

- Quantitative Assessment of the Constituents of the Cell Cycle
  - Review of Cell Cycle
  - Mitotic Index and Labeling Index
  - The Percent Labeled Mitoses Technique
  - Experimental Measurements of  $T_c$  *In Vitro* and *In Vivo*
- **Tumor Volume Doubling**
- Growth Fraction
- Cell Loss
- Growth Kinetics of Human Tumors
- Tumor Control Probability

# Tumor Weight and Cell Numbers



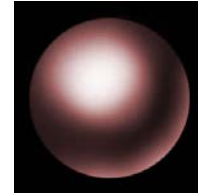
Assume  $10^9$  per gram

Tumor starts as **1** genetically altered cell

By the time a tumor becomes clinically detectable, it has already gone through 30 doubling times, and contains at least  **$10^9$**  cells

# Tumor Volume and Doubling Time

$$V = \frac{4}{3} \pi r^3$$



## Question

A tumor has an initial diameter of 0.5 cm. In 100 days, tumor has grown to 4 cm. What is the tumor doubling time?

## Answer

Diameter  $\uparrow$  by a factor of 8  $\rightarrow$  volume  $\uparrow$  by  $8^3 = 512$ -fold

$2^n = 512$  ( $n = \#$  of doublings)  $\rightarrow n = 9$

9 doublings in 100 days  $\rightarrow$  1 doubling every 11 days

The tumor volume doubling time is  $\sim 11$  days

In this calculation, we assumed no cell loss, and all tumor cells are growing



# Tumor Growth Characteristics

Note that, **volume doubling time**  $\neq$  **cell cycle time**, because tumor growth also depends on the fraction of tumor cells in cycle, as well as the fraction eliminated spontaneously

3 factors determine tumor growth (i.e., volume doubling)

```
graph TD; A[3 factors determine tumor growth (i.e., volume doubling)] --> B[1. Cell Cycle Time]; A --> C[2. Growth Fraction]; A --> D[3. Cell Loss Fraction];
```

1. Cell Cycle Time

2. Growth Fraction

3. Cell Loss Fraction

These are the parameters concerning the **growth kinetics of tumor**

# Outline

- Quantitative Assessment of the Constituents of the Cell Cycle
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- **Growth Fraction**
- Cell Loss
- Growth Kinetics of Human Tumors
- Tumor Control Probability

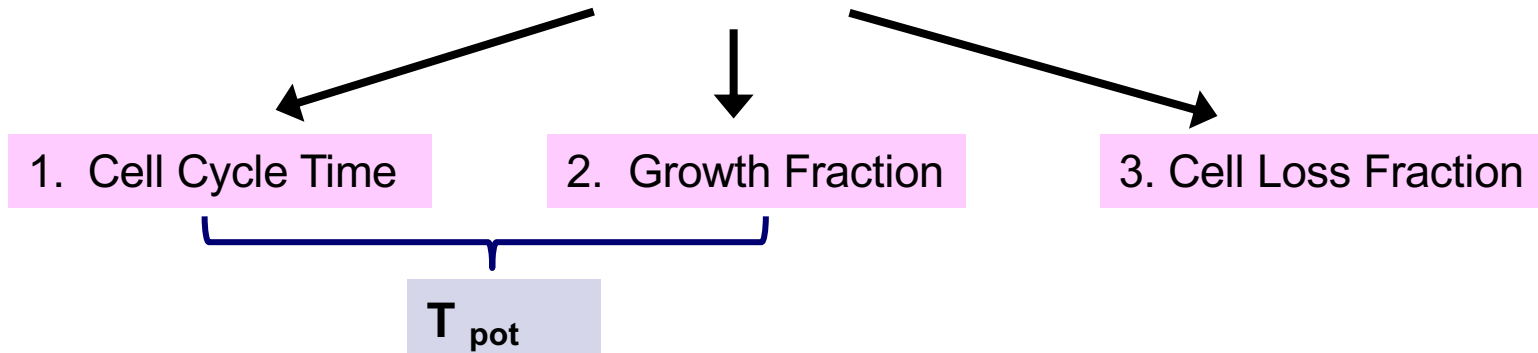
# Growth Fraction

Not all of the tumor cells that are viable and capable of continued growth are actually proceeding through the cell cycle

**Growth fraction** is the ratio of the number of proliferating cells to the total number of cells

$$GF = P/(P+Q), \text{ where } P = \text{proliferating, } Q = \text{quiescent}$$

3 factors determine tumor growth (i.e., volume doubling)



# Potential Tumor Doubling Time ( $T_{\text{pot}}$ )

$T_{\text{pot}}$  is defined as the cell doubling time without any cell loss

$T_{\text{pot}}$  is the average doubling time of the cells capable of **continued proliferation**, thus it reflects the **cell cycle of individual cells** and the fraction of cells in active cycle (**growth fraction**), but ignores **cell loss** (to be discussed later)

# Potential Tumor Doubling Time ( $T_{\text{pot}}$ )

With pulsed flow cytometry determining  $T_s$  and LI, we can then estimate  $T_{\text{pot}}$ , the **potential tumor doubling time**

$$T_{\text{pot}} = \lambda T_s / \text{LI}$$

Reflects growth fraction

Relates to cell cycle length

**Clinical relevance** – tumors with a short  $T_{\text{pot}}$  may need to be treated with accelerated therapy, otherwise they will repopulate faster than they can be killed;  $T_{\text{pot}}$  has proved to be practical as a **predictive assay**

# Growth Fraction

Because not all cells in a tumor are in a growth fraction, potential doubling time ( $T_{\text{pot}}$ ) is usually longer than the average cell cycle time ( $T_C$ ) of dividing cells

$$T_{\text{pot}} = \lambda T_S / LI = 0.693 T_C / \ln(1 + GF)$$

**GF = 100%**

$$T_{\text{pot}} = 0.693 T_C / \ln 2$$
$$T_{\text{pot}} = T_C$$

**GF = 0%**

$$T_{\text{pot}} = 0.693 T_C / \ln 1$$
$$T_{\text{pot}} = \infty$$

Thus,  $T_{\text{pot}}$  reflects the **cell cycle of individual cells** as well as the fraction of cells in active cycle (**growth fraction**) [We will look at cell loss in a minute]

# Growth Fraction

## Methods to Estimate Growth Fraction

1. **Pulsed labeling (then wait several cell generations)** – GF = fraction of cells labeled/fraction of mitoses labeled
2. **Continuous labeling** – tritiated thymidine is infused continuously for a time equal to the cell cycle minus the length of the S phase; the fraction of labeled cells then approximates to the growth fraction
3. **Ki-67 staining** – Ki-67 is an antibody that binds to nuclear antigen in cycling cells

# GF in Solid Tumors in Experimental Animals

TABLE 22.2 Growth Fraction for Some Tumors in Experimental **Animals**

Tumor	Author	Growth Fraction, %
Primary mammary carcinoma in the mouse (G <sub>3</sub> H)	Mendelsohn	35–77
Transplantable sarcoma in the rat (RIB <sub>5</sub> )	Denekamp	55
Transplantable sarcoma in the rat (SSO)	Denekamp	47
Transplantable sarcoma in the rat (SSB <sub>1</sub> )	Denekamp	39
Mammary carcinoma in the mouse (C <sub>3</sub> H)	Denekamp	30
Chemistry induced carcinoma in the hamster cheek pouch	Brown	29

In general, for solid tumors in experimental animals, the GF ranges from **30%-50%**



# Outline

- Quantitative Assessment of the Constituents of the Cell Cycle
  - Review of Cell Cycle
  - Mitotic Index and Labeling Index
  - The Percent Labeled Mitoses Technique
  - Experimental Measurements of  $T_c$  *In Vitro* and *In Vivo*
- Tumor Volume Doubling
- **Growth Fraction**
- Cell Loss
- Growth Kinetics of Human Tumors
- Tumor Control Probability

# Cell Loss

We already discussed that potential doubling time ( $T_{\text{pot}}$ ) is usually longer than the average cell cycle time ( $T_{\text{c}}$ ) of dividing cells because not all cells in a tumor are in a growth fraction

$$T_{\text{pot}} > T_{\text{c}}$$

In most cases, tumor **grow much more slowly** (i.e., the observed doubling time  $T_{\text{d}}$ ) than would be predicted from potential doubling time (i.e.,  $T_{\text{pot}}$ )

$$T_{\text{d}} > T_{\text{pot}}$$

This difference is due to **cell loss**

# Cell Loss

The **cell loss factor** is a measure of the rate of cell loss compared to the rate of new cell production

$$\text{Cell loss factor } (\Phi) = 1 - T_{\text{pot}}/T_{\text{d}}$$

$T_{\text{pot}}$  is the potential tumor doubling time

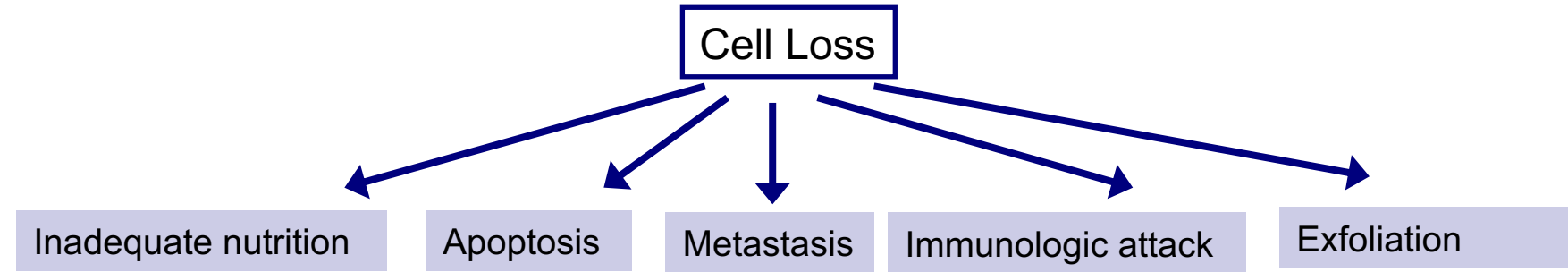
$T_{\text{d}}$  is the **actual tumor doubling time**

$\Phi = 0$  (i.e., no cell loss)  $\rightarrow T_{\text{pot}} = T_{\text{d}}$

$\Phi = 1$  (i.e., cell loss balanced out cell growth)  $\rightarrow T_{\text{d}}$  approaches  $\infty$

The actual tumor doubling time can be determined if  $T_{\text{pot}}$  and  $\Phi$  are known

# Mechanism of Cell Loss



As the tumor outgrows its vascular system, some cells will have inadequate access of oxygen and other nutrients; they die, giving rise to necrotic zone

Cells are lost to other parts of the body

Could be important for carcinoma of the GI tract, in which the epithelium is renewed at a considerable rate

# Cell Loss Factor in Experimental Animals

**TABLE 22.3** Cell-Loss Factor ( $\phi$ )  
for Some Tumors in  
Experimental Animals

Tumor	Author	$\phi$ , %
Mouse sarcoma	Frindel	
3-day-old tumor		0
7-day-old tumor		10
20-day-old tumor		55
→ Rat carcinoma	Steel	9
→ Rat sarcoma	Steel	0
Mouse carcinoma	Mendelsohn	69
{ Hamster carcinoma	Brown	75
→ Rat sarcoma	Hermens	26
{ Hamster carcinoma	Reiskin	81–93
{ Mouse carcinoma	Tannock	70–92

$\Phi$  varies from **0** to more than **90%**

**Sarcomas tend to have low  $\Phi$**

**Carcinomas tend to have high  $\Phi$**

The pattern correlates with the importance of **apoptosis** as a mode of cell death

# Cell Loss Factor and Tumor Regression

## Carcinoma

New cell production is stopped or reduced by radiation  
Existing cells continue to be removed (high  $\Phi$ ) } Tumor shrinks rapidly

## Sarcoma

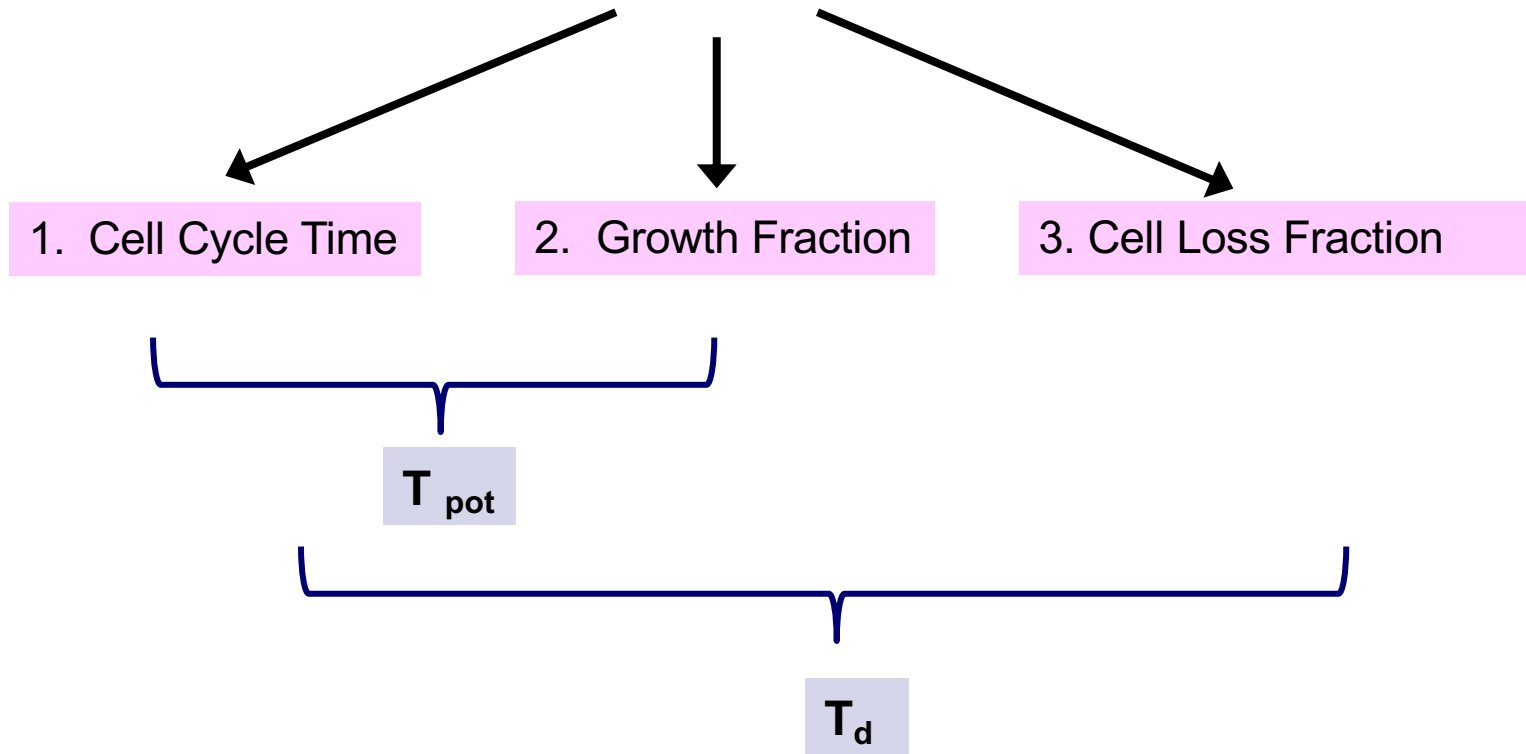
New cell production is stopped or reduced by radiation  
Existing cells are removed very slowly (low  $\Phi$ ) } Tumor regresses slowly

**In the short-term**, carcinoma would be said to have “responded” to the radiation, whereas the sarcoma might be said to be unresponsive or resistant to radiation

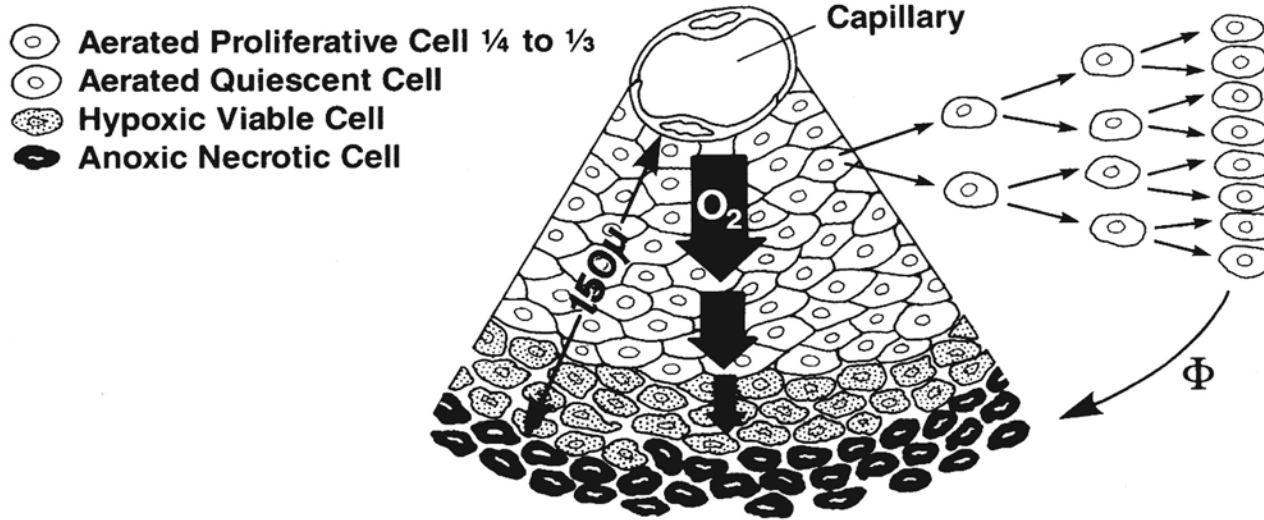
**In the long-term**, the ultimate “cure rates” depends on the number of surviving clonogens and may well be identical for both

# Tumor Growth Characteristics

3 factors determine tumor growth (i.e., volume doubling)



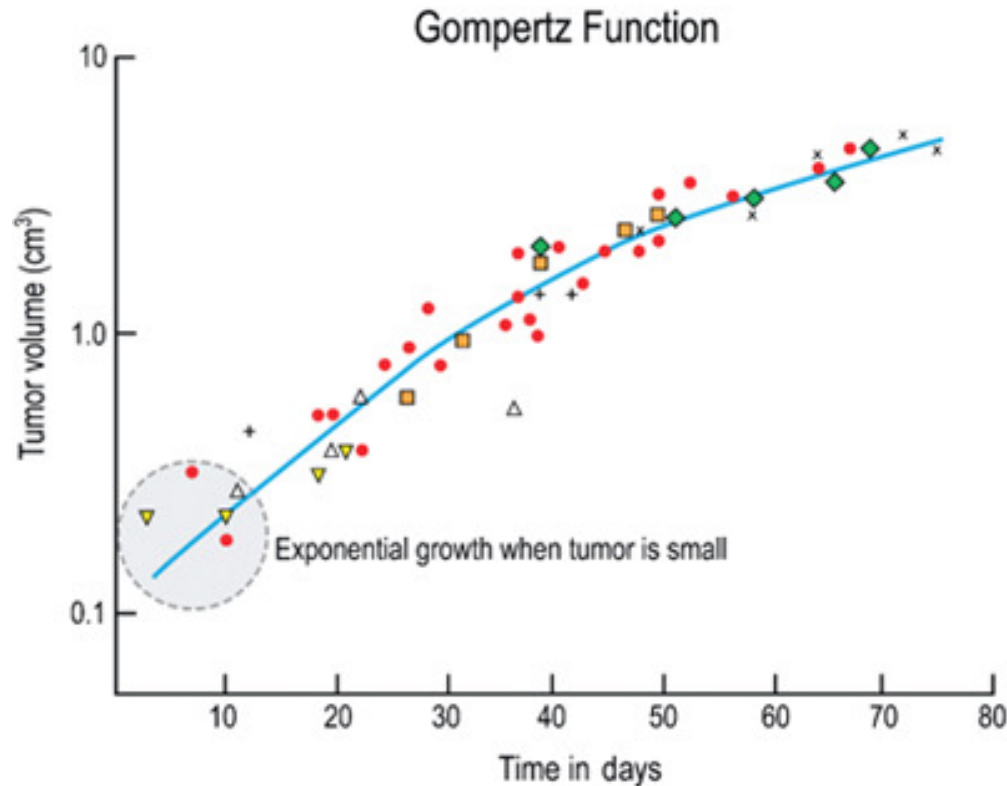
# Overall Growth Pattern of a Tumor



**Figure 21.11.** The overall pattern of the growth of a tumor. Clonogenic cells consist of proliferative (P) and quiescent (Q) cells. Quiescent cells can be recruited into the cell cycle as the tumor shrinks after treatment with radiation or a cytotoxic drug. In animal tumors the growth fraction is frequently 30 to 50%. Of the cells produced by division, many are lost, principally into necrotic areas of the tumor remote from the vasculature. The cell loss factor ( $\Phi$ ) varies from 0 to 100% and dominates the pattern of tumor growth. As the tumor outgrows its blood supply, some cells become hypoxic. This accounts for some of the quiescent cells that are out of cycle.



# Typical Growth Curve – Gompertz Function



- When tumor is composed of only a few cells, it may grow exponentially
- When it gets larger, the growth rate slows as the supply of oxygen and nutrients are outgrown

# Tumor Growth and Regression Patterns

$\Phi$	GF	$T_c$	Tumor Behavior
Low	Low	Long	Slow growth Slow regression
High	Low	Long	Slow growth Rapid regression
Low	High	Short	Rapid growth Slow regression
High	High	Short	Rapid growth Rapid regression

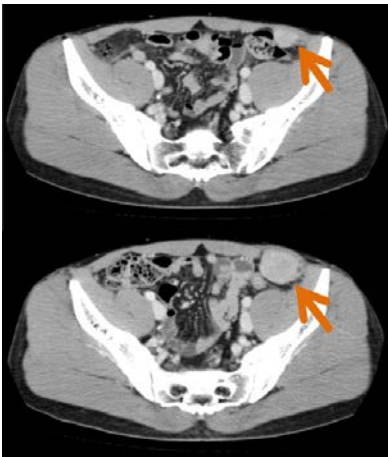
# Outline

- Tumor Volume Doubling
- Cell Cycle Time
  - Review of Cell Cycle
  - Mitotic Index and Labeling Index
  - The Percent Labeled Mitoses Technique
  - Experimental Measurements of  $T_c$  *In Vitro* and *In Vivo*
  - Potential Tumor Doubling Time
- Growth Fraction
- Cell Loss
- **Growth Kinetics of Human Tumors**
- Tumor Control Probability

# Doubling Time

**Doubling Time** is perhaps the easiest parameter to study

$T_D$  of human tumors may be obtained by measurements from radiographs, or by direct measurements of skin tumors or metastases in soft tissues (non-invasive)



The  $T_D$  human tumors varies widely from patient to patient and is on the average very long; ***Tubiana and Malaise*** have estimated that the median value is about **2 months**

# Doubling Time

## Factors Affecting $T_D$

**Poorly differentiated** cancers generally grow more rapidly

Tumors of the same histologic type arising in **different patients** differ widely in growth rate (i.e, doubling time)

**Metastases** arising in the same patient tend to have similar rates of growth

# Doubling Time

There is a correlation between **histologic type** and growth rate

Type	$T_D$ days	LI %	GF %	$\Phi$ %	Radiosensitivity (Mean sterilization dose) Gy	Chemo- sensitivity
Embryonal Tumors	27	30	90	94	25-30	++
Lymphomas	29	29	90	94	35-40	++
Mesenchymal Sarcomas	41	4	11	68	85	--
Squamous Carcinomas	58	8	25	90	60-70	+
Adenocarcinomas	83	2	6	71	60-80	+/-

389 patients with pulmonary metastases (Tubiana & Malaise)

# Study of Other Kinetic Parameters

Studies of **human tumor cell population kinetics** raise both practical and ethical problems

## Practical Issues

**Percent labeled mitoses technique** requires a large number of sequential samples to be taken → **repeated biopsies** is both uncomfortable and inconvenient

## Ethical Issues

*In vivo* experiments require and injection of tritiated thymidine or BrdUrd intraperitoneally → possible **genetic consequences**

Nevertheless, a surprising # of human tumors have been studied in this way

# Cell Cycle Time ( $T_C$ ) and $T_S$ (Human Tumor)

Authors	$T_C$ , h
Frindel et al. (1968)	97, 51.5, 27.5, 48, 49.8
Bennington (1969)	15.5, 14.9
Young and de Vita (1970)	42, 82, 74
Shirakawa et al. (1970)	120, 144
Weinstein and Frost (1970)	217
Terz et al. (1971)	44.5, 31, 14, 25.5, 26
Peckham and Steel (1973)	59
Estevez et al. (1972)	37, 30, 48, 30, 38, 96, 48
Terz and Curutchet (1974) <sup>a</sup>	18, 19, 19.2, 120
Malaise et al. (unpublished data) <sup>a</sup>	24, 33, 48, 42
Muggia et al. (1972)	64
Bresciani et al. (1974)	82, 50, 67, 53, 58

Tubiana & Malaise, 1976

$T_C$

$T_C$  ranged between 15 and 125 h  
 Modal value – **48 hr**

$T_S$

$T_S$  ranged between 9.5 and 24 h  
 Modal value – **16 hr**

Mean duration of  $T_C$  is about **3x** of  $T_S$



# Growth Fraction

## Methods of GF Measurement

1. Continuous labeling (all the actively proliferating cells should be labeled)
2. Estimate GF by assuming that proportions of cells in cell cycle is about 3x the labeling index (see previous  $T_C = 3 \times T_S$ )

## General Conclusion

The GF is more variable in human tumors than in rodent tumors and correlates better with gross volume doubling time

Lymphoma and embryonic tumors – GF = 0.9

Adenocarcinomas – GF = 0.06

# Growth Fraction

Type	T <sub>D</sub> days	LI %	GF %	Φ %	Radiosensitivity (Mean sterilization dose) Gy	Chemo- sensitivity
Embryonal Tumors	27	30	90	94	25-30	++
Lymphomas	29	29	90	94	35-40	++
Mesenchymal Sarcomas	41	4	11	68	85	--
Squamous Carcinomas	58	8	25	90	60-70	+
Adenocarcinomas	83	2	6	71	60-80	+/-

Note that GF is estimated by LI x 3  
 Note also the correlation b/w GF and T<sub>D</sub>

# Cell Loss Factor ( $\Phi$ )

## Estimation of $\Phi$

The cell loss factor is the most difficult to evaluate

It generally has been calculated by comparing the ***observed tumor volume-doubling time*** with the ***potential doubling time***

# $\Phi$ – Tubiana and Malaise

Type	T <sub>D</sub> days	LI %	GF %	$\Phi$ %	Radiosensitivity (Mean sterilization dose) Gy	Chemo- sensitivity
Embryonal Tumors	27	30	90	94	25-30	++
Lymphomas	29	29	90	94	35-40	++
Mesenchymal Sarcomas	41	4	11	68	85	--
Squamous Carcinomas	58	8	25	90	60-70	+
Adenocarcinomas	83	2	6	71	60-80	+/-

In general, the mean cell loss factor **exceeds 50%**

Note the correlation of cell loss factor with GF – in general,  $\Phi$  is high for faster growing tumor and small for slow growing tumor

# $\Phi$ – Steel's Data

Steel has independently estimated the extent of cell loss in human tumors by comparing the potential doubling time with observed tumor growth rate

Authors	Site	Volume Doubling Time, d	Range, d
Breuer	Lung metastases	40	4–745
Collins et al.	Lung metastases	40	11–164
Collins	Lung metastases from colon or rectum	96	34–210
Garland	Primary bronchial carcinomas	105	27–480
Schwartz	Primary bronchial carcinomas	62	17–200
Spratt	Primary skeletal sarcomas	75	21–366

Based on the data from Steel GG, Cell loss from experimental tumors. *Cell Tissue Kinet.* 1968;1:193–207.

The average median doubling time is 66 days

The estimated cell loss factor is **77%**

# Human Tumor Kinetics Summarized

There is a great disparity between the cell cycle time of individual dividing cells and the overall doubling time of the tumor

The mean  $T_C$  is 48 h (range 1-5 days)

The mean tumor doubling time  $T_D$  is ~ 2 months (range 40-100 days)

This discrepancy is largely accounted for by the cell loss factor, i.e.,  $\Phi$  is the most important factor determining the pattern of tumor growth

# Law of Bergonié and Tribondeau

## Law of Bergonié and Tribondeau (1906)

Tissue appear to be more *“radiosensitive”* if their cells are less differentiated, have a greater proliferative capacity and divide more rapidly

# Human Tumor Kinetics and Radiosensitivity

Bergonie and Tribondeau established a relation between the rate of cell proliferation and the response to irradiation in **normal tissues**; it is conceivable that the law might also hold for **tumors**

The histologic groups of human tumors that have the most rapid mean growth rates and the highest GF and cell turnover rates are indeed those that are the most radiosensitive

Type	T <sub>D</sub> days	LI %	GF %	Φ %	Radiosensitivity (Mean sterilization dose) Gy	Chemo- sensitivity
Embryonal Tumors	27	30	90	94	25-30	++
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# Human Tumor Kinetics and Chemosensitivity

Majority of the chemo agents acting on the cycling cells in S phase (nucleic acid analogues), therefore, **cell cycle time** is more relevant than actual tumor doubling time

Tumors with high **labeling index** can potentially be cured with chemotherapy alone

Tumors with a high **cell loss factor** appear to favor response to chemotherapy

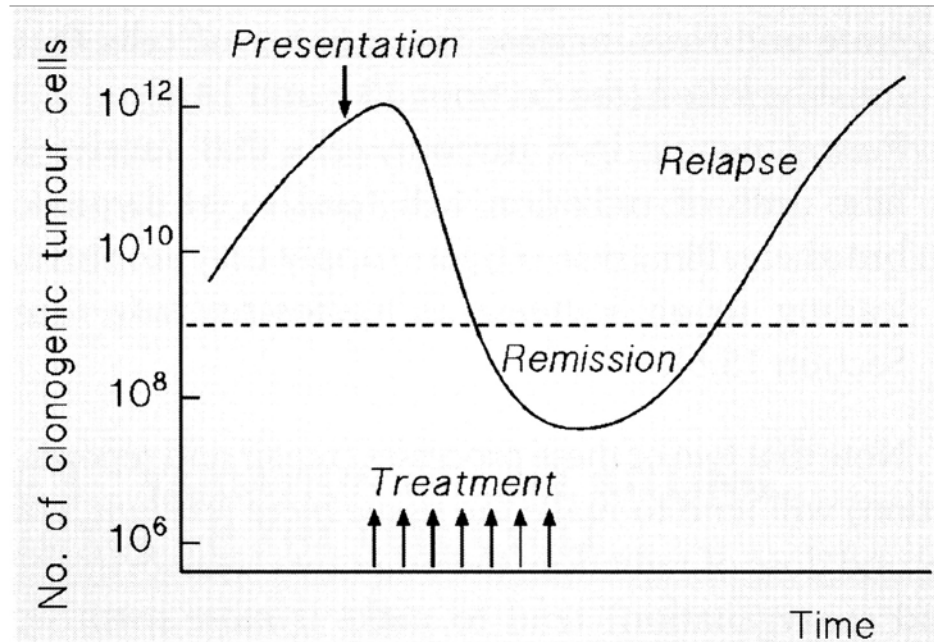
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- **Tumor Control Probability**

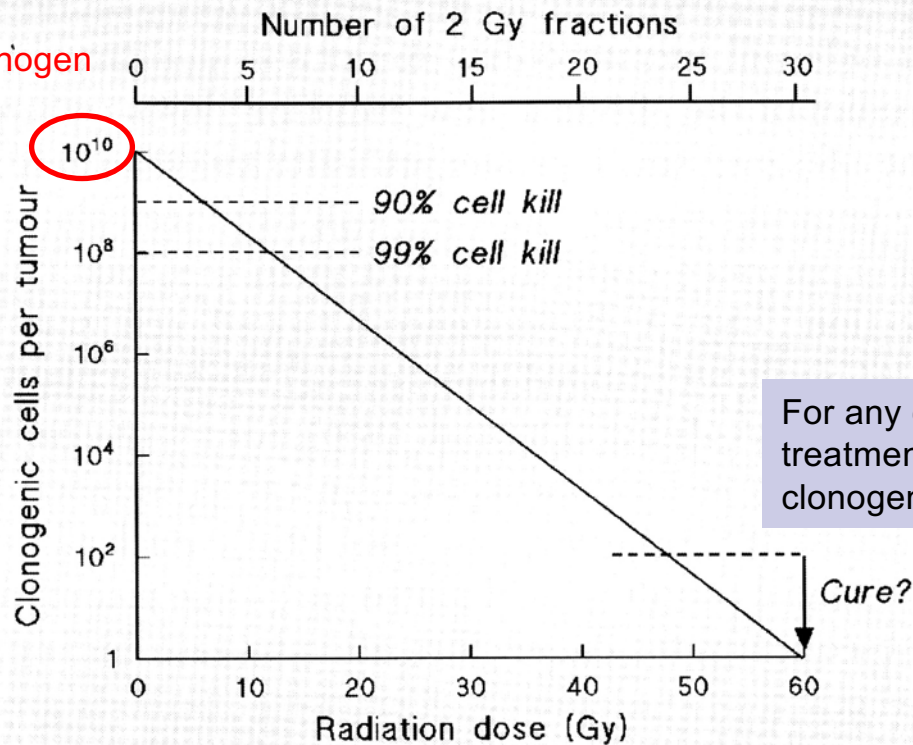
# Time Course of Body Burden of Clonogenic Cells



Limit of detection

# 99% Tumor Kill Means Complete Failure

Initial # of clonogen



For any chance of cure, treatment has to reduce # of clonogen to at least  $< 1$

# Tumor Control Probability (TCP)

TCP is based on **Poisson statistics**

$$P = e^{-n}$$

where P is probability of cure, n is average number of surviving clonogenic tumor cells

TCD37 would leave about 1 cell/tumor  
TCD90 would leave about 0.1 cells/tumor  
TCD95 would leave about 0.05 cells/tumor  
TCD99 would leave about 0.01 cells/tumor

For calculation, you may wish to review the examples given in Chapter 3



# Review Questions

# Problem 1

The diameter of a tumor was found to double in 18 days. Assuming that all of the cells in the tumor are proliferating and no cells are lost, the tumor cell doubling time is closest to:

A. 1 day

B. 3 days

C. 6 days

D. 12 days

E. 18 days

Volume (# of cells) increase 8-fold  $\rightarrow$  = 3 doublings ( $2^3$ ).  $18/3 = 6$  days



# Problem 2

Which of the following statements is TRUE concerning the cell cycle kinetics of human tumors?

- A. The growth fraction of a tumor represents the proportion of cells capable for transplanting the tumor
- B. Cell loss is often the major factor that determines the tumor volume doubling time
- C. The growth rate generally increases with increasing tumor size
- D. Volume doubling times are shorter than the value that would be predicted from the cell cycle time of individual cells **longer**
- E. The volume doubling time is largely determined by the cell cycle time

# Human Tumor Kinetics Summarized

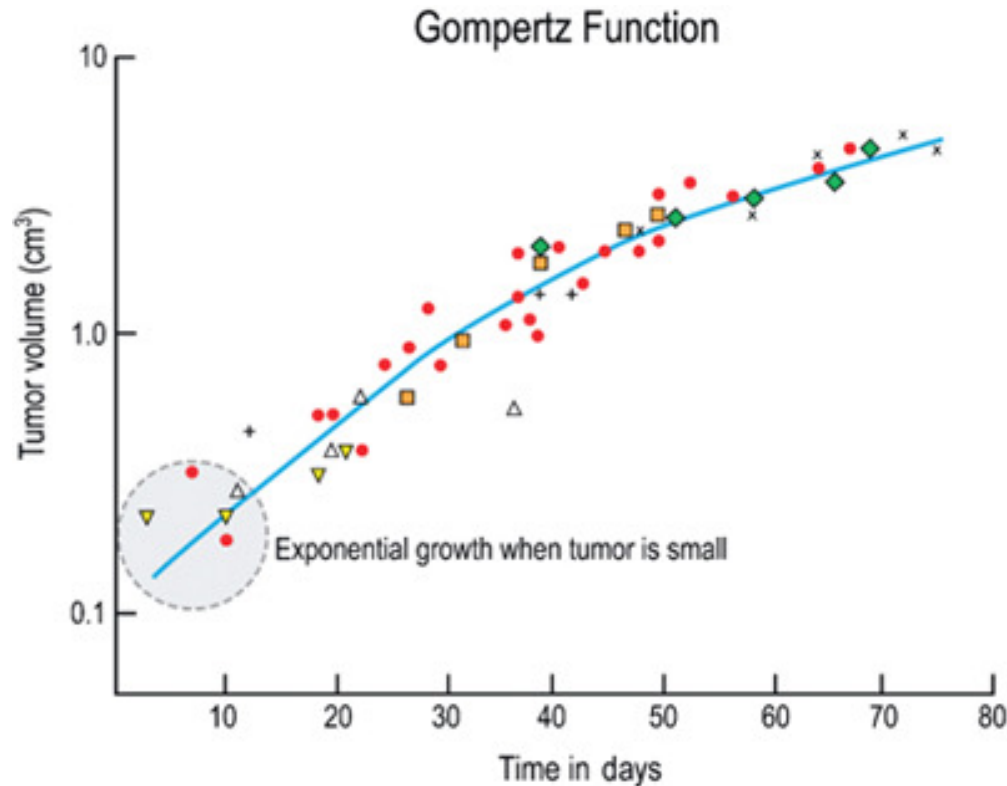
There is a great disparity between the cell cycle time of individual dividing cells and the overall doubling time of the tumor

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The mean tumor doubling time  $T_D$  is ~ 2 months (range 40-100 days)

This discrepancy is largely accounted for by the cell loss factor, i.e.,  $\Phi$  is the most important factor determining the pattern of tumor growth

# Typical Growth Curve – Gompertz Function



- When tumor is composed of only a few cells, it may grow exponentially
- When it gets larger, the growth rate slows as the supply of oxygen and nutrients are outgrown

# Problem 3

A tumor is characterized by a cell cycle time of 10 days, a growth fractions of 0.5 and a cell loss factor of 1.0. Assuming these kinetic parameters remain constant over a one-month period, how much would the tumor volume have increased during that time?

- A. 2-fold
- B. 3-fold
- C. 4-fold
- D. 5-fold
- E. Remain the same

Cell loss factor of 1.0 means every for every new cell produced, there is a cell dying off.

$$\text{Cell loss factor } (\Phi) = 1 - T_{\text{pot}}/T_{\text{d}}$$

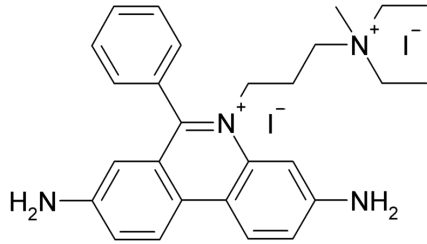
# Problem 4

Which of the following flow cytometry methods or the combination of methods are used to estimate cell cycle distribution in mammalian cells?

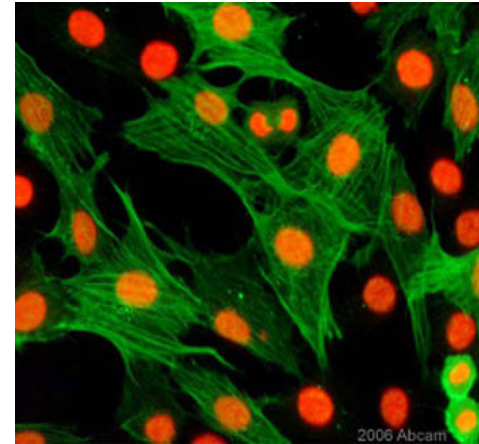
- A. Analysis of annexin V stained cells     **apoptosis**
- B. Analysis of cells treated with a high dose (2mM or more) thymidine
- C. Analysis of propidium iodide-stained cells
- D. Analysis of cells labeled with an H3 antibody
- E. Analysis of cells pulsed-labeled with  $^3\text{H}$ -thymidine  
**Only for cells in S-phase**

# Flow Cytometry

Medical Residents Only



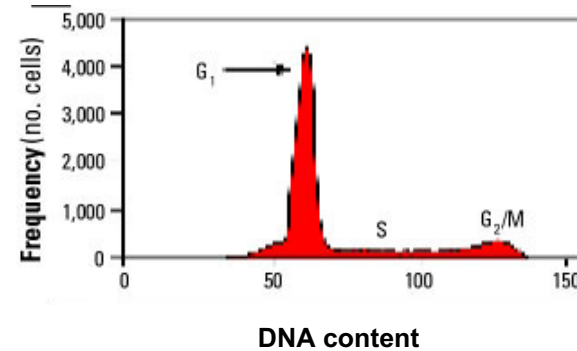
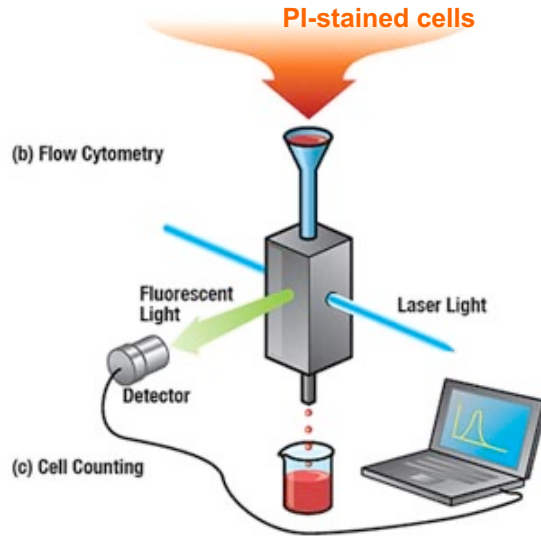
Propidium iodide (PI)



Propidium iodide is an **intercalating agent** and a **fluorescent molecule**

It binds to DNA by intercalating between the bases with ***little sequence preference***  
→ amount of fluorescence is proportional to the **DNA content**

# Flow Cytometry



Suspensions of fluorescent-stained single cells flow **one at a time** through a light beam, with its wavelength adjusted to excite the fluorescent dye

Thousands of cells can be measured each second and the results accumulated to form a DNA distribution

# Problem 5

Two patients are diagnosed on the same day with tumors of approximately the same size. However, the  $T_{\text{pot}}$  for patient A's tumor was determined to be **5 days** while the  $T_{\text{pot}}$  for patient B's tumor was calculated as **20 days**. Assuming that there was **no cell loss taking place** and the tumor's growth fractions did not change, if treatment was **delayed for 20 days**, the ratio of the number of the tumors of patient A to patient B would have been approximately:

- A. 16:1
- B. 8:1
- C. 1:1
- D. 1:8
- E. 1:16

$$2^{4/2} = 8$$