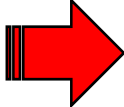
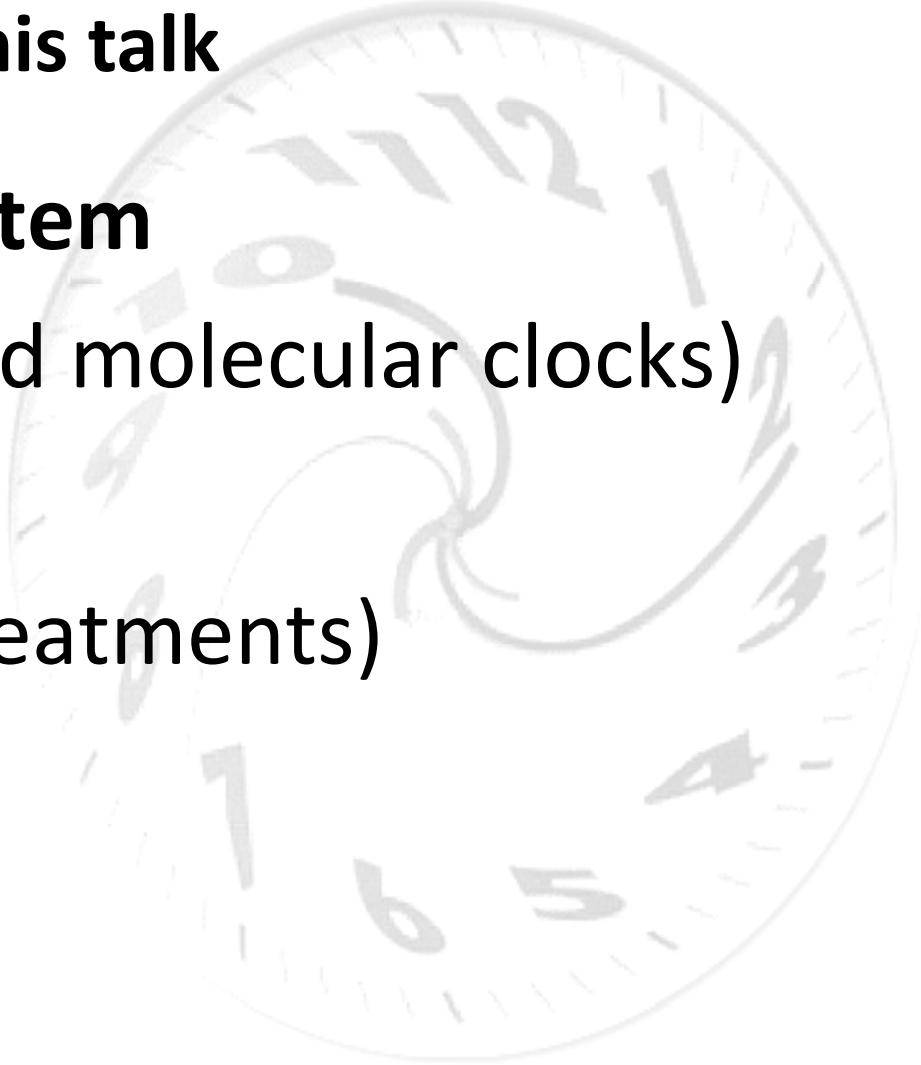


Circadian disruption or induction in cancer therapy

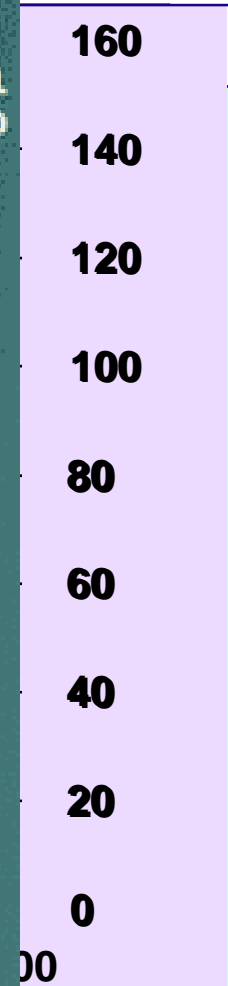
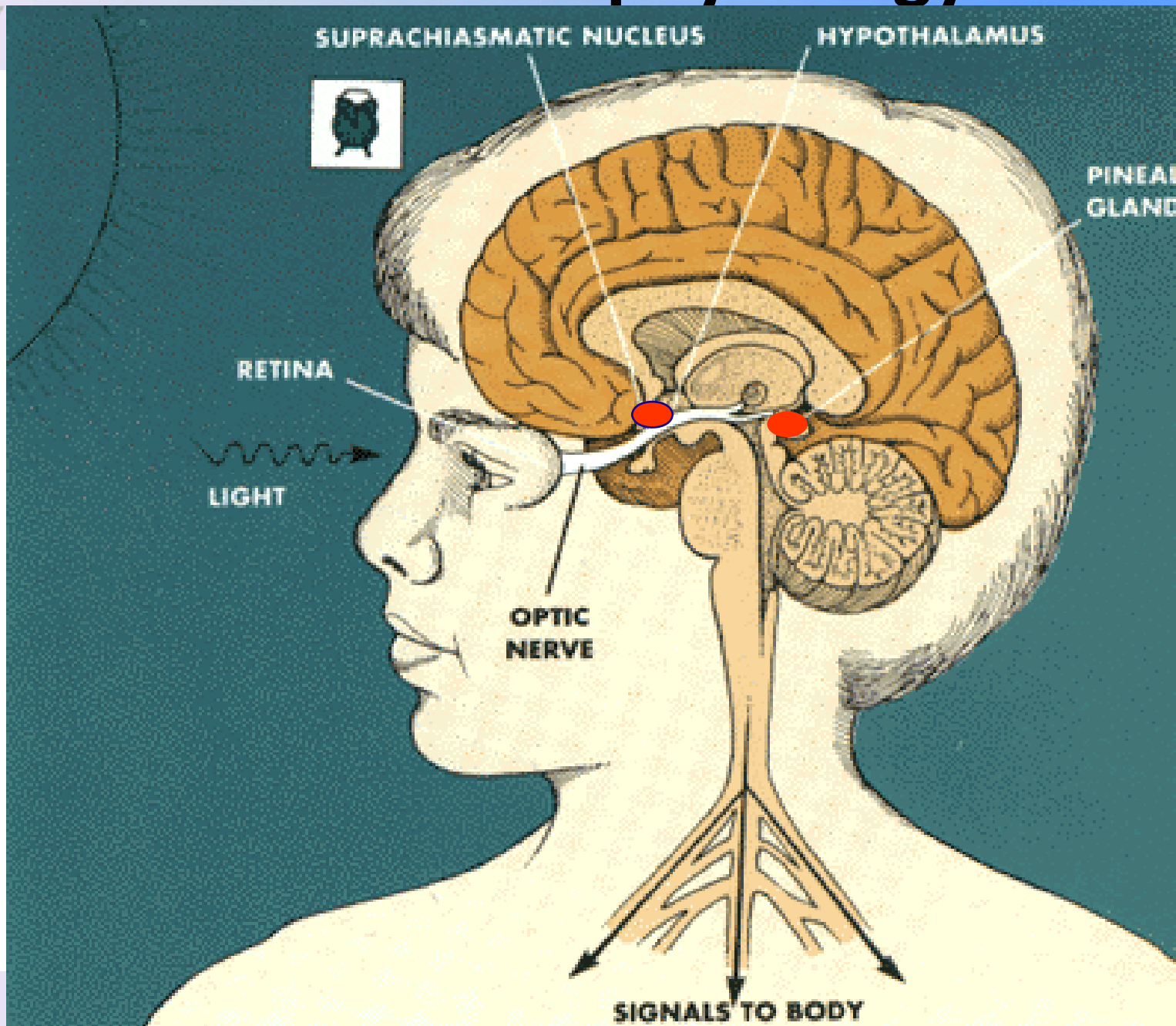
Francis Lévi



Outline of this talk

- 
- A red arrow pointing to the right, highlighting the first main topic.
- The circadian timing system**
(circadian biomarkers and molecular clocks)
 - **Circadian disruption**
(cancer processes and treatments)
 - **Circadian induction**
(host and cancer clocks)
 - **Conclusions**
- 
- A large, faint, light-colored clock face is visible in the background on the right side of the slide. The numbers 1 through 12 are visible, and the hands are positioned around the 10:10 mark.

Circadian physiology



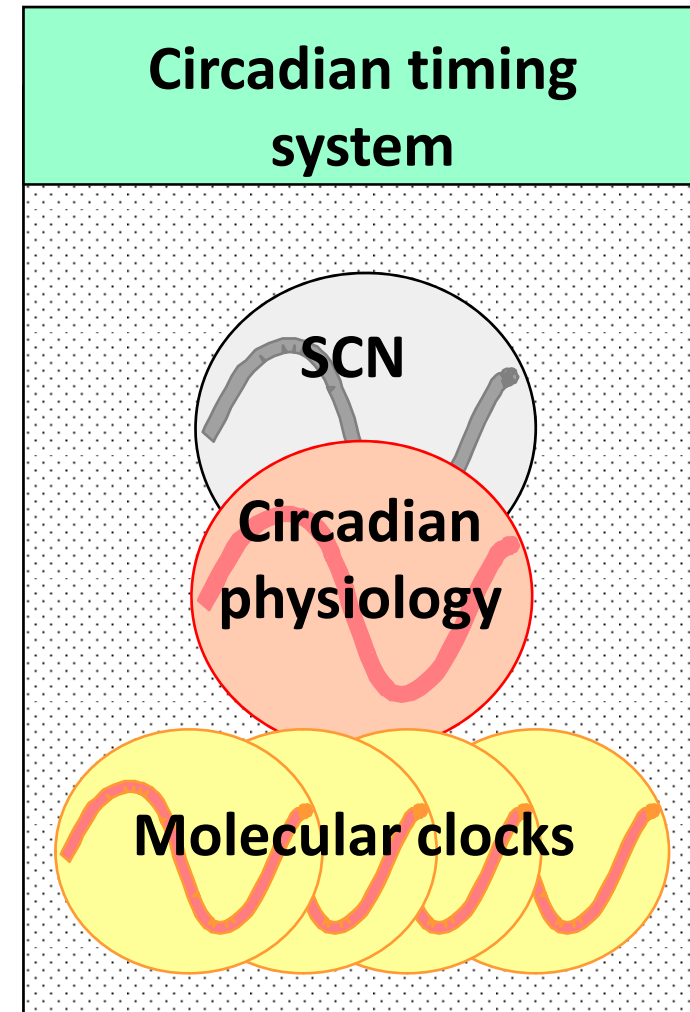
Circadian timing system in health and diseases

- **Rhythms in behavioral, cognitive, sensory, muscular, cardiovascular, respiratory, immune, renal, hepatic, GI, hormonal,... functions**
- **Circadian/circannual disease patterns**
- **Treatment timing for cancer, CNS, cardiovascular, respiratory, rheumatologic, psychiatric,...diseases**

→Relevance for all medical specialties

The Circadian Timing System

The temporal coordination of metabolism and proliferation along the 24 hours represent a major task of the mammalian circadian system, that is achieved through its organization in a hierarchical manner.



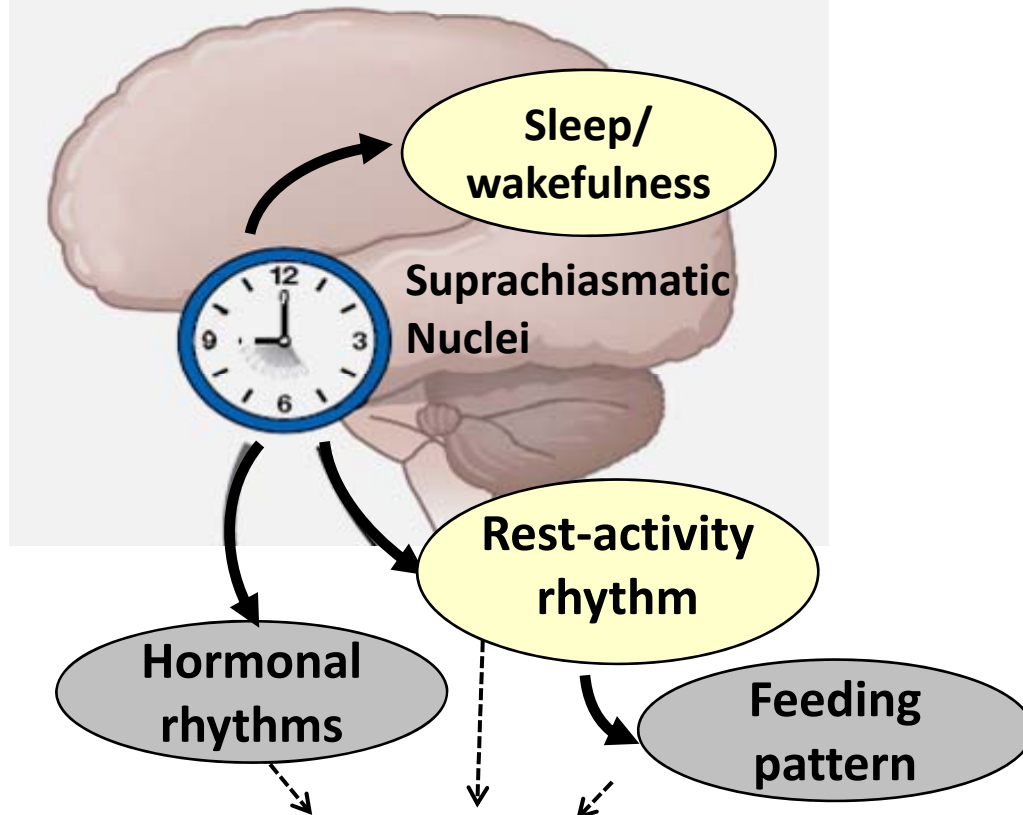


The Circadian Timing System, a coordinator of life processes

Circadian Timing system

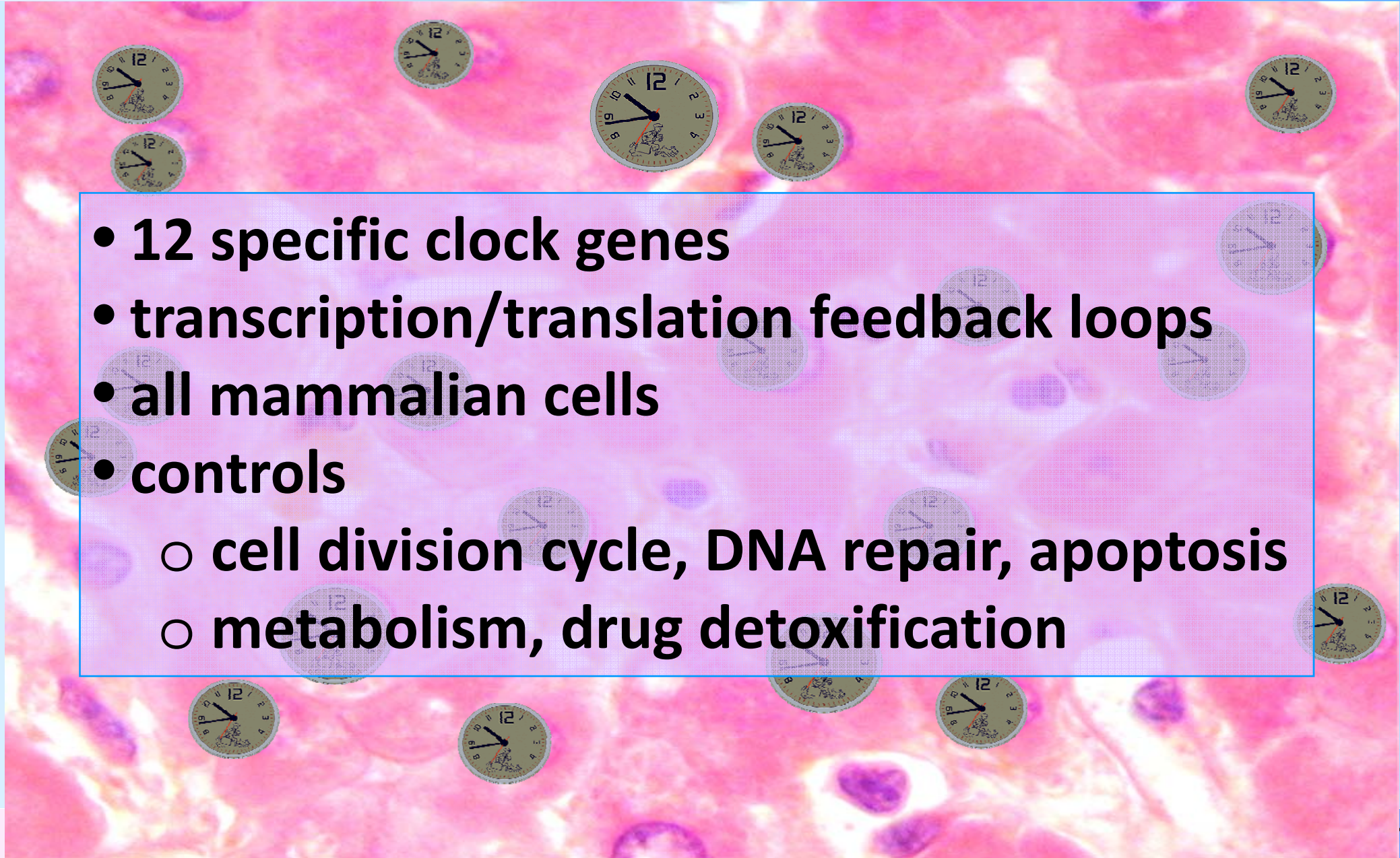
Environment

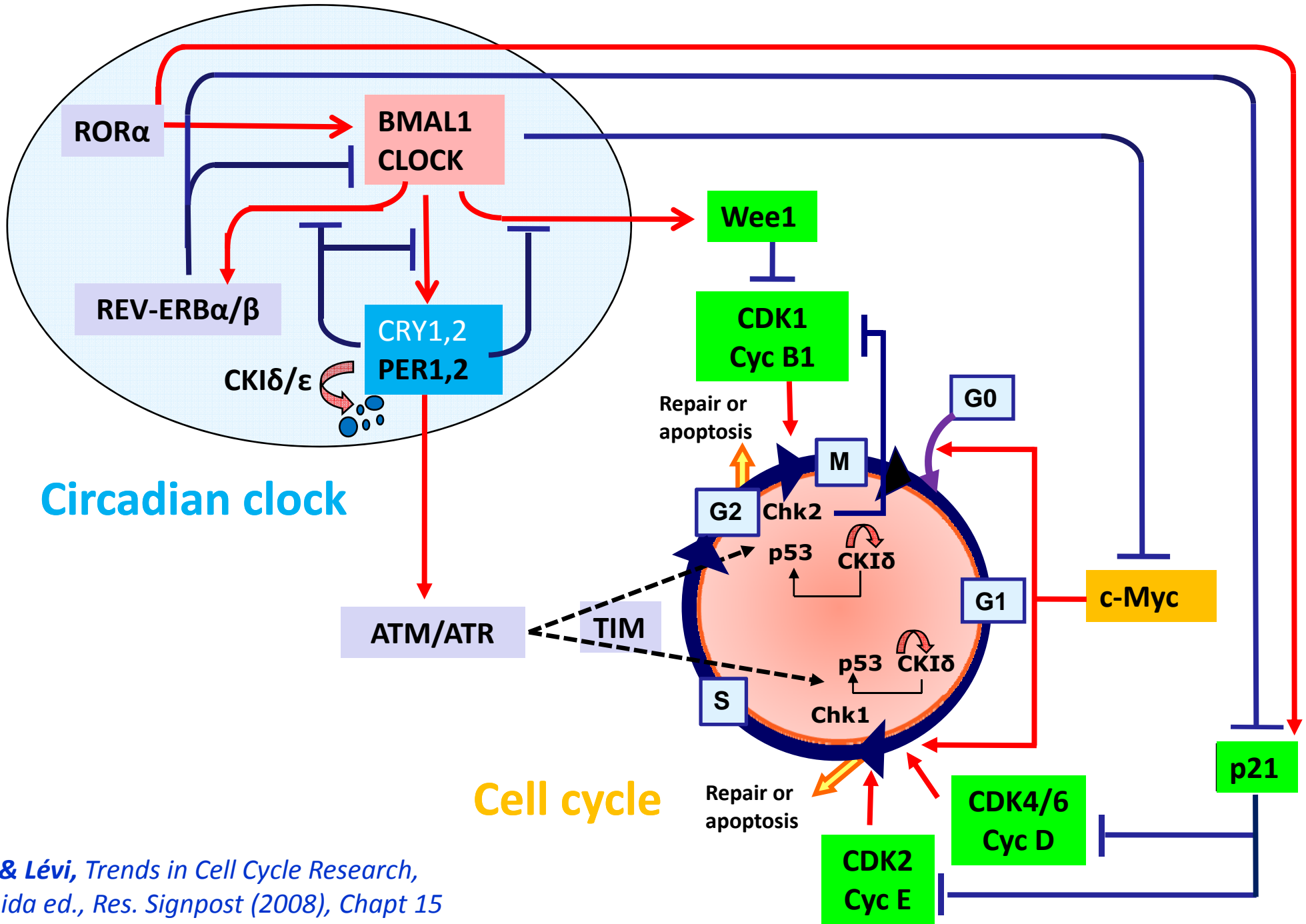
Day/night
Social
Familial
Meals

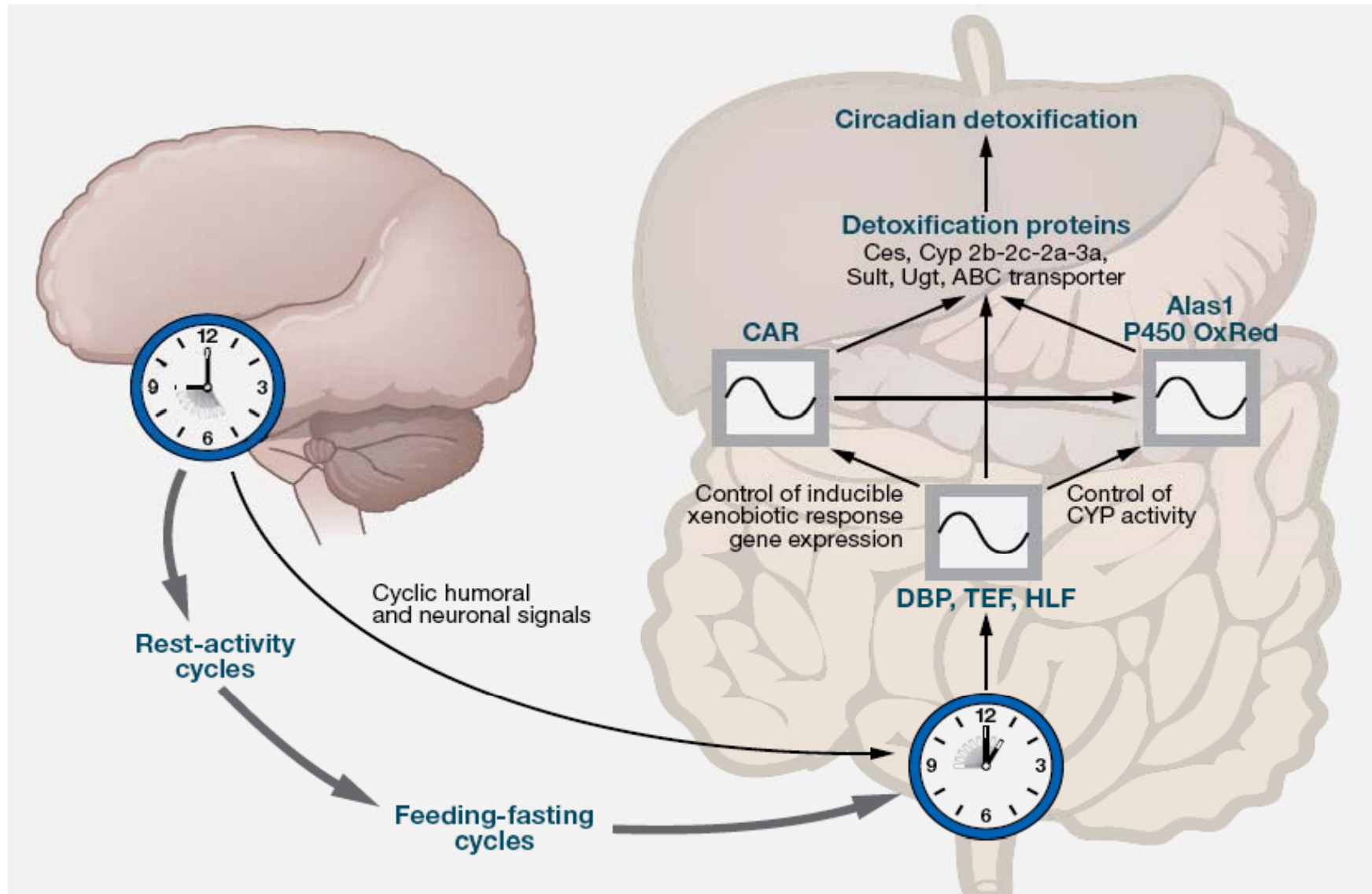


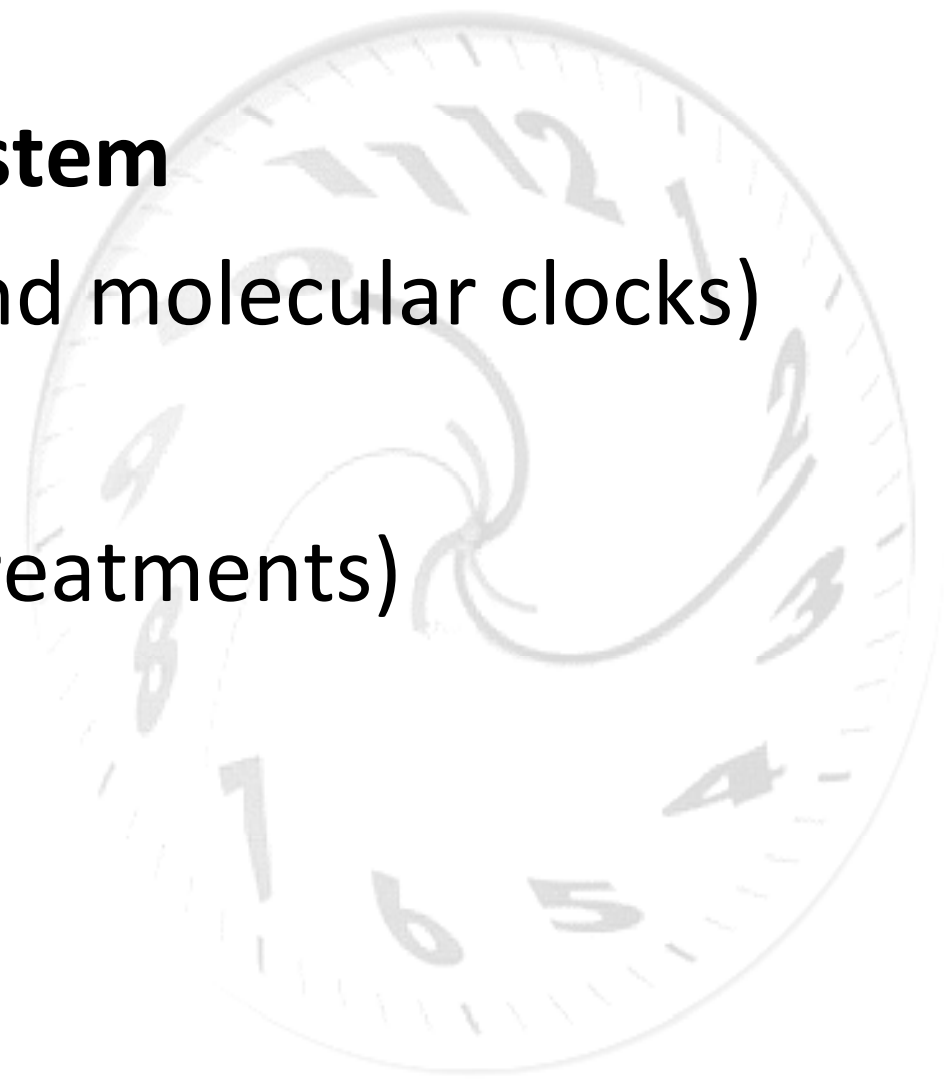
Circadian clocks in peripheral organs



- 
- The background of the slide is a microscopic image of cells, likely from a mammalian tissue, showing various cell types and structures. Overlaid on this image are several small, semi-transparent clock icons, each showing a different time of day, scattered across the field of view.
- **12 specific clock genes**
 - **transcription/translation feedback loops**
 - **all mammalian cells**
 - **controls**
 - **cell division cycle, DNA repair, apoptosis**
 - **metabolism, drug detoxification**





- **The circadian timing system**
(circadian biomarkers and molecular clocks)
 - ➔ **Circadian disruption**
(cancer processes and treatments)
 - **Circadian induction**
(cancer and host clocks)
 - **Conclusions**
- 
- A large, faint, light-colored clock face is visible in the background of the slide, centered behind the text. The clock has numbers 1 through 12 and a winding hand.

Circadian disruption in mice

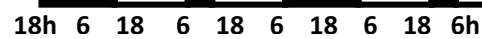
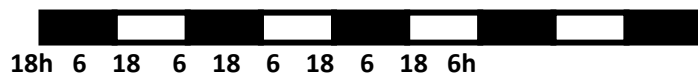
Model



Intact SCN



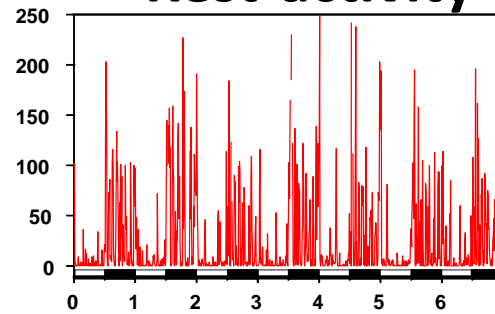
Ablated SCN



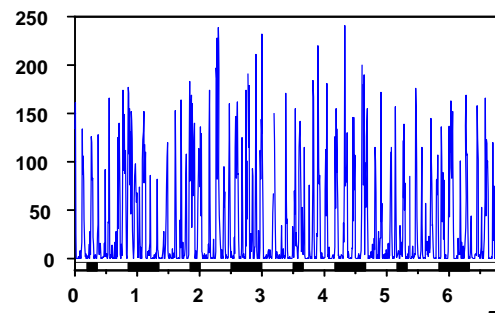
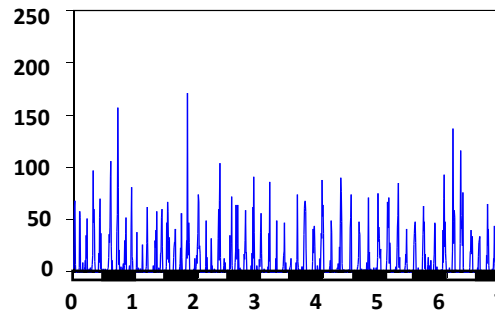
Chronic jet lag

Biomarkers

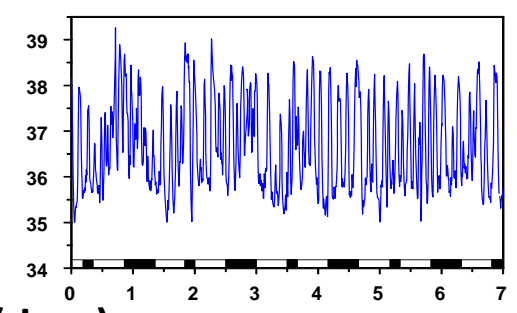
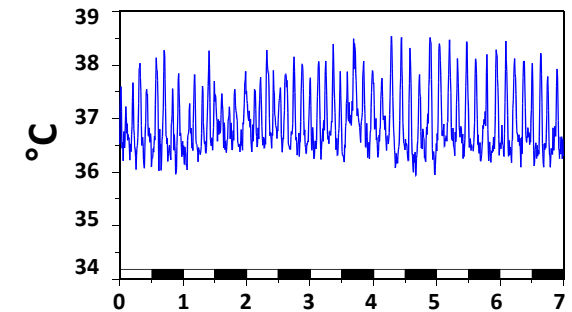
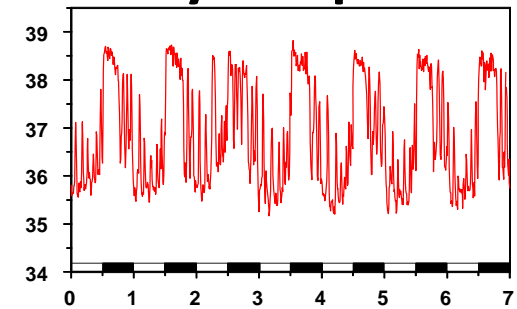
Rest-activity



Arbitrary units



Body temperature

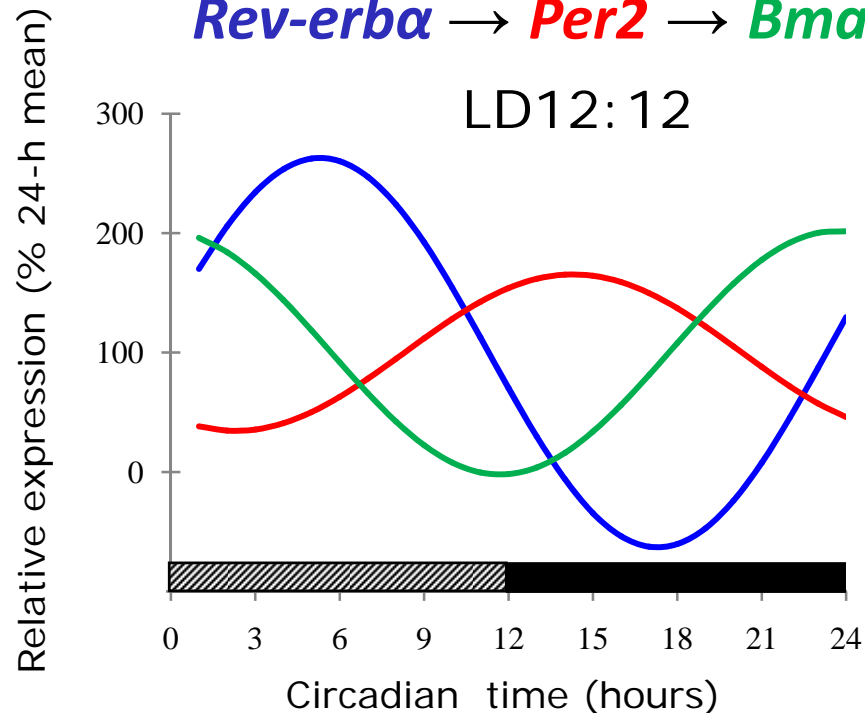


Time (days)

Circadian disruption in mice

24-h cosine model of liver molecular clock

Rev-erba → *Per2* → *Bmal1*

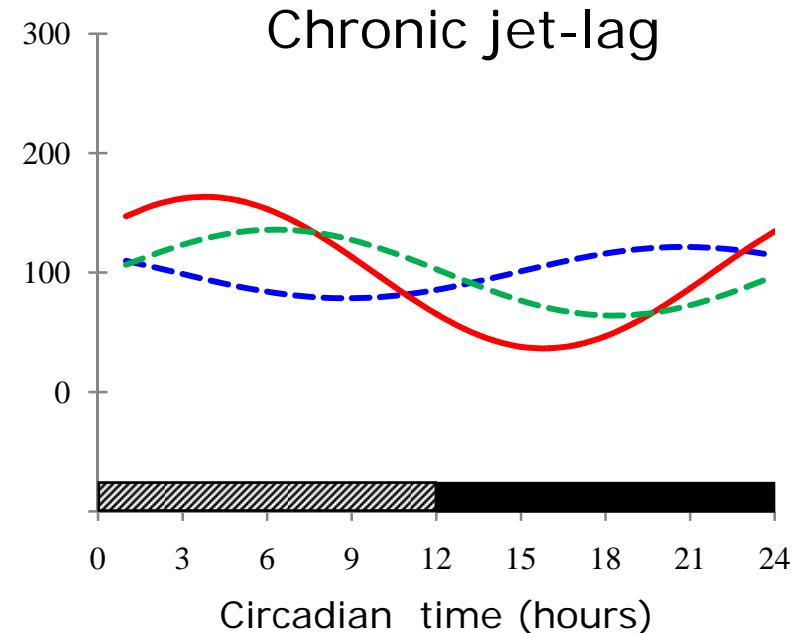


Acrophase

Rev-erba 5²⁰

Per2 14²⁰

Bmal1 23⁴⁰



Acrophase

Rev-erba ns

Per2 3⁵⁰

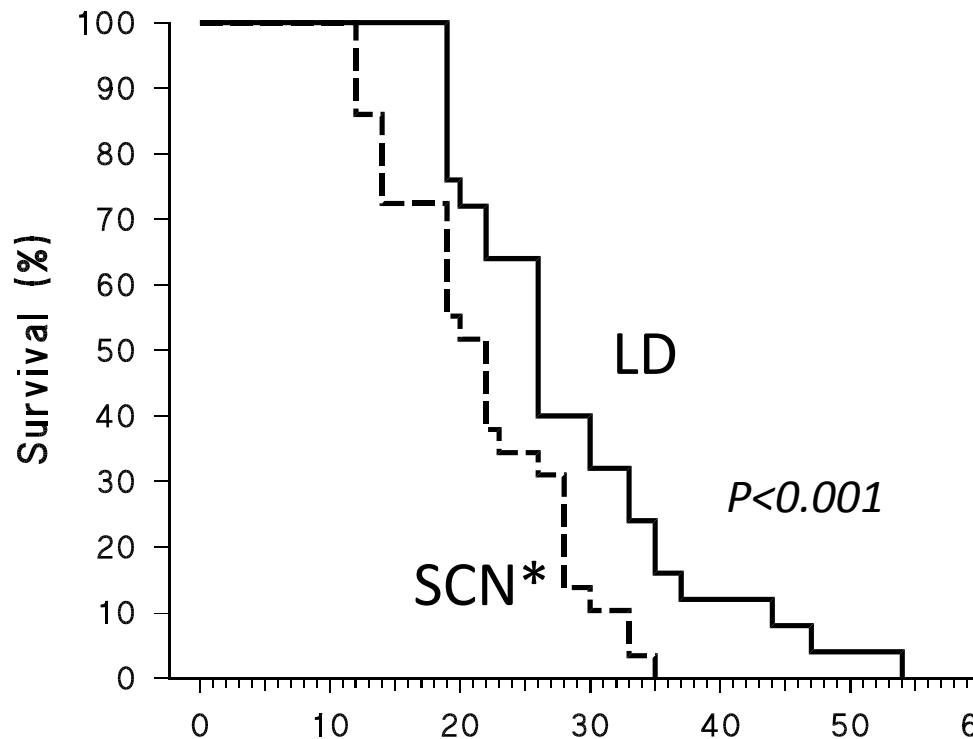
Bmal1 ns



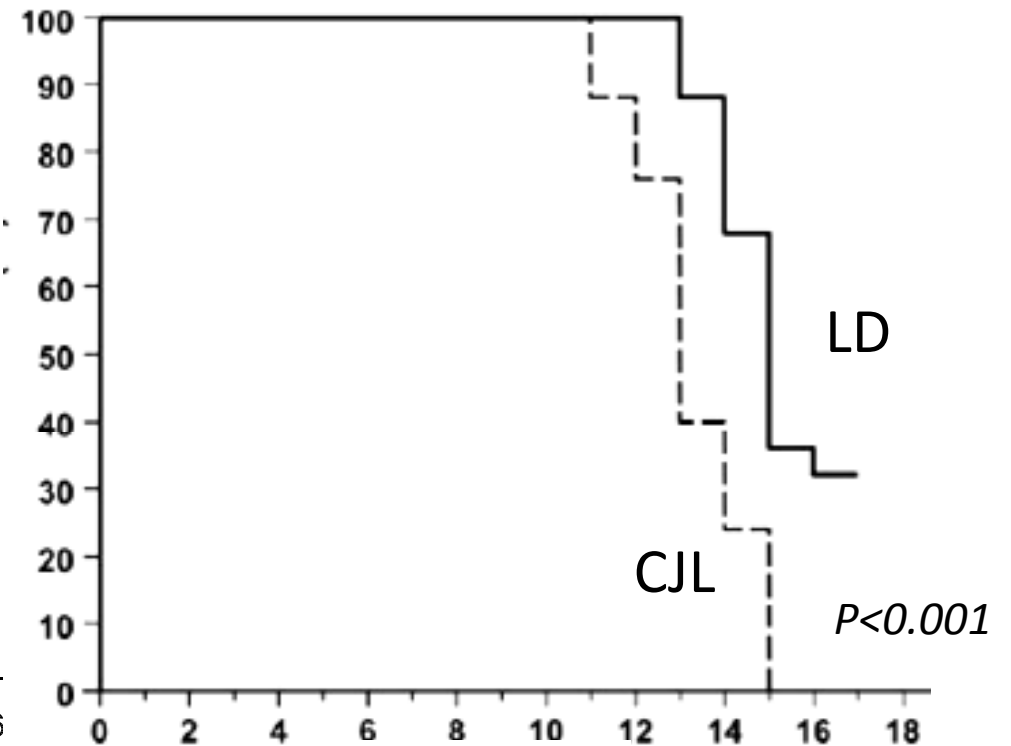
Circadian disruption on cancer progression in mice

Survival

SCN ablation vs sham



CJL vs LD12:12



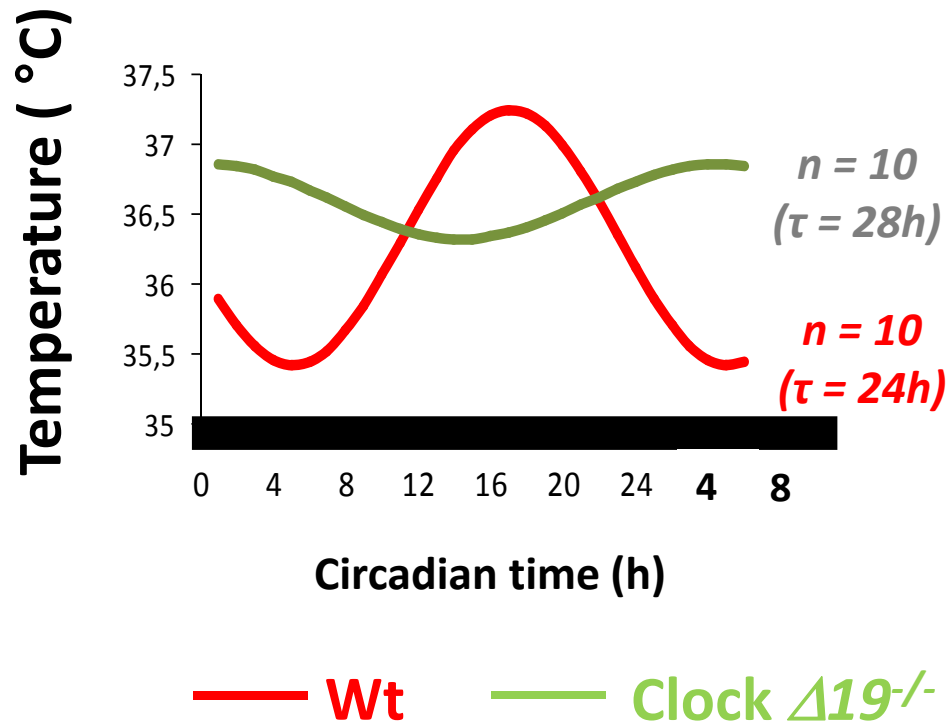
Time (days after tumor inoculation)



Circadian disruption : *Clock* gene mutation in DD

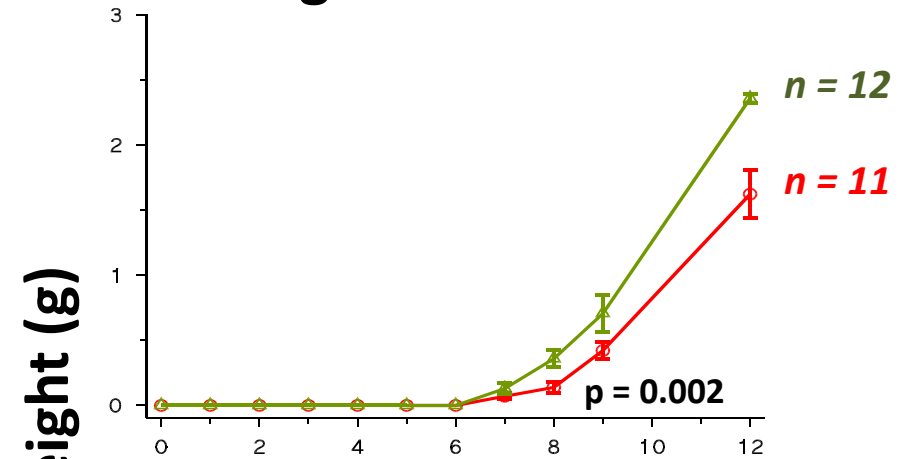
Circadian physiology (DD)

Body temperature curve

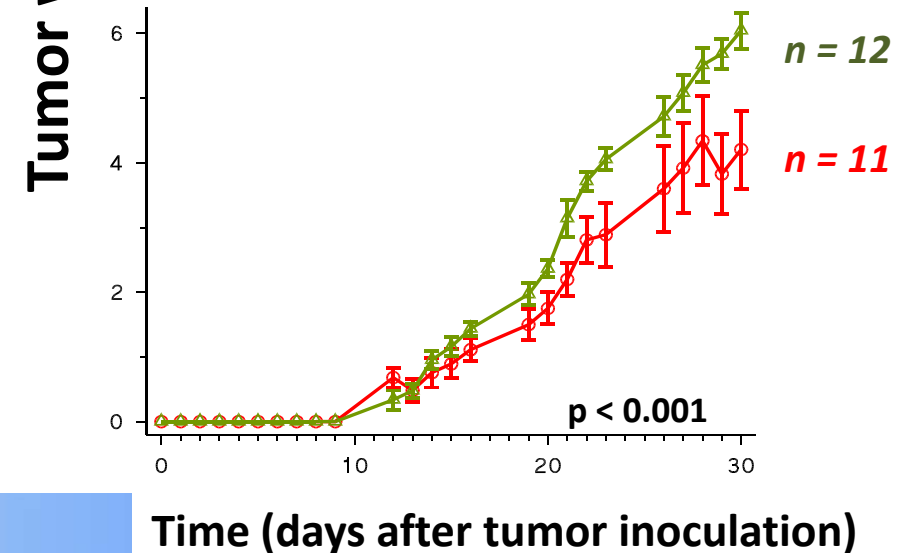


Tumor progression

Glasgow osteosarcoma

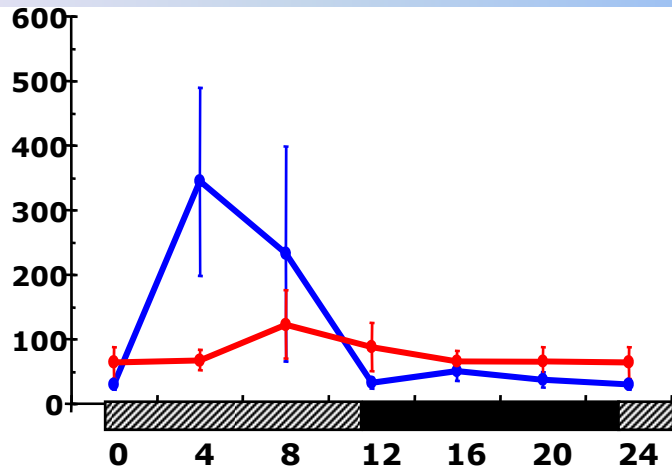


PO3 adenocarcinoma

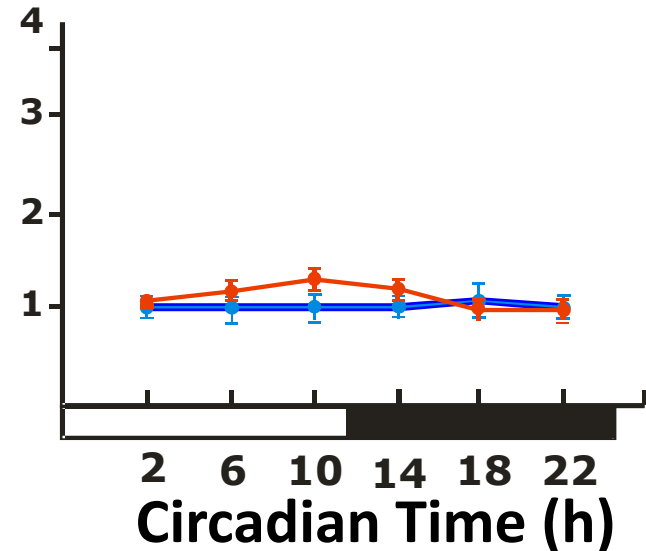
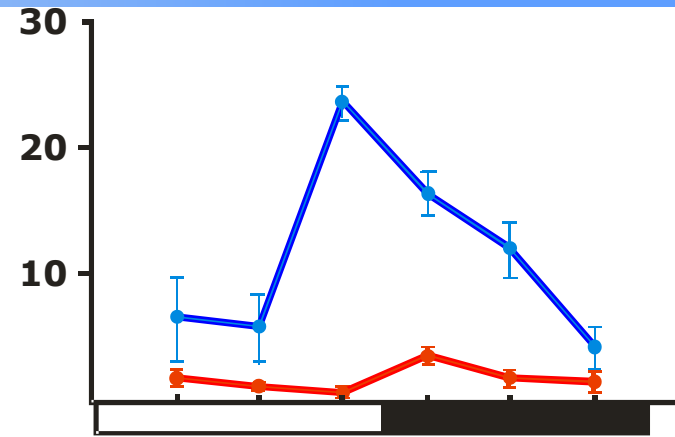
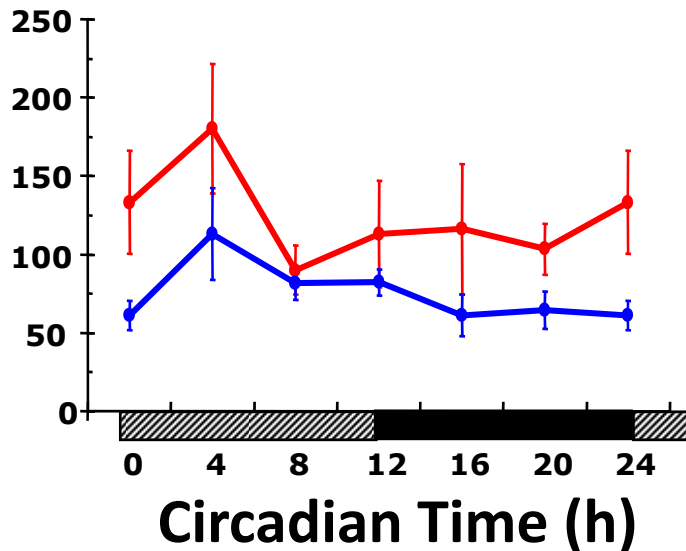


Circadian disruption: cell cycle genes in liver (mRNA)

c-Myc



p53

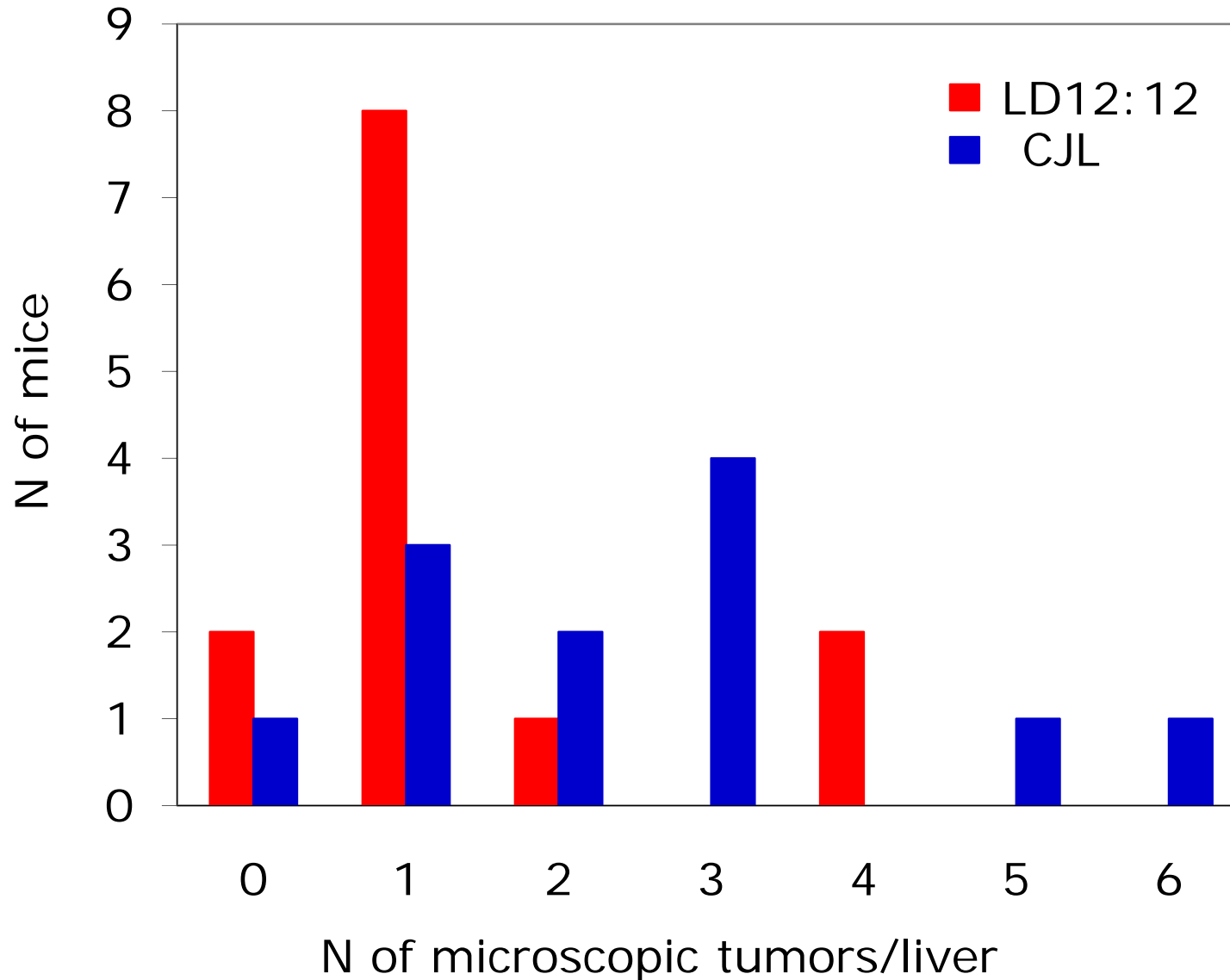


—●— LD12:12 —●— DHC

—●— Wt —●— mPer2^{-/-}



DEN hepatocarcinogenesis in mice on LD12:12 vs chronic jet lag



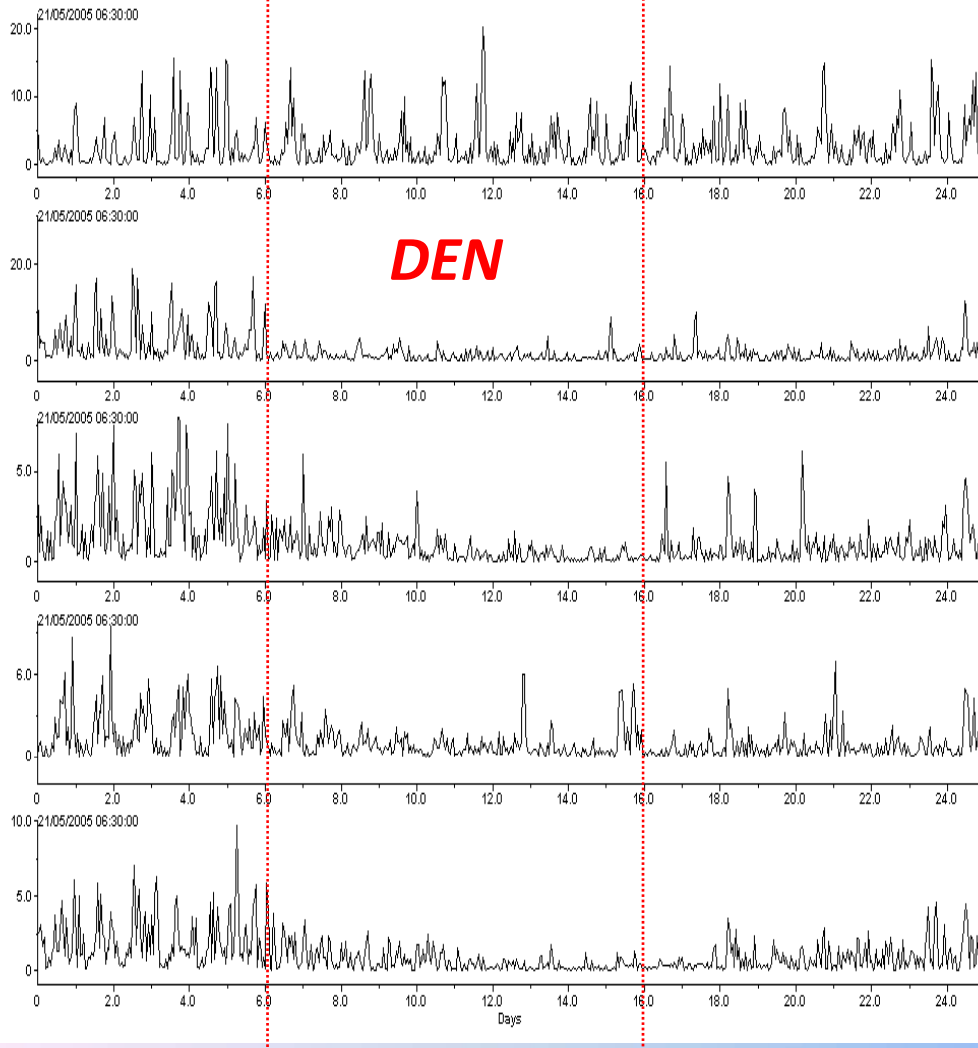
Mean diameter (largest tumor)

- LD12:12: 4 mm
 - CJL : 8.5 mm
- $p=0.033$

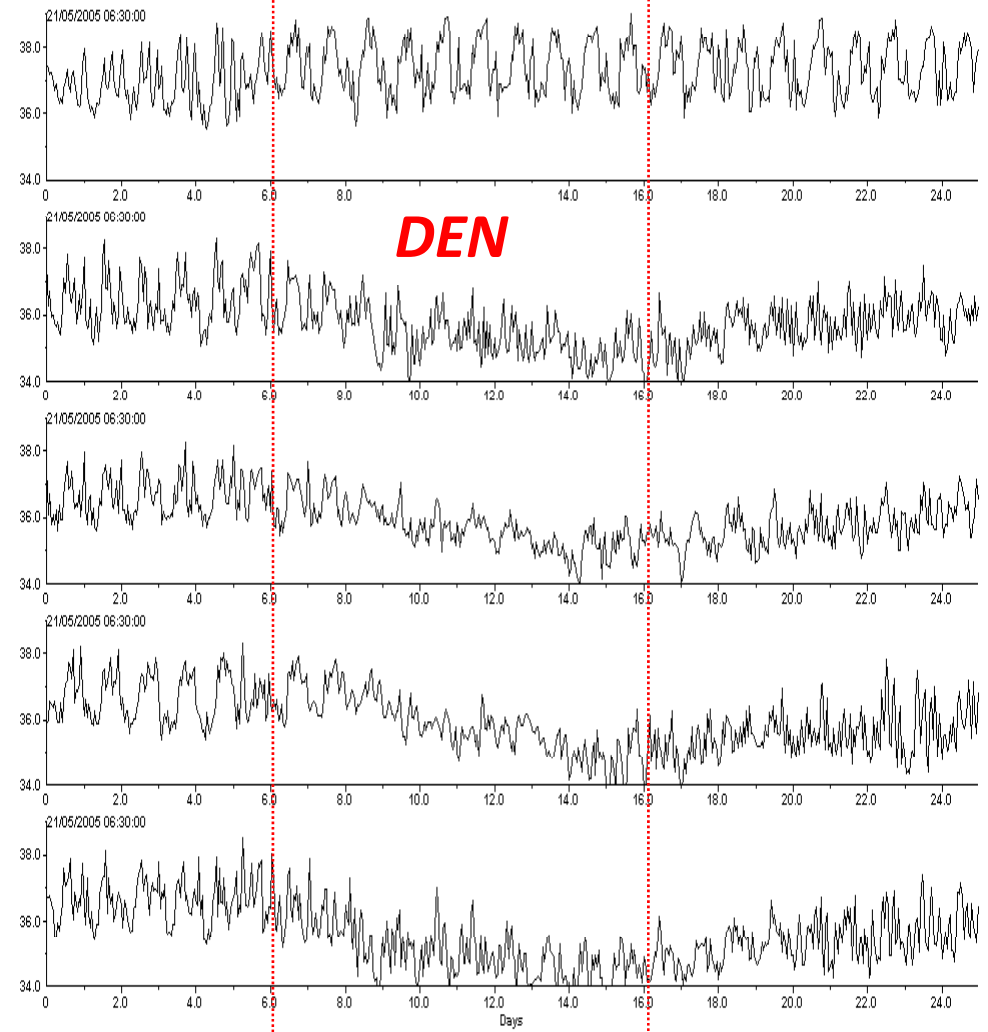


DEN effects on SCN biomarkers

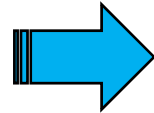
Rest-activity *Control*



Body temperature *Control*



**SCN ablation
Chronic jet lag
Constant light
Per2, Clock mutations**



Disruption of

- circadian physiology
- host molecular clocks



**Genomic instability
Accelerated cell cycling**



**Accelerated cancer growth
Increased cancer incidence**





Night work and breast cancer risk: A systematic review and meta-analysis

Sarah P. Megdal ^a, Candyce H. Kroenke ^{b,c}, Francine Laden ^{b,c,d},
Eero Pukkala ^e, Eva S. Schernhammer ^{b,c,f,*}

- **13 studies (7 of airline cabin crew , 6 other night shift workers)**
- **Aggregate estimated risk: 1.48 (95% CI, 1.36–1.61)**
- **Female airline cabin crew: SIR: 1.44 (95% CI, 1.26–1.65)**
- **Female night workers : RR: 1.51 (95% CI, 1.36–1.68)**

“Studies on night shift work and breast cancer risk collectively show an increased breast cancer risk among women. Publication bias is unlikely to have influenced the results.”



Carcinogenicity of shift-work, painting, and fire-fighting

Kurt Straif, Robert Baan, Yann Grosse, Béatrice Secretan, Fatiha El Ghissassi, Véronique Bouvard, Andrea Altieri, Lamia Benbrahim-Talaa, Vincent Coglianò, on behalf of the WHO International Agency for Research on Cancer Monograph Working Group

...About 15–20% of the working population in Europe and the USA is engaged in shift-work that involves night work, which is most prevalent (above 30%) in the health-care, industrial manufacturing, mining, transport, communication, leisure, and hospitality sectors.

Among the many different patterns of shift-work, those including nightwork are the most disruptive for the circadian clock....

...the Working Group concluded that “shift-work that involves circadian disruption is probably carcinogenic to humans” (Risk level 2A)



Circadian disruption in cancer patients

Performance status (WHO)

0 Able to carry out normal activity without restriction

I Restricted in physically strenuous activity but ambulatory and able to do light work.

II Ambulatory and capable of self-care but unable to carry out any work.
Up and about >50% of waking hours

III Capable of only limited self-care, confined to bed or chair > 50% of waking hours

IV Completely disabled. Cannot carry on any self-care. Totally confined to bed or chair



Circadian disruption in cancer patients

- **Performance status (PS) : the main prognostic variable of survival across all cancers.**
- **PS is based on a subjective rating of the patient's daily activities by the physician.**
- **Health-related Quality of Life through patient-rated questionnaires also appears as an independent prognostic factor of survival.**

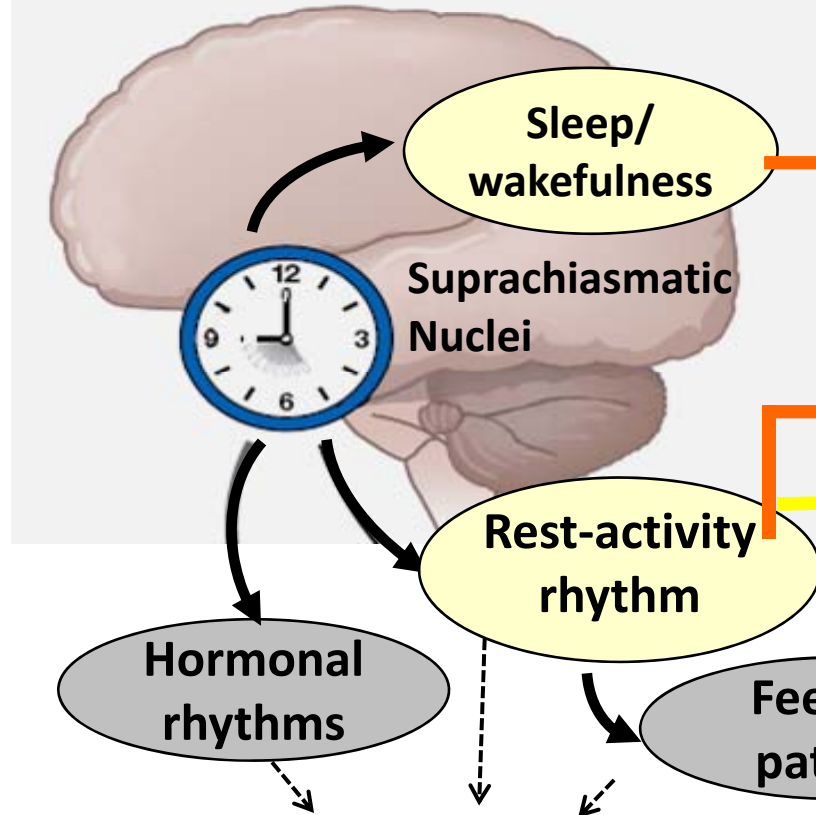


Circadian disruption in cancer patients: relations with symptoms and quality of life

Circadian Timing system

Environment

Day/night
Social
Familial
Meals



HR-QoL

Sleep disorders

Fatigue

Anorexia

PS

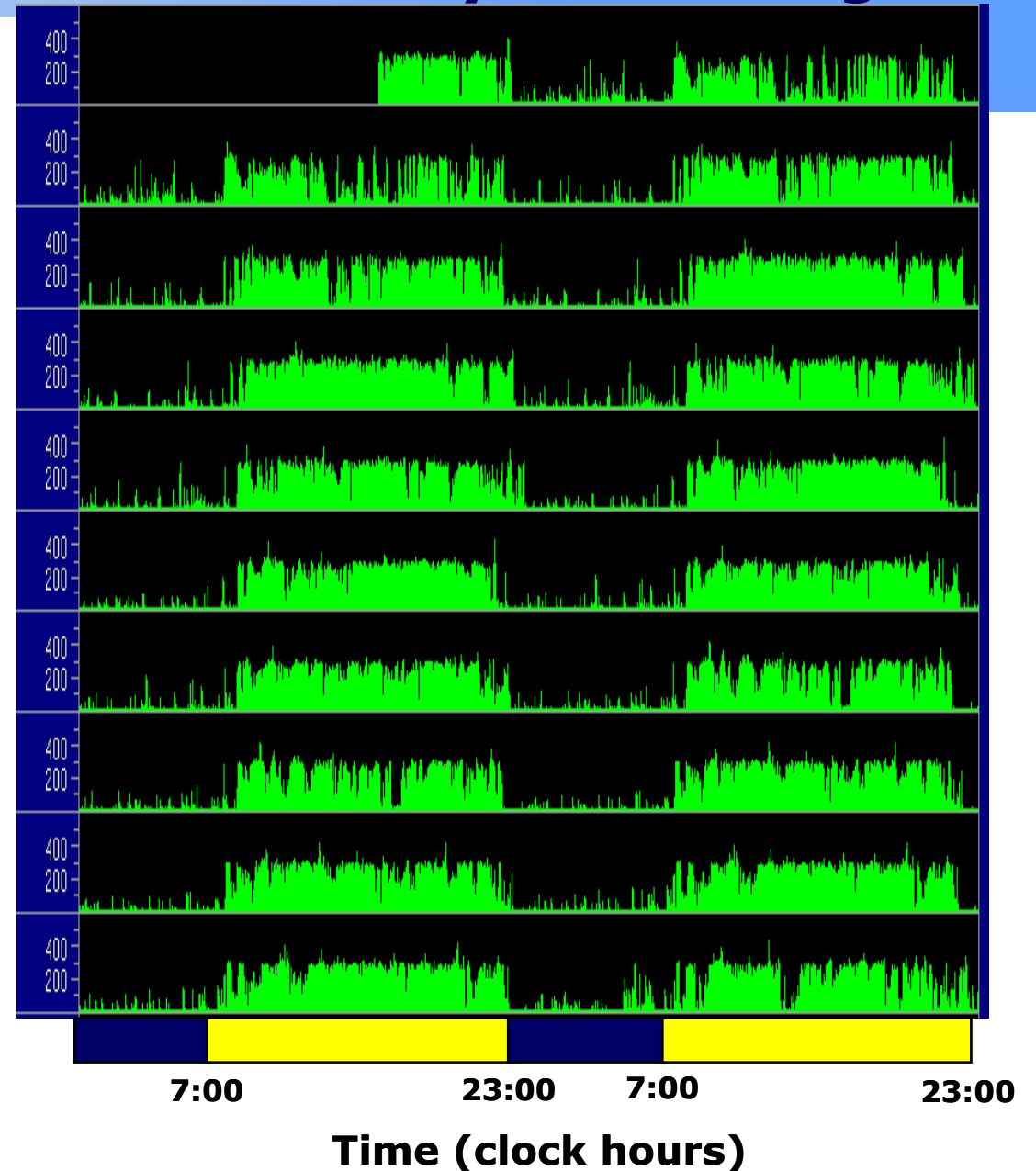
Circadian clocks in
peripheral organs



Rest-activity monitoring

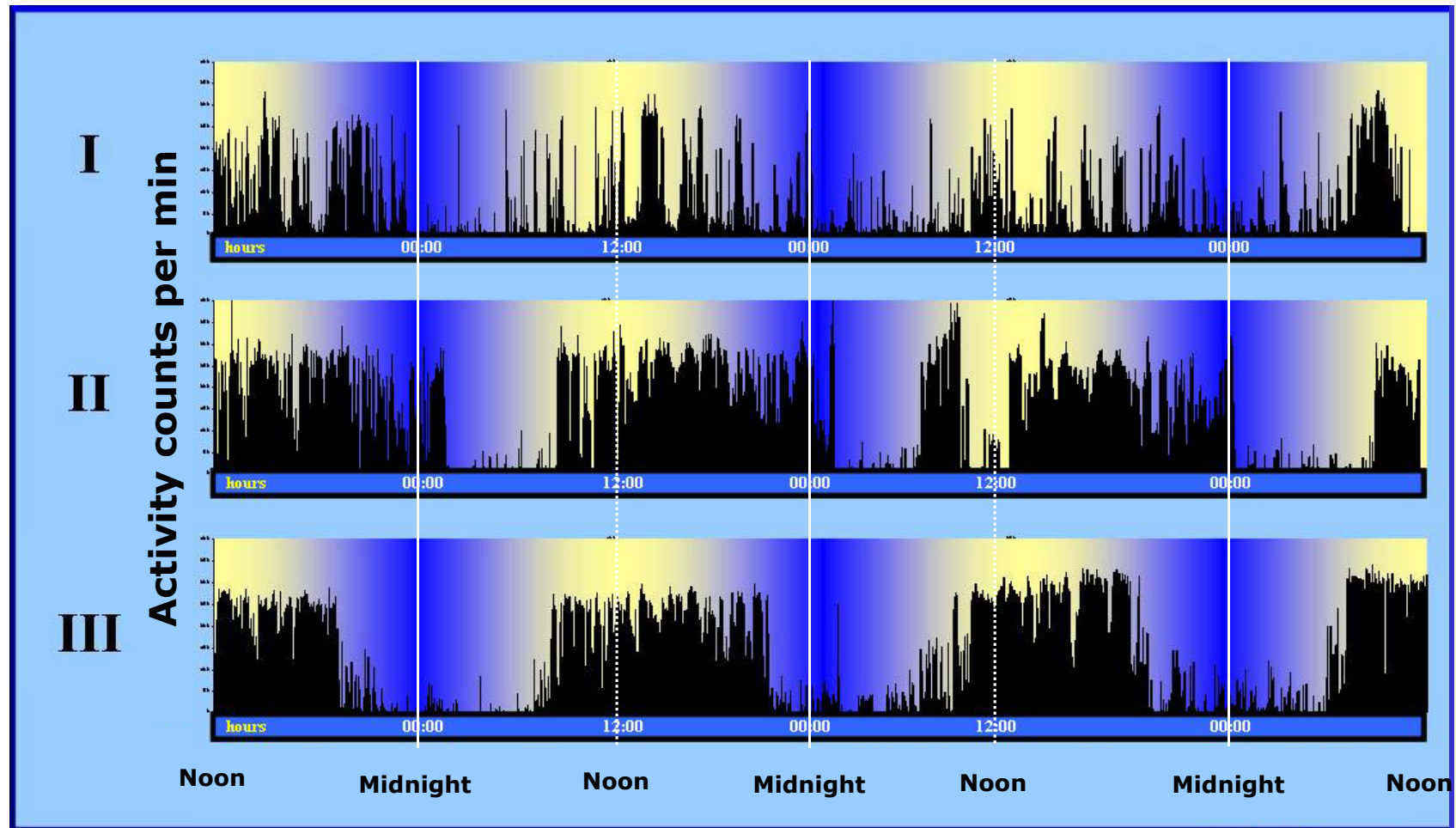


- Piezo-electric accelerometer
- Count of accelerations per min
- « Continuous » recording for days or weeks
- Zero-crossing vs PIM mode
- Quantified parameters (r24, I<0)





Variable interindividual patterns in rest-activity rhythm in cancer patients (metastatic colorectal cancer)





Relation between rest-activity cycle and QoL (EORTC) 192 patients with metastatic colorectal cancer

Table 3. Differences in Mean Quality of Life Scores According to Patients' $I < O$

QoL Parameter	$I < O$ Quartile Group ^a				<i>p</i> (Kruskal–Wallis)
	1	2	3	4	
Global QoL	53	54.2	63.2	68.4	0.001
Physical functioning	62.5	72.4	82.2	89.5	<0.0001
Social functioning	60.2	63	74.4	80.7	0.006
Fatigue	50.9	40.7	36	26.8	0.001
Appetite loss	37	24.6	18	11.7	0.01
Constipation	37.1	21.4	20.5	12.8	0.03
Pain	35.7	19.6	21.1	13.7	0.05
Depression	6.9	6.1	5	4	0.02

Only statistically validated differences appear in the table.

^a $I < O$ quartile groups—1: $I < O < 25\%$ quartile, 2: $I < O > 25\%$ and $< 50\%$ quartile, 3: $I < O > 50\%$ and $< 75\%$ quartile, 4: $I < O > 75\%$ quartile.



Full Paper

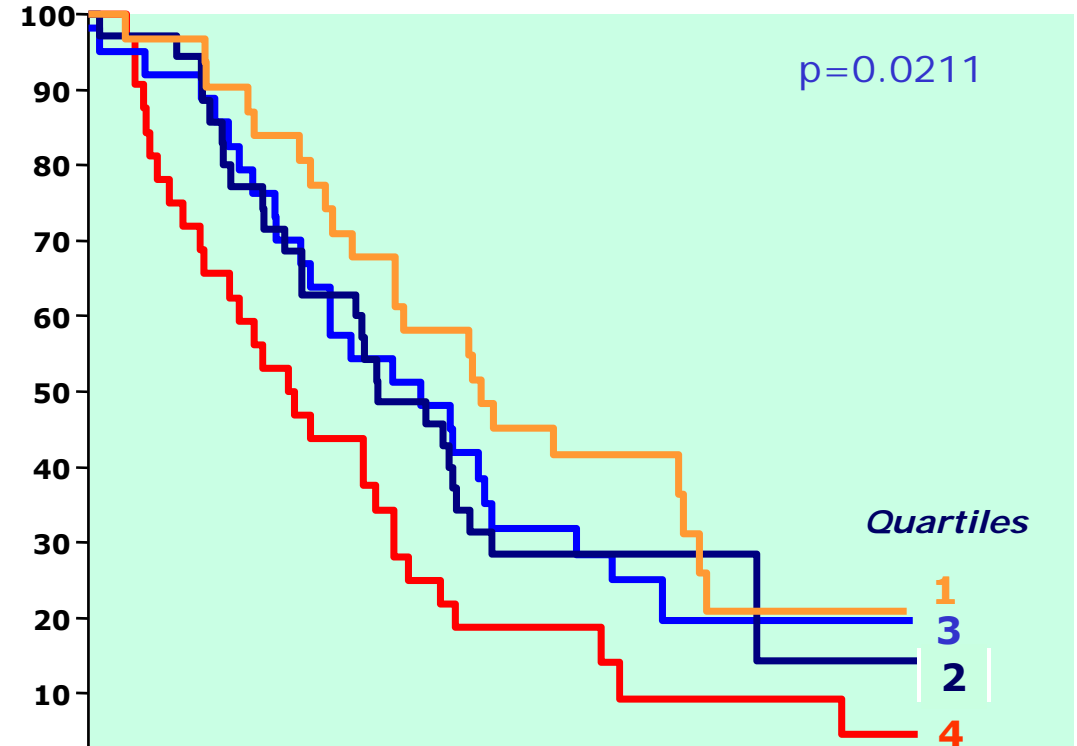
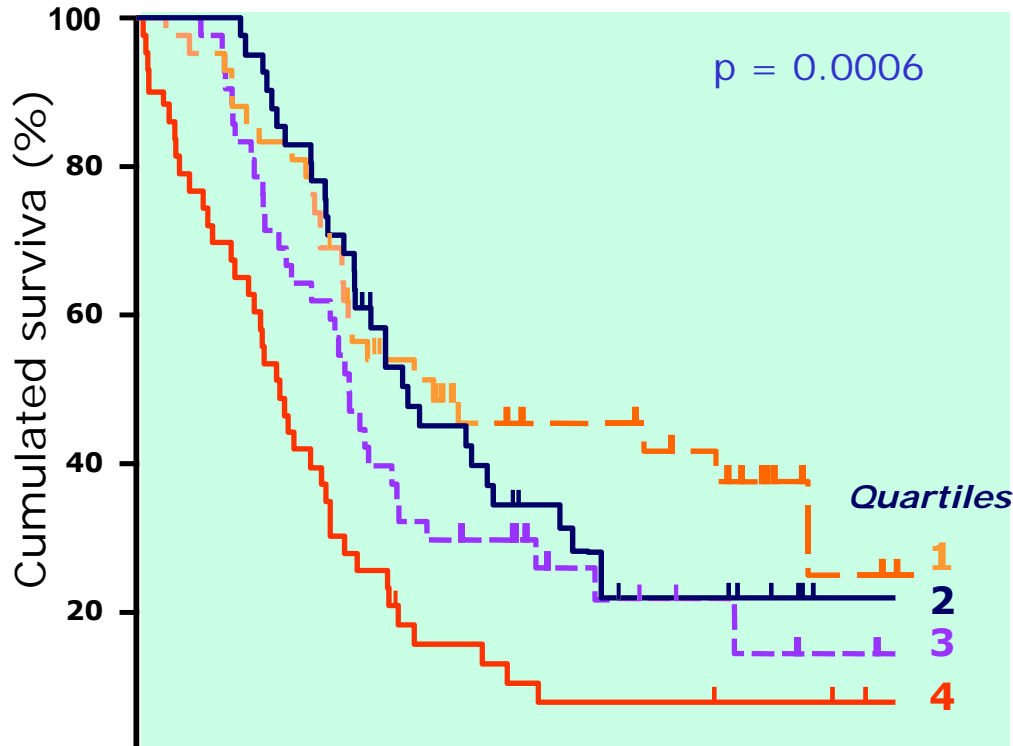
Circadian function in patients with advanced non-small-cell lung cancer

RD Levin¹, MA Daehler¹, JF Grutsch¹, J Quiton², CG Lis^{*1}, C Peterson¹, D Gupta¹, K Watson², D Layer², S Huff-Adams², B Desai², P Sharma², M Wallam², M Delioukina², P Ball², M Bryant², M Ashford², D Copeland², M Ohmori², PA Wood² and WJM Hrushesky²

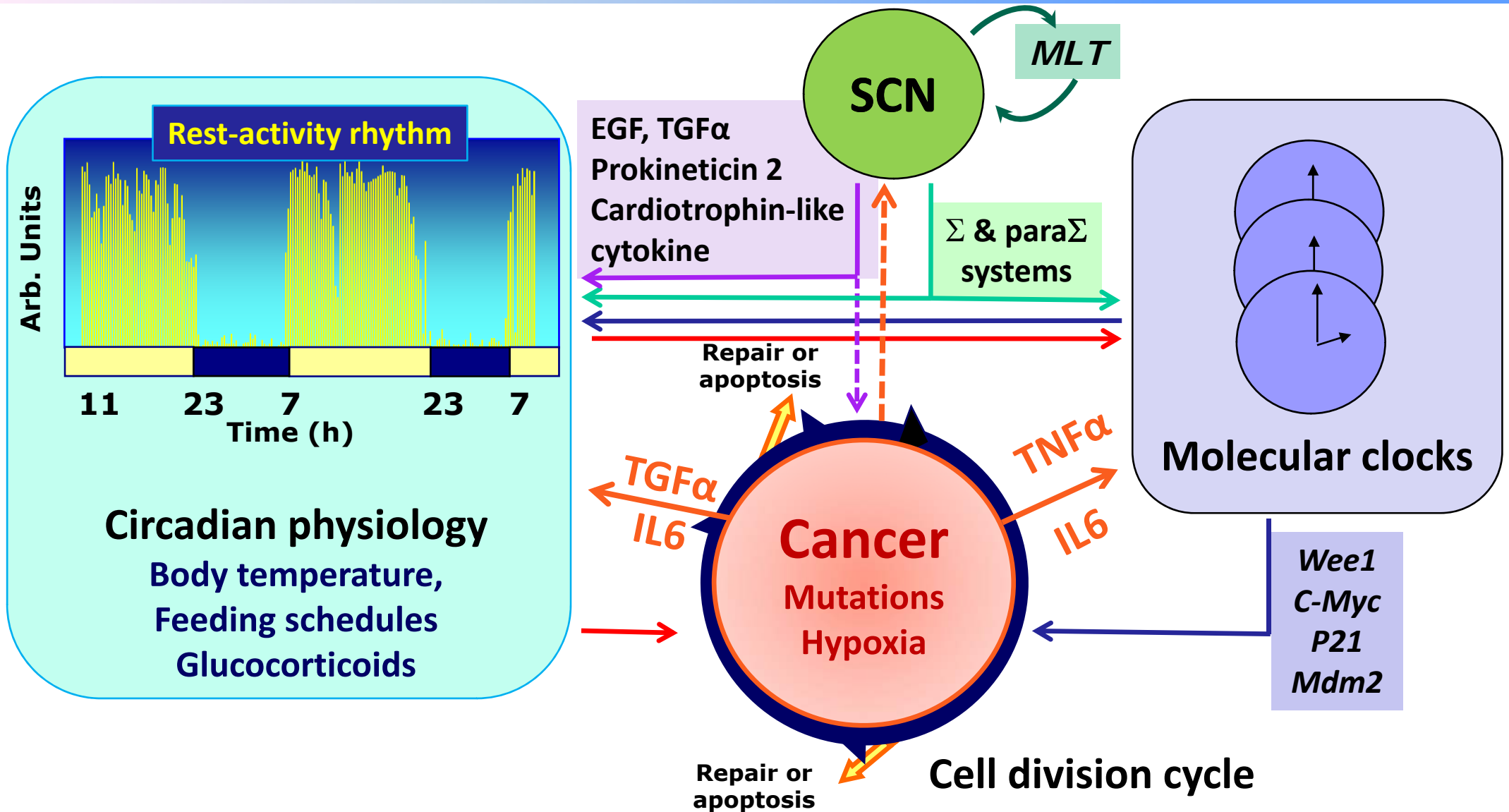
¹Cancer Treatment Centers of America[®] (CTCA) at Midwestern Regional Medical Center, Zion, IL, USA; ²WJB Dorn Veterans Affairs Medical Center, Columbia, SC, USA



24-h rest-activity rhythm, independent prognostic factor of survival in patients with metastatic colorectal cancer

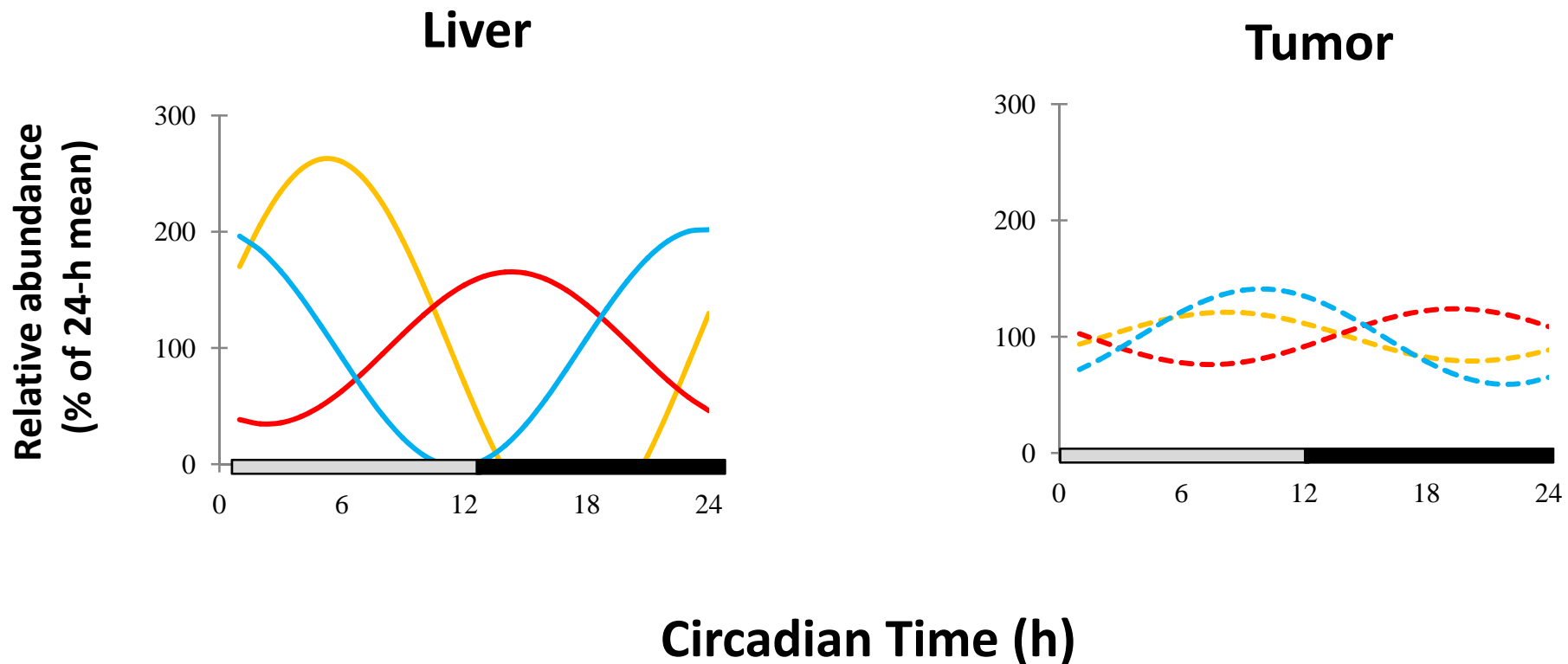


Relation between circadian rhythm and survival confirmed in advanced or metastatic lung, breast and GYN cancers and in metaanalysis in 500 pts with metastatic GI cancer



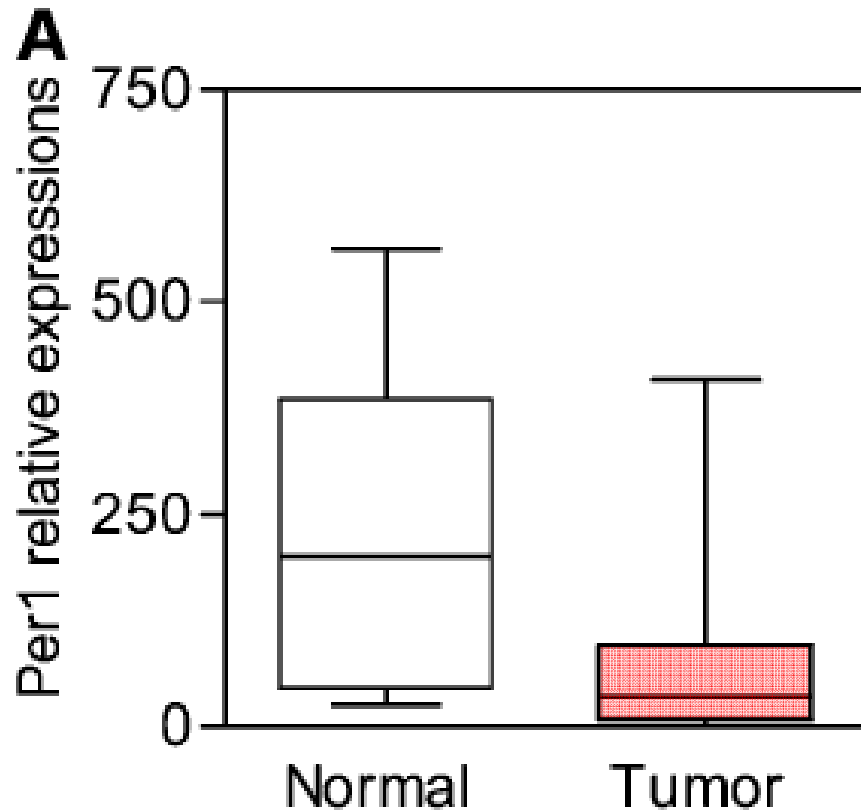
Transcriptional rhythms of clock genes

Rev-erba, **Per2** and **Bmal1**

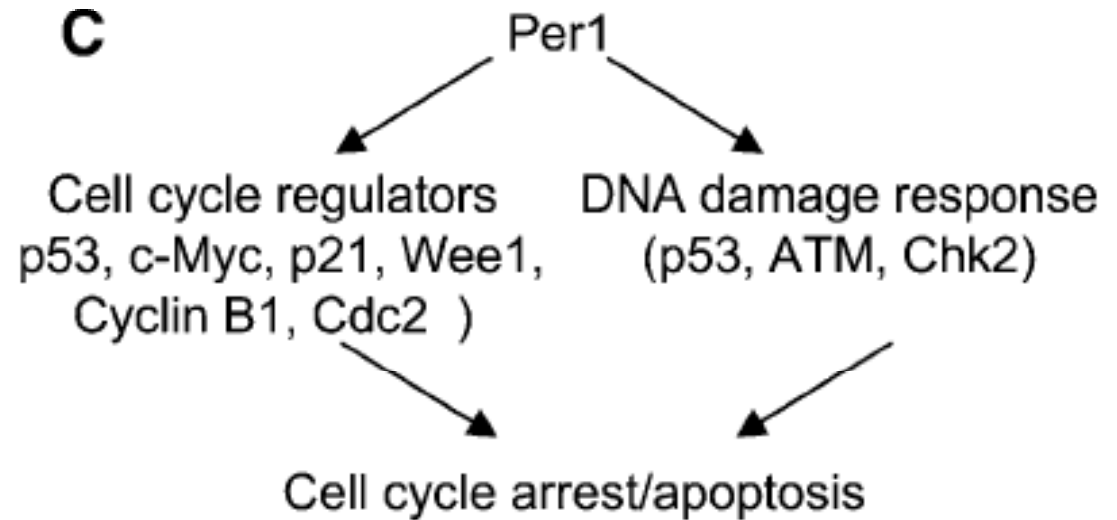


Clock genes mRNA expression in human lung cancer

hPer1



(N=33 patients)





Clock genes expression in human cancers

Cancer type	Clock genes	mRNA expression	Ref.
Breast cancer	Per1	↓	[70]
Breast cancer*	Per1, Per2, Per3	↓	[89]
Familial-sporadic breast cancer	Per1, Per2	↓	[90]
Lung	Per1	↓	[5, 70]
Colon cancer	Per1	↓	[91]
Colon cancer	Per2 and Clock	= or ↓	[91]
Pancreatic cancer	Per1, Dec1	↓	[92]
Endometrial cancer	Per1	↓	[93, 94]
Myeloid leukemia			
chronic	Per1, Per2, Per3	↓	[95]
acute	Per2	↓	[96]
Non-Hodgkin lymphoma	NPas2	**	[97]

* Disturbances in the expression of the genes through promoter methylation in 95% of the specimens.

** Strong association between a functional polymorphism in the clock gene NPAS2 Ala 394 Thr and reduced risk for NHL.



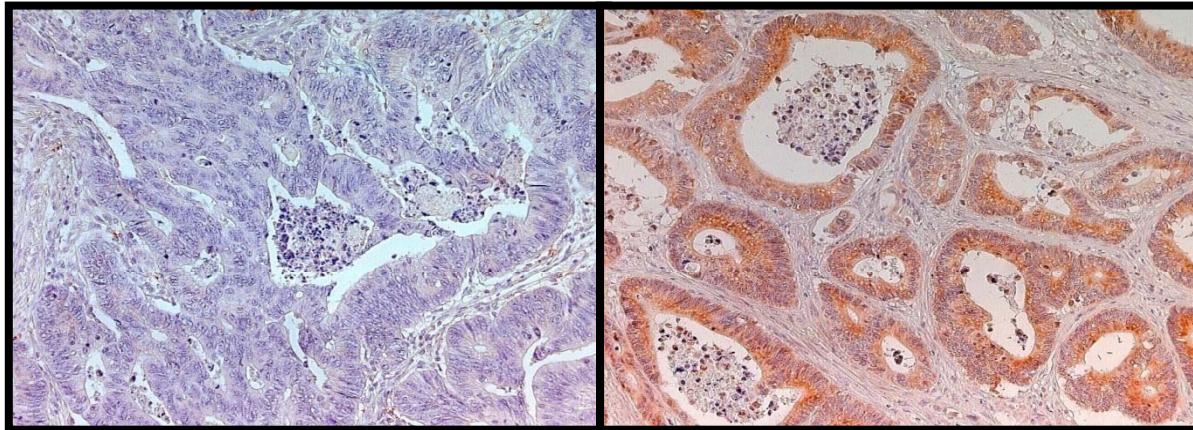
PER2 protein expression in colorectal cancer

Patients with metastatic colorectal cancer
Multicenter trial
198 primary tumors before any chemo
IHC in triplicate (% labelled tumor cells)
Anti-PER1, anti-PER2, anti-PER3

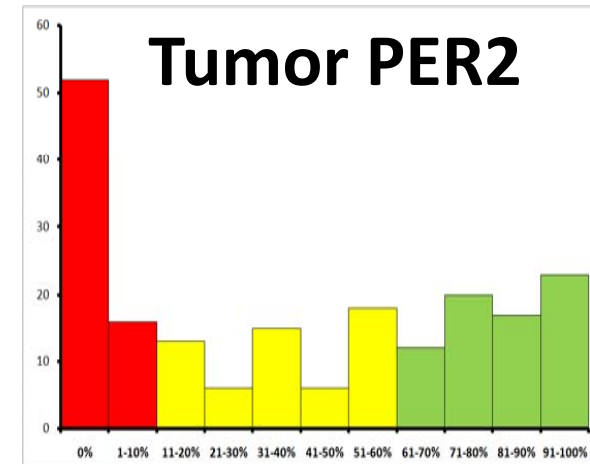
0%



100%



PER2 expression



16.7



17.8



19.5

$P=0.013$

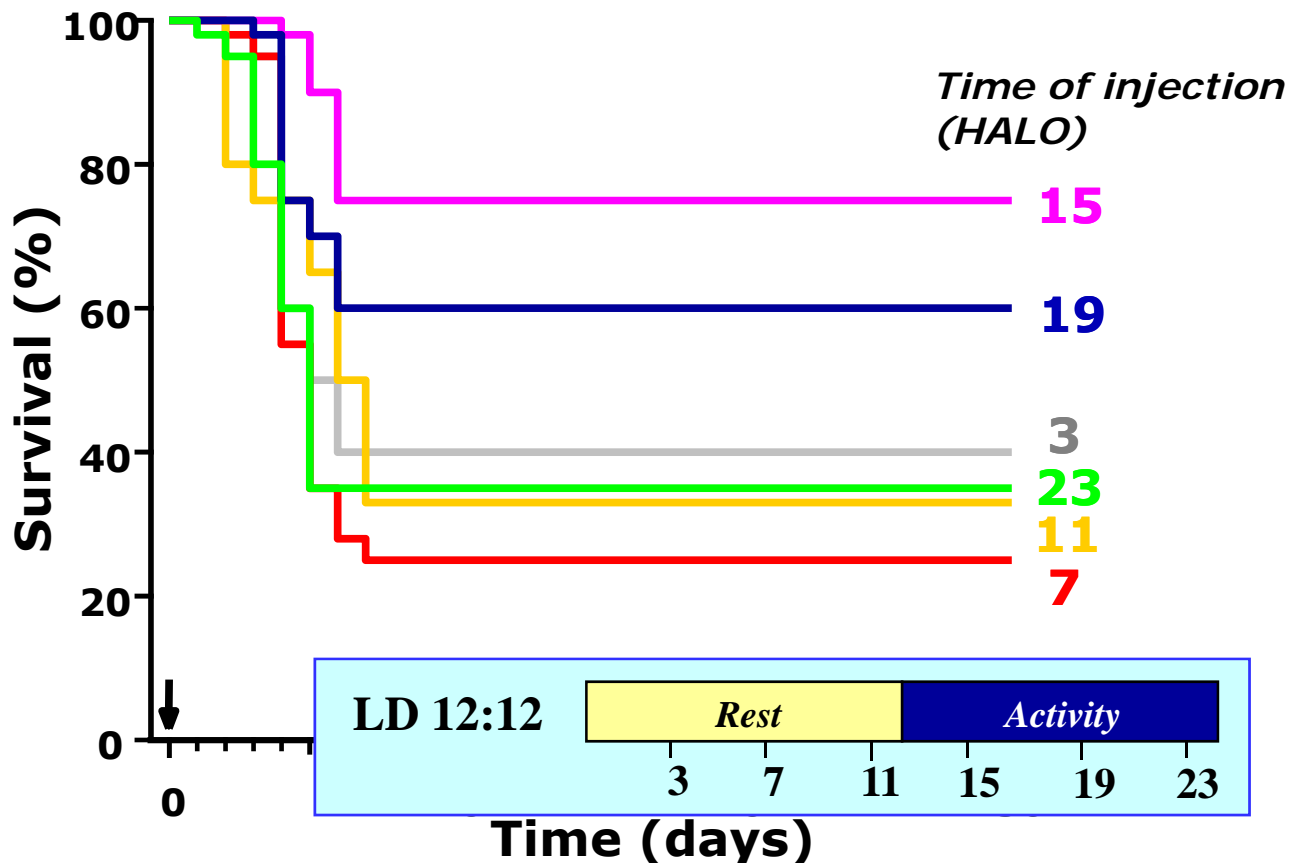
Median survival (months)

- **Toxicities and efficacy of anticancer treatments can be significantly reduced with appropriate timing**
- **Chronotherapeutics consist in the adaptation of anticancer drug delivery to circadian rhythms**
 - Timing
 - Chronomodulated delivery



Dosing time dependencies in experimental models

Oxaliplatin in B6D2F1 mice



Tolerability

42 anticancer drugs
(all classes)

Efficacy

19 anticancer drugs

Best time

Similar for 90%



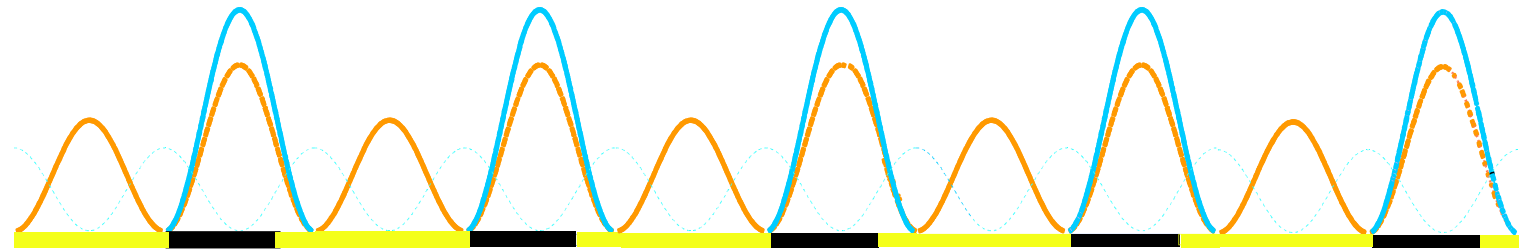
Chronomodulated chemotherapy



Dosing time dependency in 5-FU & oxaliplatin toxicities & efficacy



Chronomodulated 5-FU-LV-oxaliplatin (ChronoFLO)



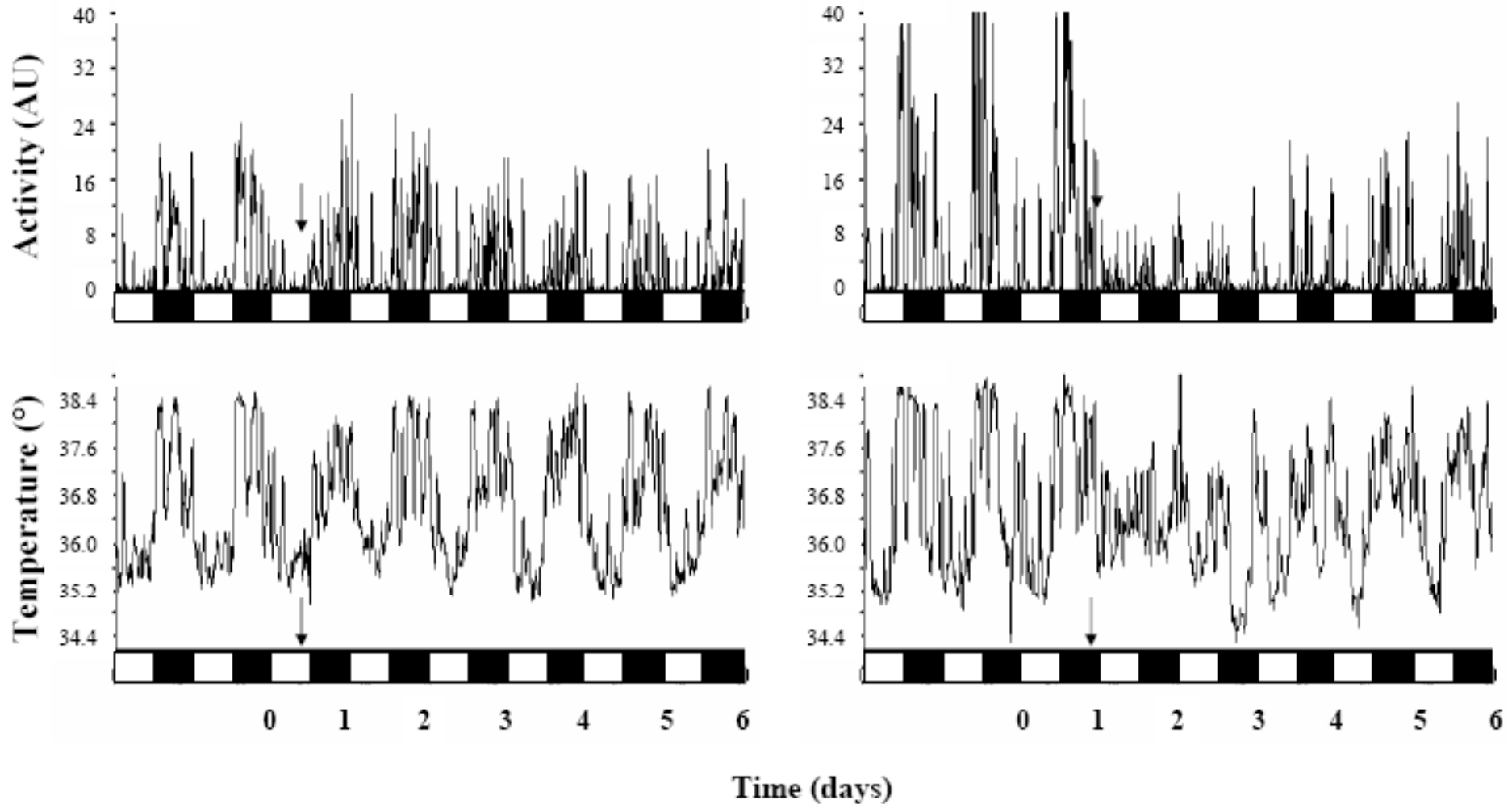
	vs constant rate 278 pts (no prior chemo)	vs opposite chronoFLO 114 pts (prior chemo)
Severe toxicity (gr 3-4)	14% vs 76%	16% vs 80%
Major tumor responses	51% vs 30%	30% vs 12%



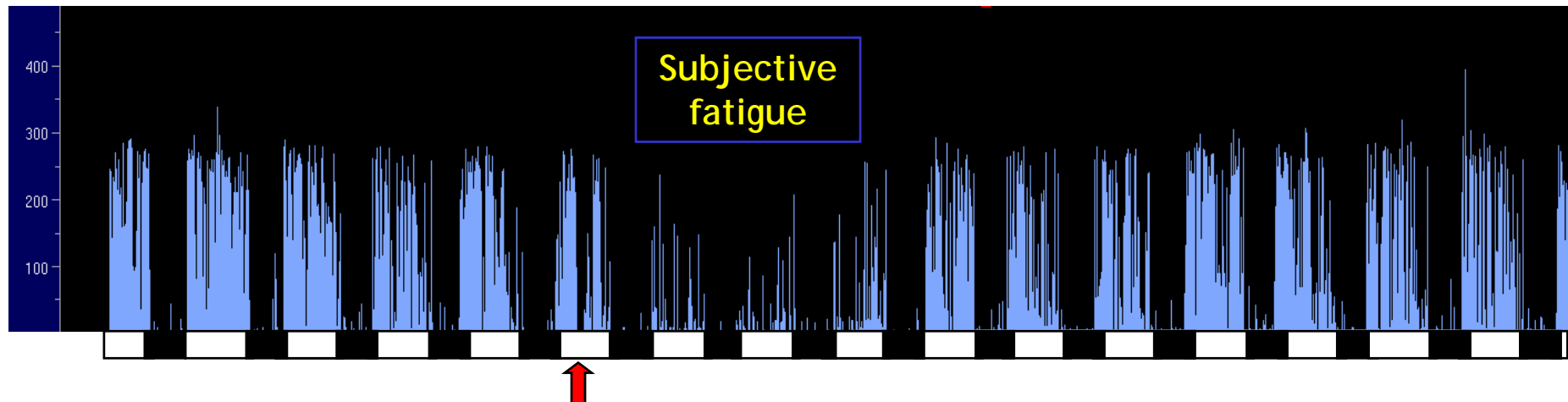
Gemcitabine-induced circadian disruption according to drug timing (mice)

Least toxicity
ZT 11

Highest toxicity
ZT 23

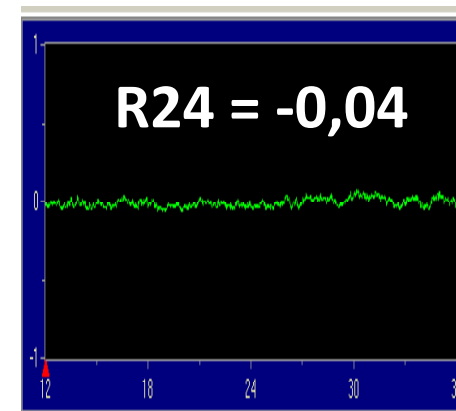
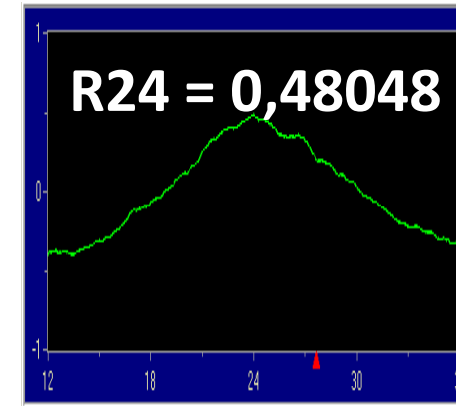
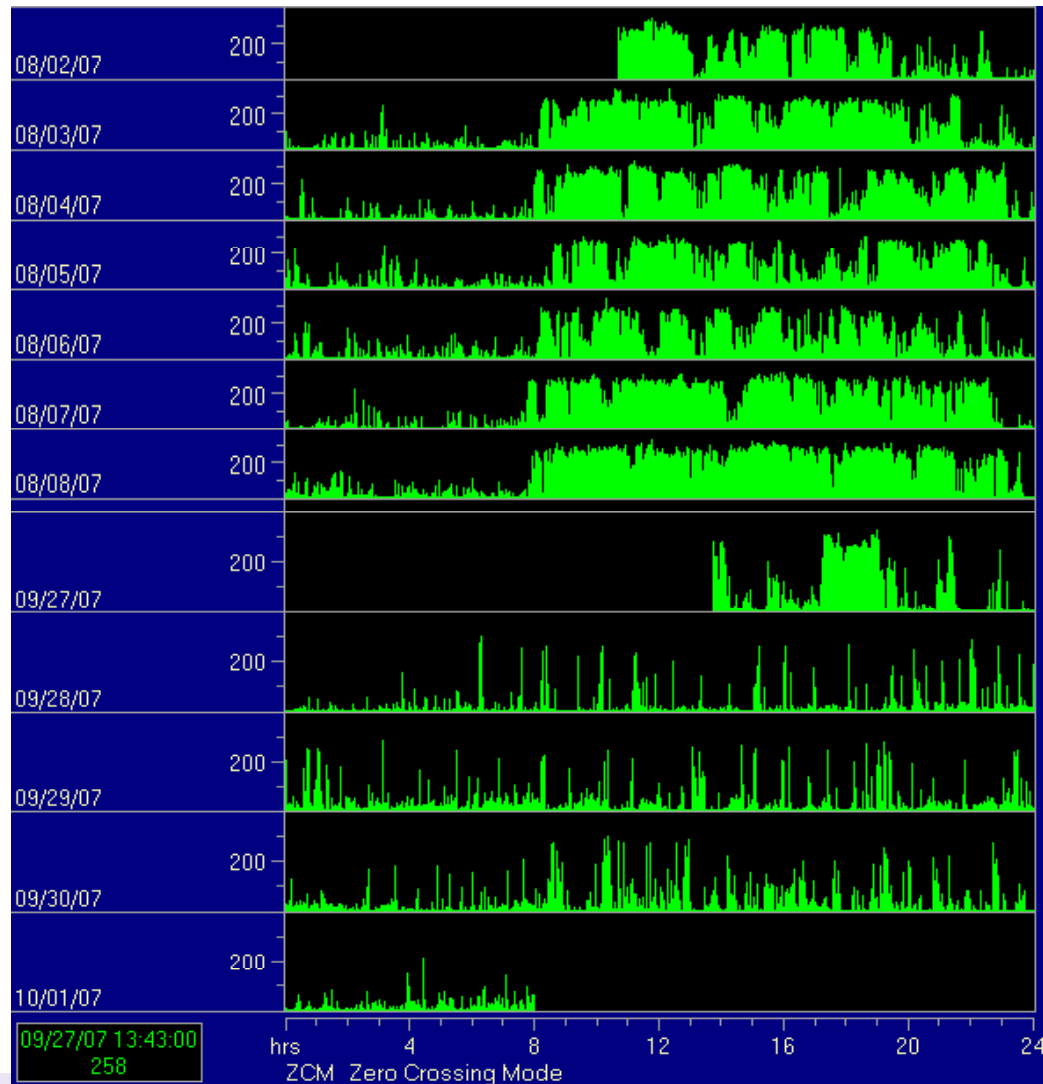


Circadian disruption (rest-activity rhythm) on docetaxel chemotherapy





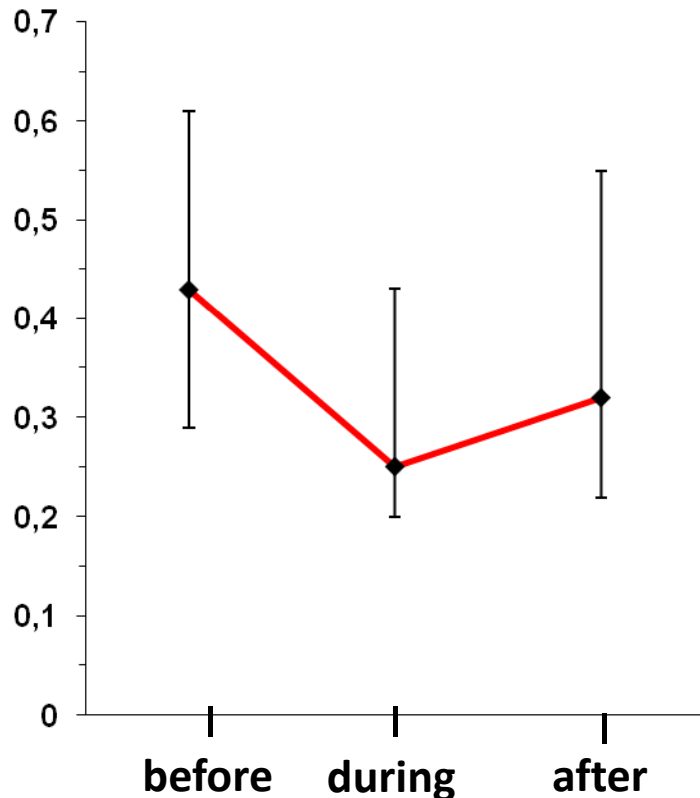
Circadian disruption (rest-activity rhythm) on irinotecan chemotherapy (cancer patient)



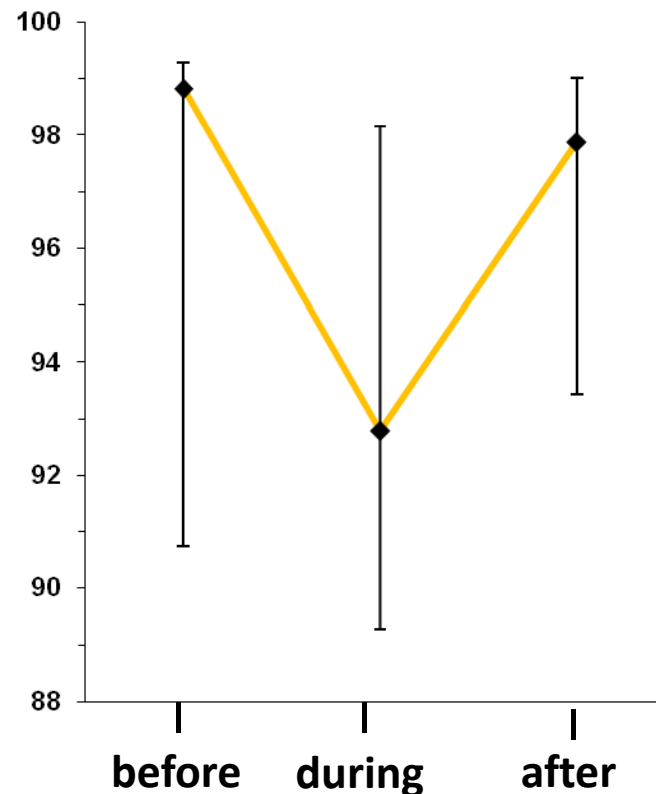


Circadian disruption on chemotherapy (rest-activity rhythm in 20 cancer patients)

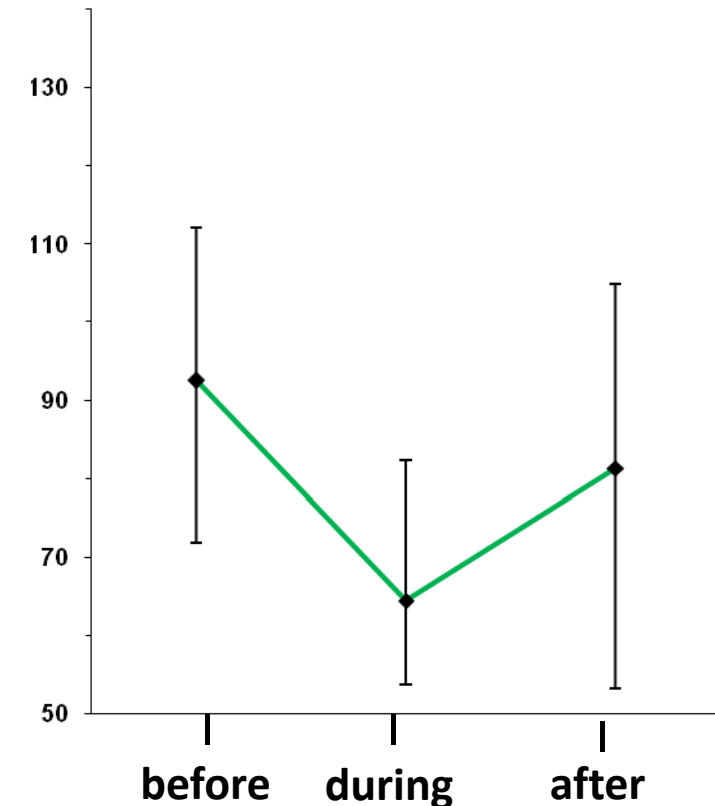
Autocorrelation r24



Dichotomy I<0



Circadian amplitude



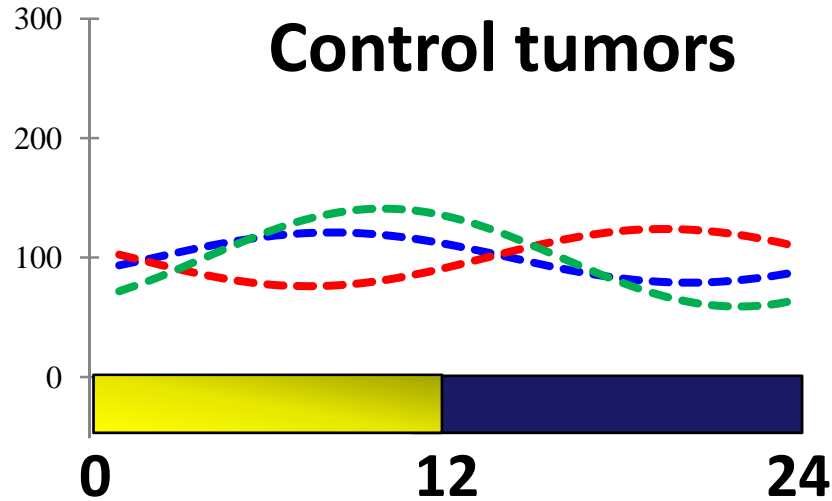
Median and 25th - 75th quartile of the parameters distributions;
p from Wilcoxon for treatment effect <0.001 for each circadian parameter

- **The circadian timing system**
(circadian biomarkers and molecular clocks)
- **Circadian disruption**
(cancer processes and treatments)
- ➔ **Circadian induction**
(cancer and host clocks)
- **Conclusions**

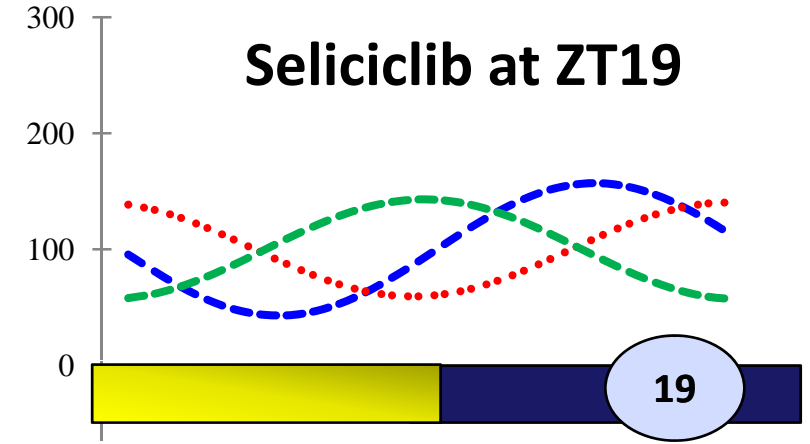
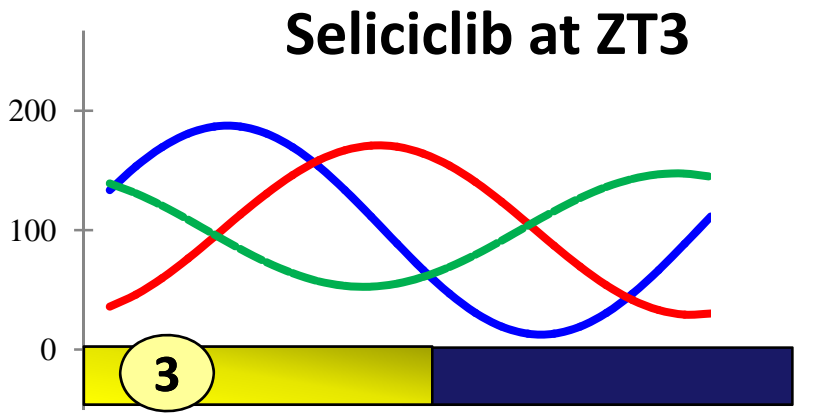


Seliciclib induction of molecular clock in tumor (GOS)

Reverba α \rightarrow Per2 \rightarrow Bmal1



In GOS tumor, Seliciclib inhibits activities of CDK1, CDK2, CDK7, CDK9, cyclin H & CKI δ/ϵ



60% tumor inhibition

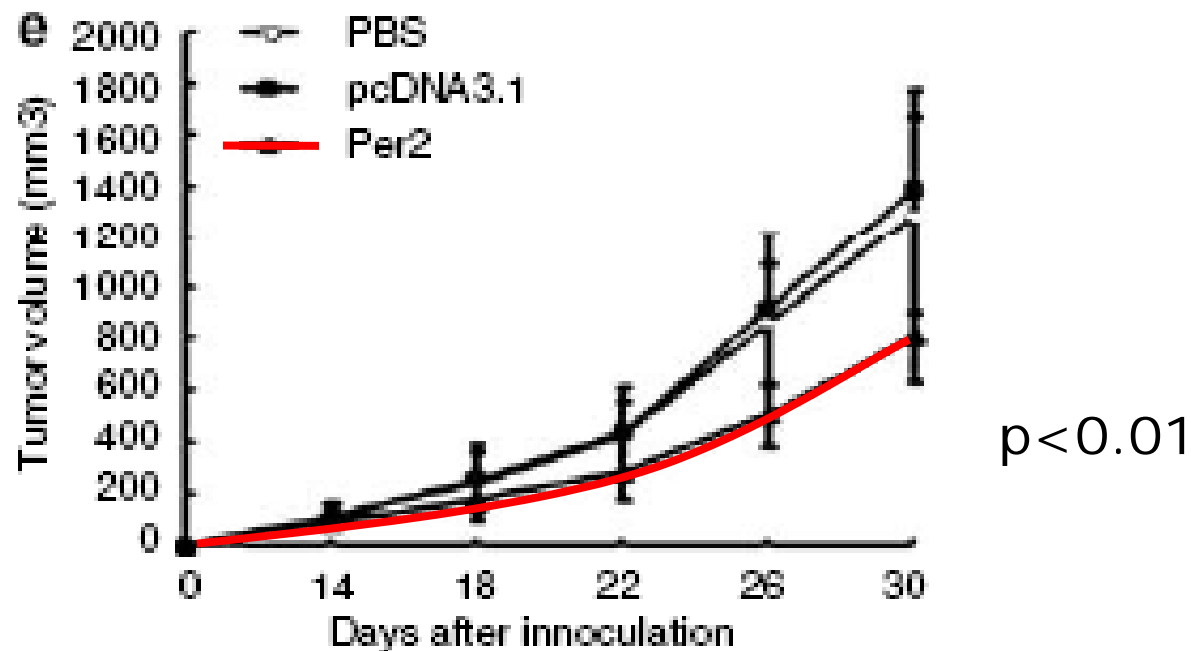
30% tumor inhibition

Circadian time (h)



Per2 gene delivery as a novel therapeutic intervention for treatment of cancer

Intratumor delivery of *Per2* had significant antitumor effects in C57BL/6 mice transplanted with Lewis lung carcinoma. It inhibited PCNA expression and induced apoptosis. (*Hua et al Cancer Gene Ther, 2007 June 22*).

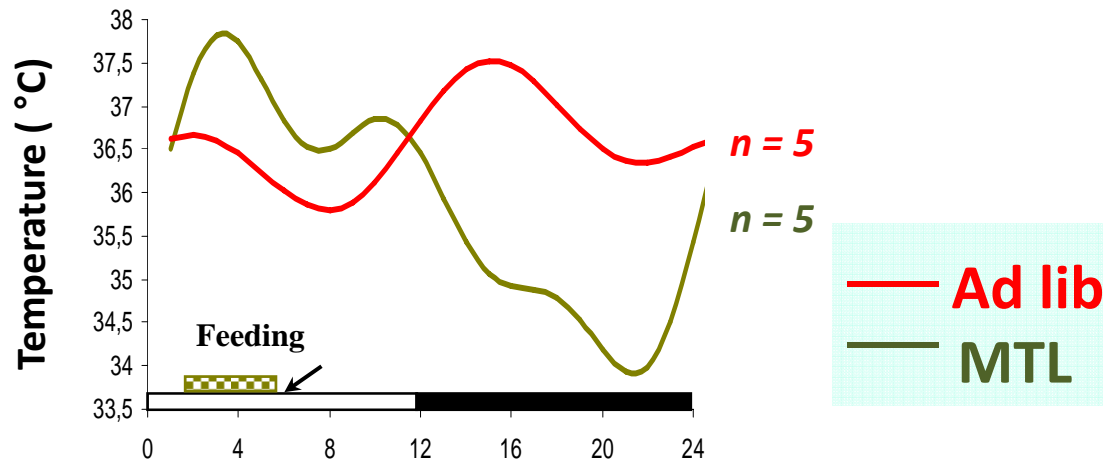




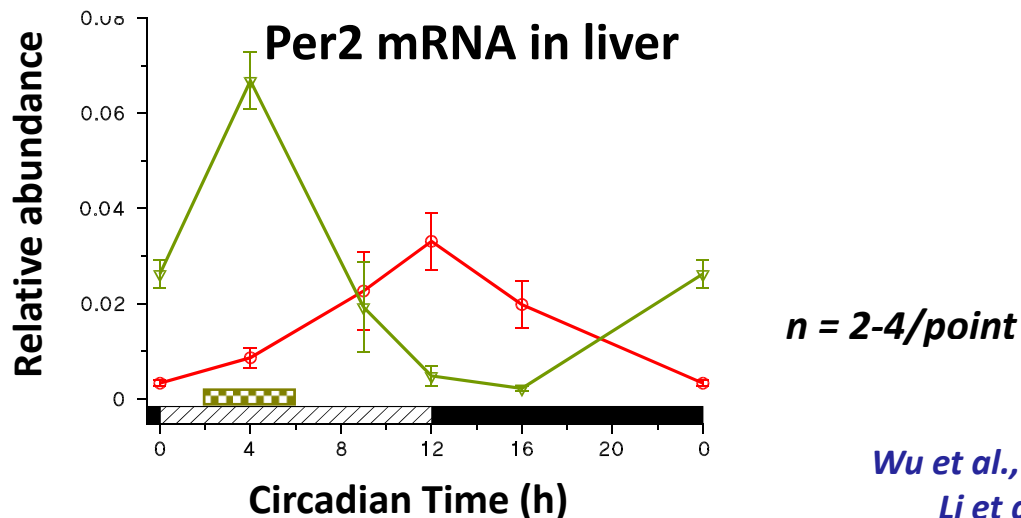
Re-inforcement of circadian timing system (meal timing at light –MTL)

Circadian Timing system Physiology

Body temperature curve

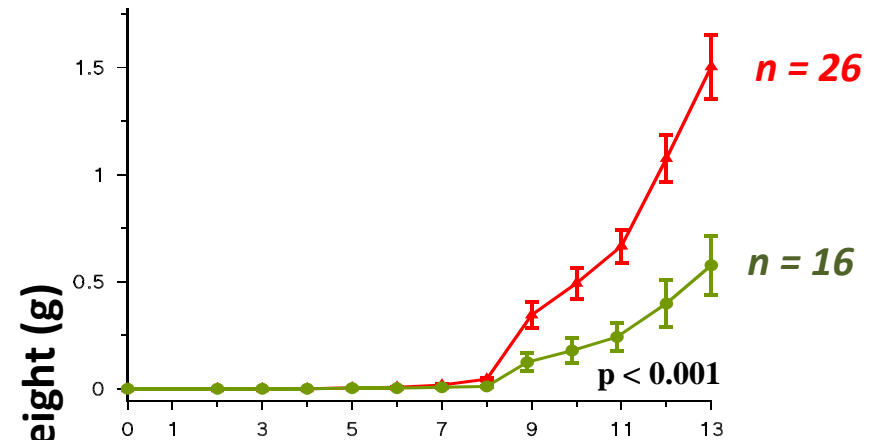


Molecular clock Per2 mRNA in liver

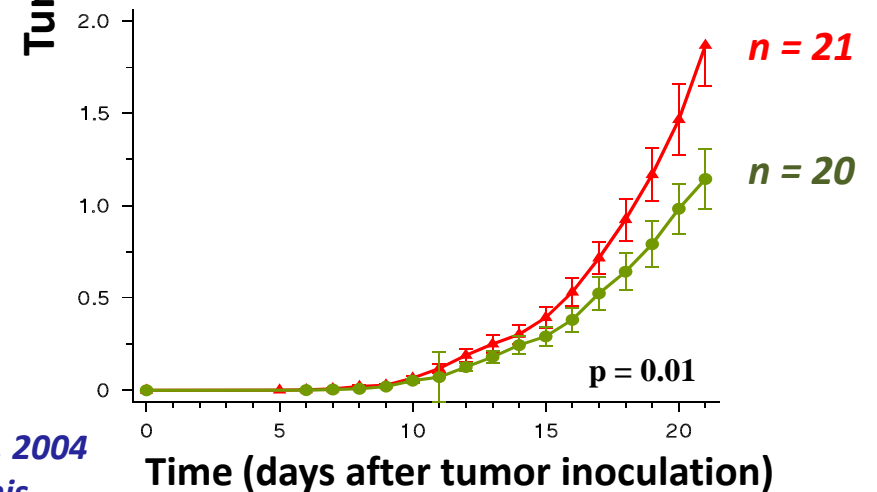


Tumor progression

Glasgow osteosarcoma



PO3 adenocarcinoma



Wu et al., Life Sci., 2004
Li et al., Soumis

Pharmacologic treatment of circadian disruption

Morning glucocorticoids in NSCLC patients

Parameters	Corticotherapy (6)		>	No corticotherapy (17)		<i>p</i>
MOY	104.8	± 25.5	>	93.8	± 38.2	0.26
R24	0.388	± 0.181	>	0.287	± 0.149	0.089
MOI	91.77	± 6.45	>	78.76	± 28.36	0.14
MIO	92.88	± 5.49	>	82.45	± 29.56	0.205

Pharmacologic treatment of circadian disruption

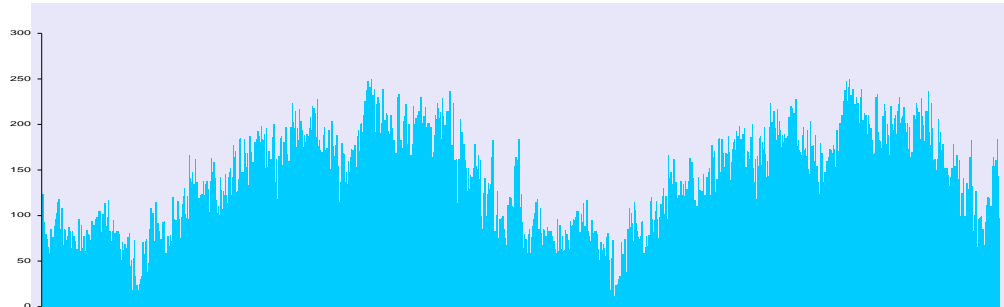
Gefitinib (TKI) in NSCLC patients

- 10 patients treated with gefitinib (250 mg daily)
- 4 patients treated with chemotherapy as controls



Erlotinib (TKI) on the rest-activity rhyhtm of a NSCLC patient

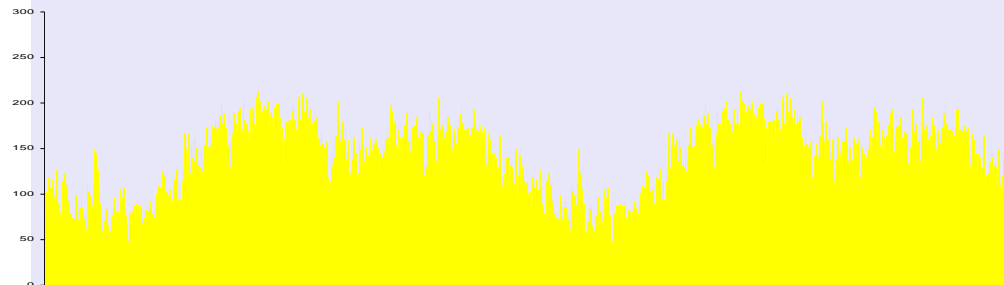
Before



R24 I<0

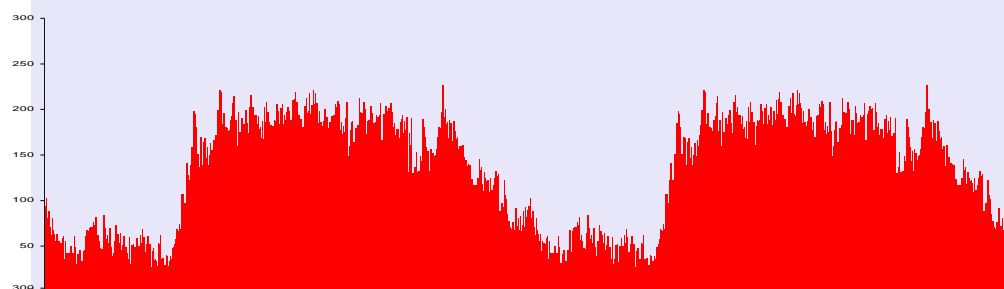
0.27 94.6

Morning
erlotinib



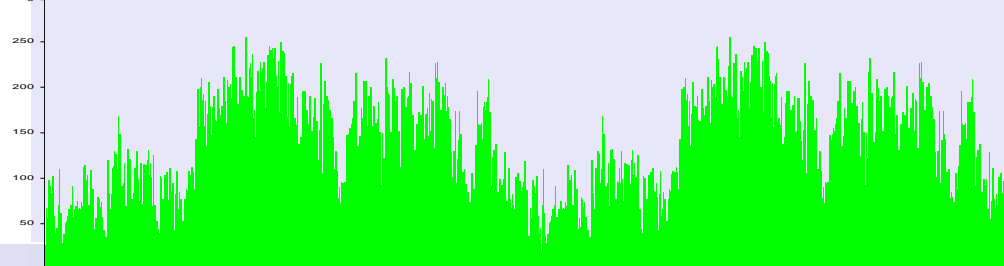
0.17 89.9

Evening
erlotinib



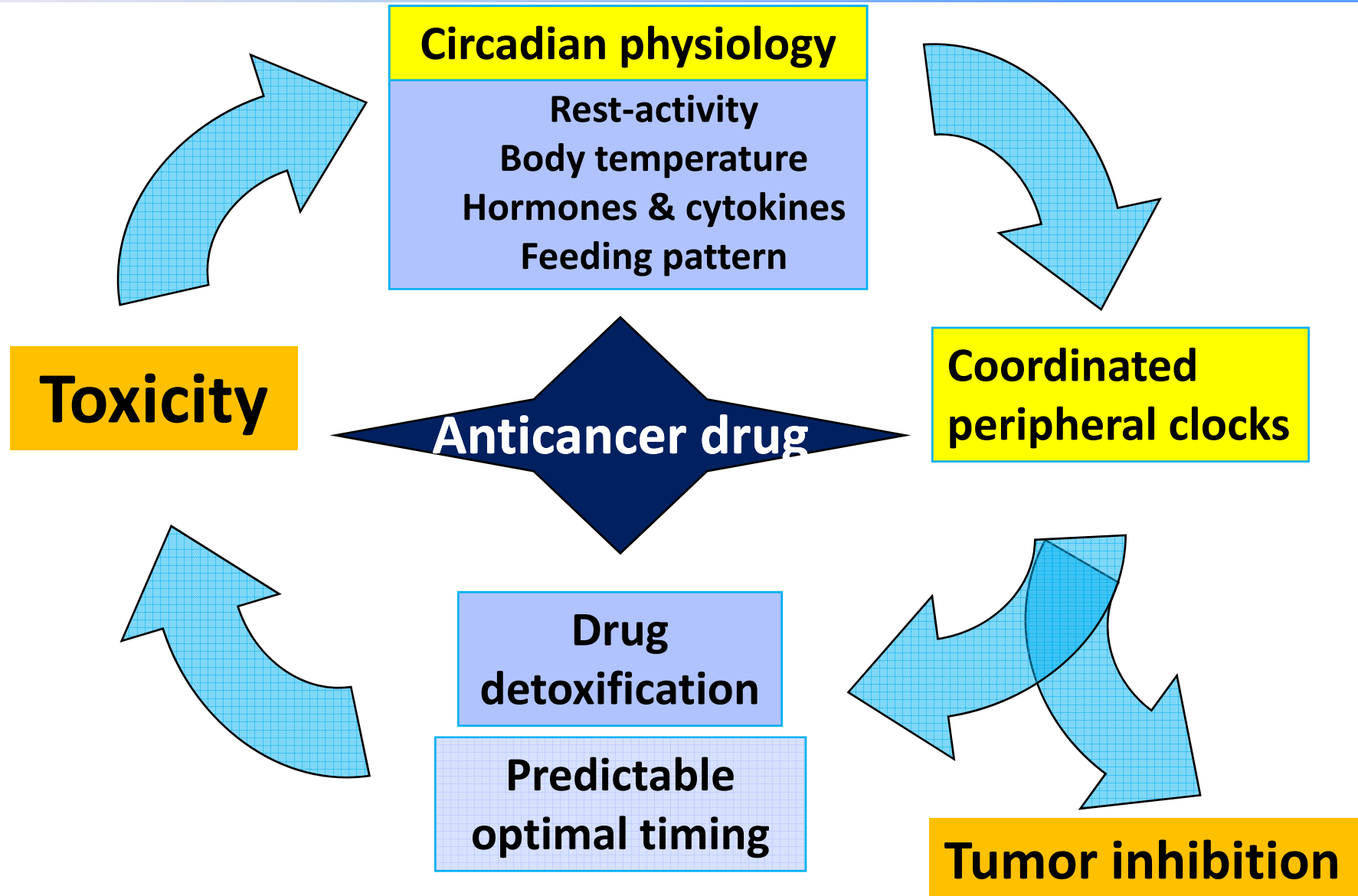
0.40 98.5

After



0.29 95.5

Hypothetical relations between circadian timing system, toxicity and efficacy of anticancer treatments



- **The circadian timing system**
(circadian biomarkers and molecular clocks)
- **Circadian disruption**
(cancer processes and treatments)
- **Circadian induction**
(cancer and host clocks)

 **Conclusions**

Conclusions & perspectives

- **Down regulation of tumor growth by the circadian timing system**
- **Implications for cancer prevention and treatments**
- **The circadian timing system: a potential target to be shielded or reinforced in cancer therapy**



INSERM U 776 Rythmes Biologiques et Cancers



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Network of Excellence
Biosimulation, a new tool for drug development



Temporal genomics for
tailored chronotherapeutics



The time dimension in
functional genomics

**GENES AT WORK
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Torino
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