

Using Linear Cancer Networks to Model Hormone Therapy for Breast Cancer

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What is Breast Cancer?

Using Linear
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Conclusions

- Breast cancer is the most common form of cancer found in women.

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- Breast cancer is the most common form of cancer found in women.
- Starting in the epithelial cells of the breast, the cancer spreads to the surrounding tissue, ultimately killing the host.

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Conclusions

- Breast cancer is the most common form of cancer found in women.
- Starting in the epithelial cells of the breast, the cancer spreads to the surrounding tissue, ultimately killing the host.
- There are four types of breast cancer mentioned in the paper by McDuffie:
 - Endocrine receptor positive for estrogen (ER+)
 - Endocrine receptor positive for progesterone (PR+)
 - HER2 positive (HER2+)
 - Negative for each of the three.

How can we treat Breast Cancer?

- There are several common ways to treat breast cancer:
 - Radiation therapy
 - Hormone therapy
 - Targeted therapy
 - Chemotherapy
 - Surgery

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- There are several common ways to treat breast cancer:
 - Radiation therapy
 - Hormone therapy
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- We will be focusing on the treatment of breast cancer via hormone therapy.

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- There are several common ways to treat breast cancer:
 - Radiation therapy
 - Hormone therapy
 - Targeted therapy
 - Chemotherapy
 - Surgery
- We will be focusing on the treatment of breast cancer via hormone therapy.
- Hormone therapy only works for those forms of cancer that are hormone receptor positive.

How does Hormone Therapy Work?

- Hormonal drugs are taken by the patient in hopes of preventing and controlling the growth of cancer.

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- This is typically done after surgery to prevent the recurrence of the cancer.

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- This is typically done after surgery to prevent the recurrence of the cancer.
- A common drug used for hormone treatment for ER+ breast cancer is Tamoxifen.
 - Prevents the recurrence of cancer.
 - Slows the spread of cancer.
 - Prevents cancer in women who are at high risk.

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- A common drug used for hormone treatment for ER+ breast cancer is Tamoxifen.
 - Prevents the recurrence of cancer.
 - Slows the spread of cancer.
 - Prevents cancer in women who are at high risk.
- Tamoxifen binds to estrogen receptors on cells, which prevents the receptor from binding to estrogen in breast epithelial tissue. Without bound estrogen, the cells grow and divide much slower.

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Conclusions

- Eric Werner proposed a framework based on the idea that cancer is caused by mutations in the developmental control networks.

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- This causes the cancerous cells to divide into tumor cells based on instructions within their network.

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- This causes the cancerous cells to divide into tumor cells based on instructions within their network.
- We can consider this network linear, i.e. the cancer cell can either divide into itself or a tumor cell.

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- This causes the cancerous cells to divide into tumor cells based on instructions within their network.
- We can consider this network linear, i.e. the cancer cell can either divide into itself or a tumor cell.
- The tumor cells will not divide into more cells, they are considered terminal.

Initial Model

- First we will construct a model for an observable baseline for the cancer without treatment based on the idea of the linear network.

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- First we will construct a model for an observable baseline for the cancer without treatment based on the idea of the linear network.
- We need to model each type of cell within the system in the form of a Lotka-Volterra model.
 - \dot{x} = Cancerous stem cells,
 - \dot{y} = Cancerous tumor cells, and
 - \dot{z} = Healthy cells

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- We need to model each type of cell within the system in the form of a Lotka-Volterra model.
 - \dot{x} = Cancerous stem cells,
 - \dot{y} = Cancerous tumor cells, and
 - \dot{z} = Healthy cells
- From here we need to determine the best approach to model the interactions and growth of the populations in the system.

A Linear Cancer Network

- This leads us to the following system:

$$\dot{x} = kx \left(1 - \frac{x}{x_c}\right)$$

$$\dot{y} = kx \left(\frac{x}{x_c}\right) \left(1 - \frac{y}{y_c}\right) - ny$$

$$\dot{z} = qz \left(1 - \frac{z}{z_c}\right)$$

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- Where x , y , and z have population capacities x_c , y_c , and z_c .

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- Where x, y , and z have population capacities x_c, y_c , and z_c .
- Where k and q represent the growth rates of cancer cells and healthy cells respectively, and n represents the death rate of tumor cells.

Untreated System Equilibria

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Conclusions

- To look for equilibria we set the system equal to $(0, 0, 0)$:

$$0 = kx \left(1 - \frac{x}{x_c} \right)$$

$$0 = kx \left(\frac{x}{x_c} \right) \left(1 - \frac{y}{y_c} \right) - ny$$

$$0 = qz \left(1 - \frac{z}{z_c} \right).$$

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- This leaves us with four equilibria in total.

Untreated System Equilibria

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$$0 = kx \left(1 - \frac{x}{x_c}\right)$$

$$0 = kx \left(\frac{x}{x_c}\right) \left(1 - \frac{y}{y_c}\right) - ny$$

$$0 = qz \left(1 - \frac{z}{z_c}\right).$$

- This leaves us with four equilibria in total.
- The only stable equilibrium being the coexistence of the 3 types of cells, the others acting as saddles to send the system to coexistence:

$$\left(x_c, \frac{kx_c y_c}{kx_c + y_c n}, z_c\right).$$

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- Introducing the hormone treatment, defining w to represent the current level of estrogen in the system, and w_0 as the level necessary for normal growth:

$$\dot{x} = \left(\frac{kw}{w_0}\right)x\left(1 - \frac{x}{x_c}\right) - d_1\left(1 - \frac{w}{w_0}\right)x$$

$$\dot{y} = \left(\frac{kw}{w_0}\right)x\left(\frac{x}{x_c}\right)\left(1 - \frac{y}{y_c}\right) - ny - d_2\left(1 - \frac{w}{w_0}\right)y$$

$$\dot{z} = \left(\frac{qw}{w_0}\right)z\left(1 - \frac{z}{z_c}\right) - d_3\left(1 - \frac{w}{w_0}\right)z$$

$$\dot{w} = rw\left(1 - \frac{w}{w_0}\right) - sDw.$$

- Notice that this creates a number of new interactions in the original system.

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$$\dot{w} = rw\left(1 - \frac{w}{w_0}\right) - sDw$$

- Here r represents the growth rate of the receptor binding estrogen, s represents the effectiveness of the drug, and D represents the dosage.

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$$\dot{w} = rw\left(1 - \frac{w}{w_0}\right) - sDw$$

- Here r represents the growth rate of the receptor binding estrogen, s represents the effectiveness of the drug, and D represents the dosage.
- Each population receives a new death rate term (d_1, d_2, d_3) based on the proportion of estrogen in the system:

$$\text{ex: } -d_1\left(1 - \frac{w}{w_0}\right)x$$

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- Each population receives a new death rate term (d_1, d_2, d_3) based on the proportion of estrogen in the system:

$$\text{ex: } -d_1\left(1 - \frac{w}{w_0}\right)x$$

- The growth rate of the cells is also directly affected by the proportion of estrogen necessary for normal cell growth.

Dimensionless Model

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Conclusions

- To make our lives easier, we can simplify the previous system into the dimensionless model shown below:

$$\dot{x} = wx(1-x) - \delta_1(1-w)x$$

$$\dot{y} = \mu wx^2(1-y) - \eta y - \delta_2(1-w)y$$

$$\dot{z} = \gamma wz(1-z) - \delta_3(1-w)z$$

$$\dot{w} = \rho(1-w)w - \sigma w$$

Dimensionless Parameters

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$$x = \frac{x}{x_c},$$

$$y = \frac{y}{y_c},$$

$$z = \frac{z}{z_c},$$

$$w = \frac{w}{w_0},$$

$$\mu = \frac{x_c}{y_c},$$

$$\delta_i = \frac{d_i}{k}, i = 1, 2, 3,$$

$$\eta = \frac{n}{k},$$

$$\gamma = \frac{q}{k},$$

$$\rho = \frac{r}{k},$$

$$\sigma = \frac{sD}{k}.$$

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Conclusions

- Similar to before, we can find the equilibria of the system by setting the system equal to $(0, 0, 0, 0)$:

$$0 = wx(1 - x) - \delta_1(1 - w)x$$

$$0 = \mu wx^2(1 - y) - \eta y - \delta_2(1 - w)y$$

$$0 = \gamma wz(1 - z) - \delta_3(1 - w)z$$

$$0 = \rho(1 - w)w - \sigma w$$

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Conclusions

- There are five equilibria for this system.

$$P_1: (0, 0, 0, 0)$$

$$P_2: (0, 0, 0, \bar{w})$$

$$P_3: (\bar{x}, \bar{y}, 0, \bar{w})$$

$$P_4: (0, 0, \bar{z}, \bar{w})$$

$$P_5: (\bar{x}, \bar{y}, \bar{z}, \bar{w})$$

$$\bar{x} = \frac{\rho - \sigma - \delta_1 \sigma}{\rho - \sigma} \quad \bar{y} = \frac{\mu(\rho - \sigma - \delta_1 \sigma)^2}{\mu(\rho - \sigma - \delta_1 \sigma)^2 + (\rho - \sigma)(\eta\rho + \delta_2 \sigma)}$$

$$\bar{z} = \frac{\gamma\rho - \gamma\sigma - \delta_3 \sigma}{\gamma(\rho - \sigma)} \quad \bar{w} = \frac{\rho - \sigma}{\rho}$$

- We are only interested in the "cure state" equilibrium, (P_4), where the healthy cells and the level of estrogen coexists.

Dimensionless Model Parameters

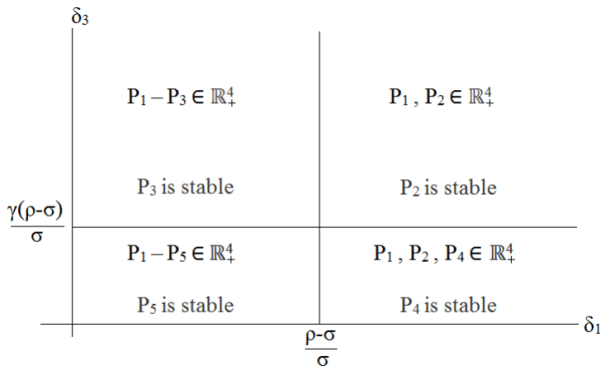
- We decided to focus our stability analysis on σ as it would be the easiest parameter to control in a real situation.
- The following values for the system parameters sets all equations in terms of σ .

Parameter	Values
ρ	0.40
γ	0.75
δ_1	0.55
δ_2	0.65
δ_3	0.20
μ	0.50
η	0.25

Stability of Equilibria

- For the “cure state” to be stable, we require

$$\delta_3 < \frac{\gamma(\rho - \sigma)}{\sigma}; \quad \delta_1 > \frac{\rho - \sigma}{\sigma}.$$



Stability of the Cure State

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- With McDuffie's parameter substitutions, the Jacobian evaluated at the cure state has eigenvalues:

$$\lambda_1 = -0.4 + \sigma,$$

$$\lambda_2 = 1 - 3.875\sigma,$$

$$\lambda_3 = -0.25 - 1.625\sigma,$$

$$\lambda_4 = -0.75 + 2.375\sigma.$$

Stability and σ

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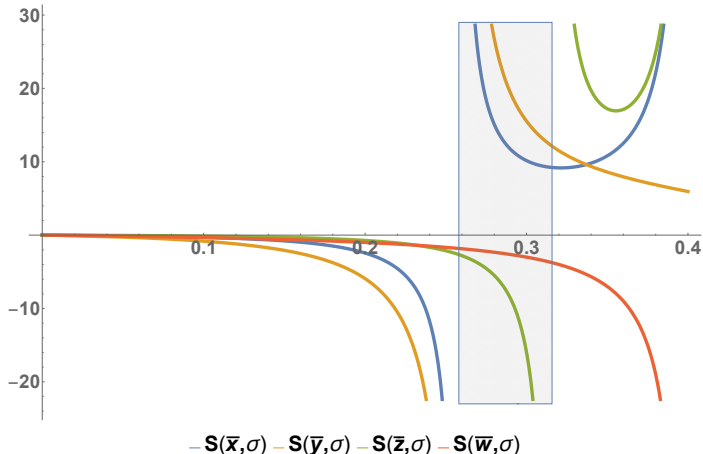
- We conclude that for the cure state to be stable,

$$\sigma \in \left(\frac{0.4}{1.55}, \frac{0.4}{1 + \frac{0.2}{0.75}} \right) \approx [0.26, 0.31].$$

- This satisfies the equations from the previous slide, and ensures all eigenvalues are strictly negative.

Sensitivity to σ

In order to find an optimal value of σ , the dimensionless treatment parameter, we first found the sensitivity of each of the equilibria to σ .



Optimal Value of σ

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What makes σ optimal?

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What makes σ optimal?

- Cure state needs to be asymptotically stable.

Optimal Value of σ

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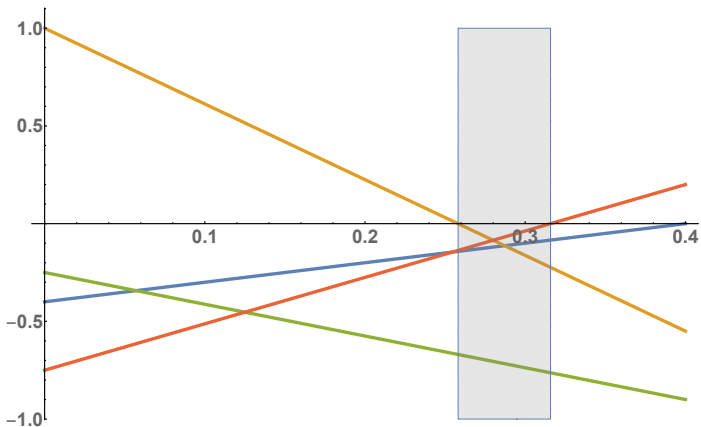
What makes σ optimal?

- Cure state needs to be asymptotically stable.
- Have the maximum amount of healthy cells remaining.

Optimal Value of σ

What makes σ optimal?

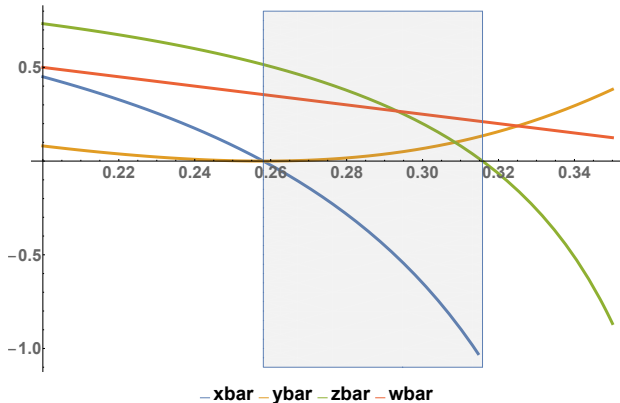
- **Cure state needs to be asymptotically stable.**
- Have the maximum amount of healthy cells remaining.



Optimal Value of σ

What makes σ optimal?

- Cure state needs to be asymptotically stable.
- **Have the maximum amount of healthy cells remaining.**



Optimal Dosage Applications

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$$\sigma = 0.26 = \frac{sD}{k} \implies D = 0.26 \frac{k}{s}$$

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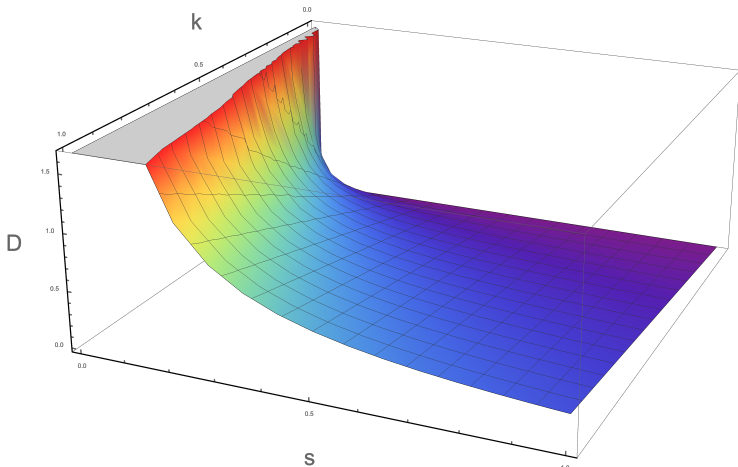
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$$\sigma = 0.26 = \frac{sD}{k} \implies D = 0.26 \frac{k}{s}$$

k	s	Optimal Dosage
0.65	0.15	1.13
0.65	0.45	0.38
0.65	0.60	0.28

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Conclusions

Recap

- Several parameter values affect whether hormone treatment is effective.

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- Several parameter values affect whether hormone treatment is effective.
- Conditions exist which make the cancer-free “cure state” asymptotically stable, and these can be expressed in terms of σ , the dimensionless treatment parameter.

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- Several parameter values affect whether hormone treatment is effective.
- Conditions exist which make the cancer-free “cure state” asymptotically stable, and these can be expressed in terms of σ , the dimensionless treatment parameter.
- The parameter σ can be expressed in terms of drug dosage, but more information about dimensional analysis is needed for effective treatment decisions.

Strengths and Weaknesses of the Model

- Strengths:

- This is a great introductory model that gives great insight to the effectiveness of a hormone treatment option for breast cancer.
- The model takes into account multiple factors for cell biology, and theoretically is a strong system.

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- Strengths:
 - This is a great introductory model that gives great insight to the effectiveness of a hormone treatment option for breast cancer.
 - The model takes into account multiple factors for cell biology, and theoretically is a strong system.
- Weaknesses:
 - There are a lot of parameters to consider for this model which make it theoretically strong, but difficult to work with when finding values for the parameters.
 - The model does not account for the side effects of the treatment, as the use of the hormone treatment also increases the risk of getting other forms of cancer.

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Questions?