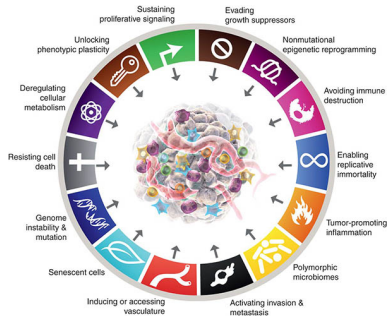


The Hallmarks of Cancer

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September 4, 2024



Cancer

[Kulesza et al. J. Pharmacokinetics and Pharmacodynamics, 2024]

Cancer = multiple aberrant processes across molecular, cellular, organ, and system level levels in space and time.

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A tumor is not just a mass of identical cancer cells, but rather a dynamic population of heterogeneous malignant cells that interact with each other and with their microenvironment in ways that influence their growth, survival, and evolution.

Cancer Modelling

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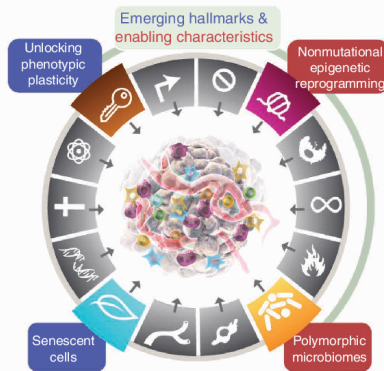
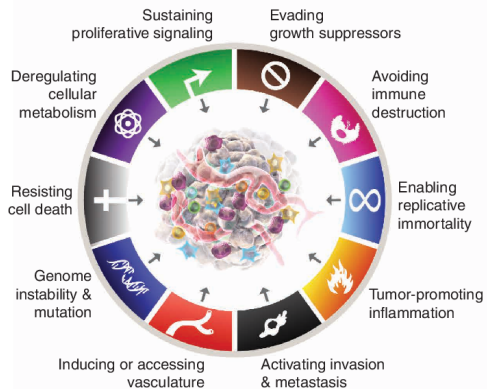
- **Multiple scales:** genes, proteins, cells, tissue, microenvironment (immune cells, angiogenesis, ECM, nutrients, stroma)
- **top down:** Data inform the models
- **bottom up:** Biological processes inform the models
- We need to strike a **balance** between model complexity, available data and interpretability.

The Hallmarks of Cancer

14 Hallmarks in 3 papers by Hanahan and Weinberg:

- Hanahan, Weinberg, Cell 2000
- Hanahan, Weinberg, Cell 2011
- Hanahan, Cancer Discovery, 2022

Hallmarks



(1) Sustained proliferative signalling

Known growth promoters: PTEN,
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(2) Avoidance of growth suppression

For example loss of P53 signalling, or
loss of contact inhibition



(3) Resisting cell death

P53 can signal apoptosis (cell suicide)



(4) Enabling replicative immortality

- telomerases can add telomeres to the cell's DNA and prevent aging.
- unclear: interaction of P53 with telomerase

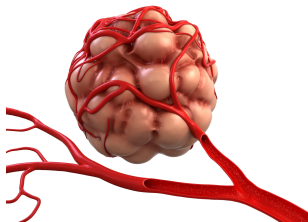


(5) Angiogenesis

Angiogenesis is the sprouting of new blood vessels

- induced by VEGF, TSP-1 signalling
- supplied tumor with nutrients and oxygen
- supplies immune response
- opens doorway for chemical drugs

Modellers distinguish between **vascular** and **avas-**
cular tumors.



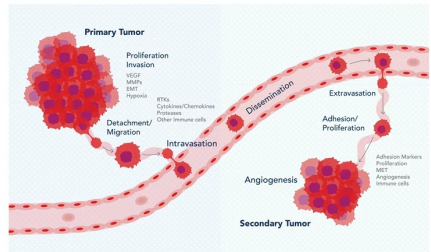
(6) Invasion and Metastasis

The **metastatic cascade**

1. local invasion
2. intravasation
3. dissemination
4. extravasation
5. micrometastasis
6. Metastasis

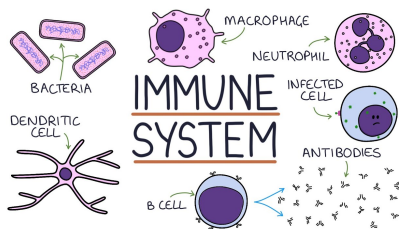
Local invasion is based on the endothelial-mesenchymal transition (EMT)

Reverse transition MET is also possible



(8) Tumor promoting inflammation

- inflammation can contribute to the first six hallmarks, growth factors, proliferative signalling, angiogenesis, metastasis, etc.
- immune response can make everything worse.
- But, Immune response is the major control for all tumors that **we do not see**.



(9) Reprogramming energy metabolism

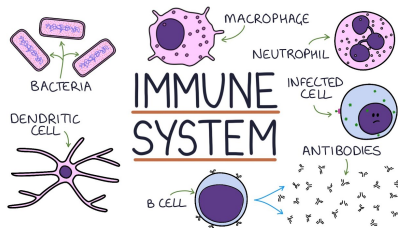
- **normal:** glycolysis and oxidative phosphorylation in the mitochondria, creates 30-32 ATP per reaction.
- **Warburg:** aerobic glycolysis, fermentation, produces 2 ATP, works in acidic conditions.
- Very little modelling in this area.



(10) Avoiding immune destruction

Cancer can reprogram the immune response

- deactivate T-cell response through expression of PD-1.
- reprogram macrophages from M1 to M2
- tumor associate fibroblasts help tumor growth
- platelets protect circulating cancer cell clusters



(11) Phenotypic plasticity

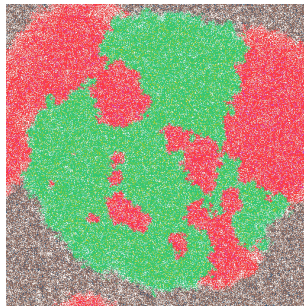
Cells do not follow the normal differentiation process and they use alternative progressions, like

- dedifferentiation
- blocked differentiation
- transdifferentiation



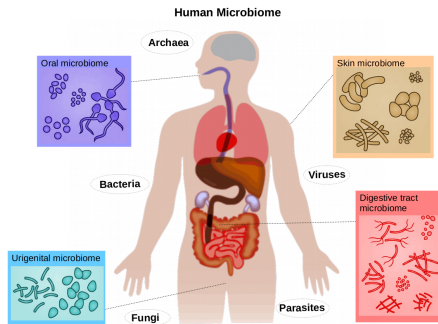
(12) Epigenetic programming

- caused by microenvironment and treatment
- leads to increased heterogeneity
- cancer field effect
- also relevant for stromal cells



(13) Role of the microbiome

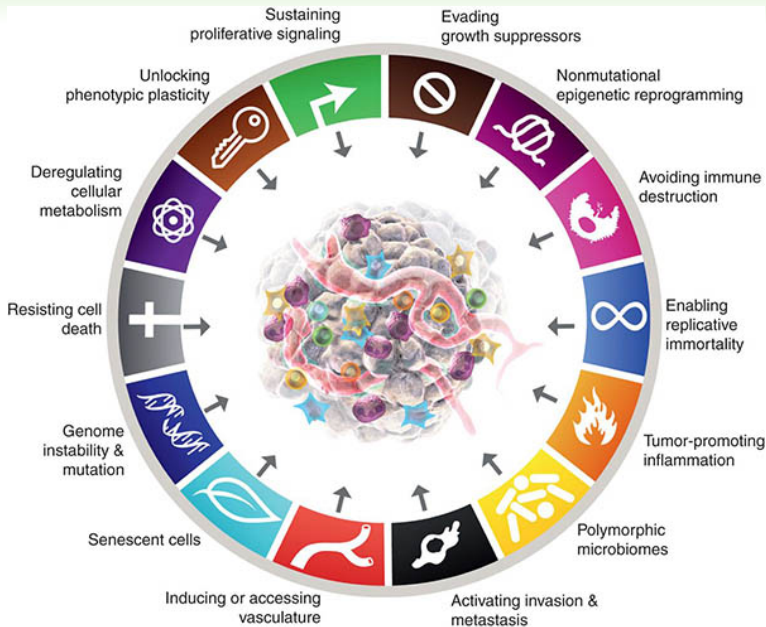
- microbiomes play important roles for the health of the gut, the lung, the skin, the reproductive organs.
- microbiome is likely to have a huge impact on cancer progression
- wide open research area.



(14) Senescent cells

- complex signalling
- avoidance of treatments and resistance
- senescent tumor associated fibroblasts are dangerous cancer initiators.





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- **Metronomic therapy**: repeated low-dose therapy to avoid resistance. Connection to adaptive evolutionary therapies has not been made. [[Ledzewicz](#)]