FROM NATURE TO THE CLINIC-MANAGING SIDE EFFECTS OF RADIOTHERAPY FOR CANCER TREATMENT"

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University of Pennsylvania ,Department of Medicine, Pulmonary, Allergy and Critical Care Division,, Philadelphia, PA, USA

Presentation Outline

- 1. Introduce oxidative lung damage.
- 2. Radiation toxicity of normal lung tissues
- **3. Natural products and their use in mitigating radiation lung damage.**
- 4. Modeling lung toxicity in rodents to study adverse effects of therapeutic radiation
- **5. Designing Effective Radioprotecting agents**



Oxidative Lung Damage



Blood-borne Toxins

Oxidative/Nitrosative Stress and Radiation Lung Damage

The lung is one of the most sensitive tissues to ionizing radiation, and damage to normal lung tissue remains a major obstacle in the treatment of a variety of cancers.

An immediate effect of tissue irradiation is the generation of reactive oxygen (ROS) and nitrogen (RNS) species that can produce oxidative damage to DNA, lipids, and proteins resulting in cell injury or death



Oxidative/Nitrosative Stress and Tissue Damage

Enzymatic and nonenzymatic antioxidants (endogenous tissue defense) detoxify ROS and RNS and minimize damage to biomolecules.

An imbalance between the production of ROS/RNS and antioxidant capacity leads to "oxidative stress" that contributes to the pathogenesis of radiationinduced ussue damage by damaging lipids, protein, and DNA.



RADIATION PNEUMONOPATHY



Radiation Pneumonopathy

Radiation Therapy is commonly used to treat lung cancer and other thoracic malignancies (mesothelioma, breast cancer, esophageal cancer, lymphomas).

Up to 30% of patients irradiated for lung cancer and 10-15% of other thoracic oncology patients develop clinically significant radiation lung injury.

Radiation Damage to the Lung is characterized by: A) Pneumonia-like symptoms (inflammation) B) Fibrotic lung damage (irreversible).

Scoring of Clinical Manifestations of Radiation Damage of Lung Tissues

RTOG/EORTC Late Radiation Morbidity Scoring Schema

ORGAN TISSUE	0	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
LUNG	None	Asymptomatic or mild symptoms (dry cough) Slight radiographic appearances	Moderate symptomatic fibrosis or pneumonitis (severe cough) Low grade fever Patchy radiographic appearances	Severe symptomatic fibrosis or pneumonitis Dense radiographic changes	Severe respiratory insufficiency / Continuous O ₂ / Assisted ventilation	Death directly related to radiation late effects



http://rtog.org/ResearchAssociates/AdverseEventReporting/RTOGEORTCLateRadiationMorbidityScoringSchema.aspx

Current Readings: Improvements in Intensity-Modulated Radiation Therapy for Malignant Pleural Mesothelioma

 Table 1. Comparison of Dosimetric Parameters, Toxicity, and Outcome in Patients Receiving IMRT After

 Extrapleural Pneumonectomy

Reference	Number of Patients	Technique	Dose (Gy)	Boost (Gy)	V5 (%)	V20 (%)	Mean Lung Dose (Gy)	Grade 3 + RP (%)	Grade 5 RP (%)	2-Year OS (%)
Giraud et al ⁹	24	HT	50	4-6	99	4	11	16	8	-
Patel et al ⁸	30	IMRT	45	8-25	56	4	7.2	13	3	
Gomez et al ⁷	86	IMRT	45-50	10			8	12	6	32

Gy, Gray; V5 and V20, dose of lung receiving 5 and 20 Gy, respectively; RP, radiation pneumonitis; OS, overall survival.

Seminars in Thoracic Surgery, 25:245-250, 2013

Incidence of Radiation Pneumonitis (RP) in Relation to V20 and Effects of Concurrent Chemoradiation.



Incidence of Grade 2 radiation pneumonitis as a function of the relative lung volume irradiated to more than 20 Gy (V20) of patients treated with radiotherapy alone (open circles) or with chemo-radiotherapy (closed circles).

Patients receiving chemotherapy had a sharper increase in risk of radiation pneumonitis as the volume of normal lung exposed to 20 Gy increased.



International Journal of Radiation Oncology, Biology, Physics 55(1): 110–115, 2005

Radiation Toxicity to Normal Tissues

The usefulness of thoracic radiotherapy in the treatment of cancer is greatly limited by toxicity of ionizing radiation (radiation pneumonopathy).

Therefore, if we protect "normal" lung parenchyma from radiation injury, we will increase the ability to deliver tumoricidal radiotherapy doses.

Pharmacologic Treatment of Radiation Pneumonopathy

Despite active research in the development of tissue radioprotectors, there is no known effective pharmacologic therapy for the prevention of radiation pneumonopathy.

Steroids are used to treat <u>Acute</u> radiation pneumonitis, but do not alter risk of developing long term, <u>Chronic</u>, fibrotic complications



Use of Botanicals And Dietary Supplements Derived From Natural Substances

An expanding body of preclinical evidence suggests that a number of botanicals have the potential to impact a variety of human diseases including lung disease.

Therefore, non-toxic natural agents could be useful either alone or in combination with conventional therapeutics for the prevention or therapy of oxidative lung disease.



Usefulness of Dietary Supplements

Annual sale of Medicinal Herbs in the US is > 3 Billion \$\$\$

More than 60 million consumers in the U.S. take herbal remedies. More physicians are recommending herbal medicines and some health insurance plans offer coverage for alternative health treatments such as herbal remedies.

In 1993 the NIH opened the National Center for Complementary and Alternative Medicine (NCCAM), now NCCIH, which along with the Office of Dietary Supplements (ODS) aim to promote the safety, effectiveness, and biological action of botanical products.



Complementary & Integrative Health Approaches

Natural Products

This group includes a variety of products, such as herbs (also known as botanicals), vitamins and minerals, and probiotics. They are widely marketed, readily available to consumers, and often sold as **dietary supplements**.

Mind and Body Practices

Mind and body practices include a large and diverse group of procedures or techniques administered or taught by a trained practitioner or teacher.

Other Complementary Health Approaches

The practices of **traditional healers**, **Ayurvedic medicine** from India, **traditional Chinese medicine**, **homeopathy**, and **naturopathy**.



nccam.nih.gov

The Ten Most Common Complementary Health Approaches Among Adults (2007)





Barnes et al, 2007; CDC National Health Statistics Report#12, 2008

Spices

Sesame seed (3)

(Sesamum Indicum)

Poppy seed (8)





Asian ginger (1) (Alpinia galanga)



Fenugreek (7) (Capsicum annum)(Trigonella foenum graecum)(Papaver somniferum)

(Foeniculum vulgare)





Onion seed (11) (Nigella sativa)

Holy basil (12) (Ocimum sanctum)



Ayurvedic Medicine



(Aloe vera)



Veldt-grape (2) (Cissus quadrangularis)

Picroliv (3) (Picrorhiza kurroa)







Cloves (5)

(Eugenia caryophyllu)

Onion (10)

(Alllom ceps)

Turmeric (4)

(Curcuma longa)

Gamboge (9)

(Garcinla hanburyl)

Beauty berry (7) Pink trumpet tree (8) Bloodroot (9) Guggulu (10) (Call/carps macrophylla) (Tabebula avellanedae) (Sanguinaria canadensis) (Commiphora mukuf)



Gullet et. al, 2010

Boswellia (7)

(Boswellia serrata)



False pepper (11) Rohitukine (12) Ashwagandha (13) (Embalia ribes) (Dysoxytum binectariferum) (Withania somnifera) (Polygonum tinctorium) (Zingiber zerumbet)



Pinecone ginger (15)



Cauliflower (1)

(Brassica oleracea)



Mullberry (2)

(Morus nigra)



Artichoke (3)

(Cynara cardunculus)

Fruits & Vegetables



Soybean (5) (Glycine max)

Grapes (4)

(Vitis vinifera)

Traditional Chinese Medicine



Goldenseal (2)

(Hydrastis canadensis)





Smoke tree (4) (Cotinus coggygria)





Others





Elephant's foot (4) Hop (5)

(Anacardium occidentale)(Ansculus hippocastanum) (Elaeis guineensis) (Elephantopus scaber Linn) (Humulus lupulus L.)

Cashew nut (1)





Tropical rose mallow (8) Oleander (9)



























(Rhus vernic/flua)



Gullet et. al, 2010

Molecular Pathways Affected by Common Botanicals



Gullet et. al, 2010

Drug Development From Bioactive Dietary Agents







Flaxseed: "an ancient remedy in a modern world"

Hippocrates, the Greek physician and philosopher, by 650 B.C. wrote about the use of flax.



The father of modern medicine, Hippocrates, the Greek physician, by 650 B.C. wrote about the use of flax to relieve inflammation of mucous membrane and for the relief of abdominal pains and diarrhea.

By the 8th Century A.D. Charlemagne one the greatest medieval kings, considered flax so important that for the health of his subjects he passed laws and regulation requiring its consumption.



By the 8th Century A.D. Charlemagne one the greatest medieval kings, considered flax so important that for the health of his subjects he passed laws and regulation requiring its consumption.



Mahatma Ghandi said that when flaxseed was added to people's diet their health improved.



Flaxseed - a Natural Product





Flaxseed Lignan Structure





Our Group Has Identified Flaxseed As A Potent Inhibitor Of Oxidative Lung Injury In A Number Of Animal Models



Protective Properties of Flaxseed in Preclinical Models of Cancer & Acute/Chronic Lung Damage

FLAXSEED (wholegrain) & SDG

THORACIC RADIATION PNEUMONOPATHY

HYPEROXIC LUNG DAMAGE

ISCHEMIA-REPERFUSION LUNG DAMAGE

ACID ASPIRATION-INDUCED LUNG DAMAGE

ASBESTOS-INDUCED MESOTHELIOMA

TOBACCO CARCINOGEN-INDUCED LUNG CANCER



Direct Free Radical Scavenging by Flaxseed Lignan-Antioxidant action in γ-irradiated lung Endothelial cells







Lee et.al, 2009

Genetic profiling of flaxseed in lung (30,000 gene array of entire mouse genome)

6.8% of all mouse genes in lung tissues are significantly modified by flaxseed



Pulmonary Gene Expression Profiling of Genes With >1.5x fold Change in Individual Flax-fed Mice as Compared to Mean of Control



Red indicates up-regulation, green down-regulation

Dukes et.al, 2012

HYPOTHESIS

Given the direct free radical scavenging properties of the flaxseed lignans and the robust boost of antioxidant tissue defenses,

We Hypothesized, That Dietary Flaxseed and Will Ameliorate Oxidative Acute and Chronic Lung Damage such as that resulting from Radiation Exposure, Modeled In Mice

Mouse Model of Thoracic Radiation Damage



Mouse Radiographs





(XRT=X-Ray Treatment)

Cephalic margin

Caudal margin

Dietary Flaxseed Ameliorates Radiation-Induced Pneumonitis (Inflammation) in Mice



Lee et.al, 2009

Antifibrotic Role of Flaxseed

Flaxseed Decreased Radiation-Induced Collagen Deposition in Lungs



Trichrome Blue Staining for Collagen (Marker for Lung Fibrosis)

OH-Proline

Content

<u>Fibrotic Index</u> (Pathology)

Cancer Biology and Therapy, 2009

Flaxseed Does Not Impair Tumor Eradication By Radiation





Christofidou-Solomidou et.al., Radiation Research, 2012

Summary

Dietary Flaxseed: Improves Survival Prevents Radiation-induced Oxidative Tissue Injury Pneumonitis Inflammation Lung Fibrosis Cytokine Secretion Does NOT protect Tumor





DIETARY FLAXSEED IS WELL TOLERATED BY HEALTHY VOLUNTEERS AND CYSTIC FIBROSIS PATIENTS



Dietary Flaxseed (40g daily) Supplementation



Plasma Lignan Concentration Increases after Flaxseed Consumption

Future Plans: Determine if Flaxseed Supplementation Modulates systemic inflammation and disease exacerbations in CF patients



Turowski et al, in review

ROS/Inflammation in Mesothelioma:

The working paradigm of mesothelioma carcinogenesis is that asbestos induces a state of chronic inflammation in the pleura that ultimately leads to mutagenesis and tumor formation (especially in those with a genetic predisposition).

<u>Key roles of</u>: HMGB1, TNFα, IL-1β AND REACTIVE OXYGEN SPECIES





Hypothesis

Inhibition of inflammation and/or ROS will delay or prevent the induction of asbestos-induced mesothelioma.

We want to test this using Flaxseed and the main lignan found in Flaxseed: the SDG



LEGAL NEWSLINE Legal Newsline Legal Journal Monday, December 1, 2014 Last Update: 12/01/14 03:15 pm	PUBLIC RECORDS SEARCH	t use inclusive of within fibe days prove restory to REASDEY & MATTISION CO. Regeneric Sociliance Coverings Magnesition Carlsonatic, Alkalitha, Brown-Callebine, See, TTI zahl, Steer, N. W., Washington, D. C.
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Home » News » Pennsylvania »	Email to Friend	Ambler, Penna. If it's made of ASBESTOS we've got it !

University of Pennsylvania receives \$10M to study Superfund asbestos site

July 11, 2014 9:52 AM By HEATHER ISRINGHAUSEN GVILLO

PHILADELPHIA (Legal Newsline) – Researchers with the U million grant to study asbestos and how the toxic fiber leads America's 10 Superfund sites.

The grant, which came from the National Institute of Environ to help researchers from the school's Center of Excellence in Perelman School of Medicine to study asbestos, mesotheliom next four years.

University of Pennsylvania researchers receive \$10 million to study asbestos in Ambler

Published: Tuesday, June 24, 2014

By Eric Devlin edevlin@montgomerynews.com

The University of Pennsylvania recently announced it has received a \$10 million grant from the National Institute of Environmental Health Sciences to study asbestos and its impact on the Ambler community.

The grant will allow researchers from Penn's Center of Excellence in Environmental Toxicology to, over the next four years, study asbestos, the rare asbestos-related cancer, mesothelioma, and other asbestos-related diseases, according to a press release. Researchers from the Abramson Cancer Center, the Penn School of Arts and Sciences and Fox Chase Cancer Center are also lead investigatore on the grant.



A 2010 aerial view of the BoRit asbestos site following two phases of removal action. Photo by: salbocutti.com

View and purchase photos



The BoRit site where research will take place, located in Ambler Borough, Upper Dublin and Whitpain townships between Butler Avenue, North Maple Street and the Wissahickol Creek, was placed on the Environmental Protection Agency's Superfund National Priorities List in April 2009.

Asbestos Contamination-Ambler PA



"Asbestos fate, exposure, remediation, and adverse health effects"

- 1. Can we remediate asbestos without moving it from the original disposal site?
- 2. What do we know about the fate and transport of asbestos in the environment by water and air?
- **3.** What do we know about the exposure pathways that were responsible for the mesothelioma cluster in Ambler? And why is the incidence higher in women?
- 4. Is susceptibility to mesothelioma genetic?

5.Can asbestos-related disease be prevented?

6. Is there a blood test to determine whether a person will get asbestos-related disease?



USEFULNESS OF FLAXSEED TO PREVENT MM FROMASBESTOS EXPOSURE



Role of Flaxseed and SDG in Preventing Asbestos-Induced Mesothelioma in Mice



We hypothesize that SDG or flaxseed diets will decreased asbestos induced ROS/inflammation leading to: 1) ROS, 2) decreased cytokines, 3) decreased HMGB1, 4) less tumorigenic foci, and 5) less tumors

EXPOSING CELLS TO ASBESTOS



- 1. ROS levels using H_2DCFDA
- 2. Supernatant \rightarrow Cytokine (TNF- α ; IL-1 β)
- 3. Cells \rightarrow Inflammasome activation
- 4. MDA (Lipid Peroxidation)
- 5. Nitrite/Nitrate levels



SDG given to Macrophages Post Asbestos-Exposure Decreases Oxidative Stress and Inflammatory Cytokines



Summary of Findings

- 1. SDG blocks asbestos-induced ROS macrophages.
- 2. SDG blocks inflammatory cytokine secretion by mouse peritoneal macrophages exposed to asbestos
- 3. SDG blocks oxidative (lipid peroxidation) and nitrosative stress (nitrite levels) in mouse peritoneal macrophages exposed to asbestos

Findings from cell experiments justify pre-clinical experimentation to determine the usefulness of flaxseed and its lignan SDG in blunting chronic inflammation and ultimately malignancy due to asbestos exposure



Testing Flaxseed and SDG in Asbestos-Induced Malignant Mesothelioma

ASBESTOS FIBERS



Using 2 models of mice genetically predisposed to develop mesothelioma after asbestos exposure, we will: Evaluate the acute effects of Flaxseed and SDG on asbestos exposed mice; test whether Flaxseed and SDG inhibits the development of tumors in genetic models of accelerated, asbestos induced MM.



Chemoprevention of Asbestos-Induced Malignant Mesothelioma Using Dietary Flaxseed

Data from this work will provide important evidence for the usefulness of this bioactive natural product in blunting cancer development from asbestos exposure and provide insight in the mechanisms involved.

If our studies show efficacy with safety, our long-term goal would be the evaluation of Flaxseed and SDG as chemopreventive agents for mesothelioma in exposed populations.



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