



# 'Near-patient' models for the assessment of tumor aggressiveness & therapy response

*G.van\_der\_Pluijm@lumc.nl*

Gabri van der Pluijm

Leiden University Medical Centre Leiden,  
dept. Urology, The Netherlands

# Outline



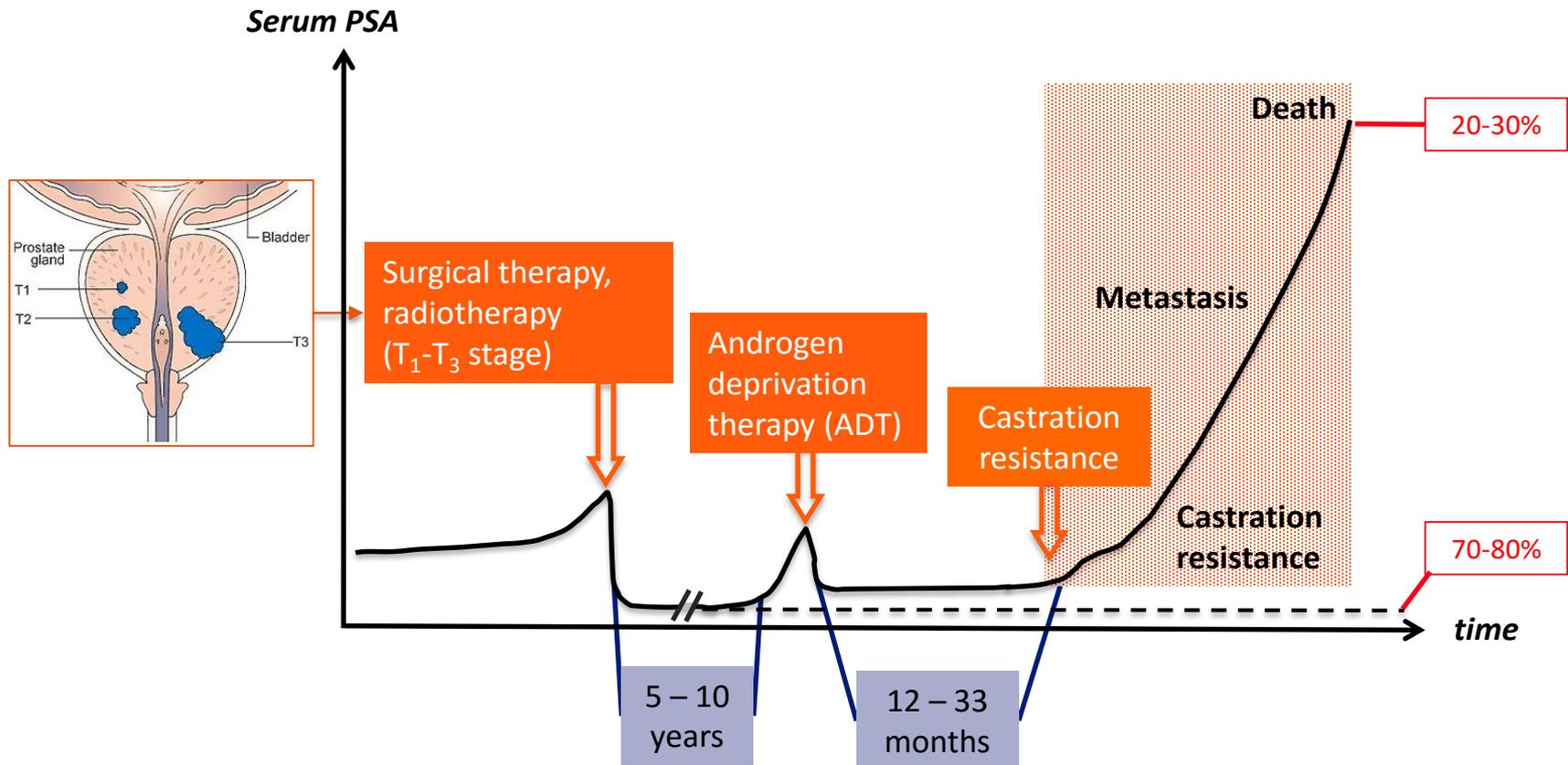
- Clinical problem of urological cancers
- ‘Near-patient” disease models

*Tumor progression (functional studies)*

*Development of novel therapy*

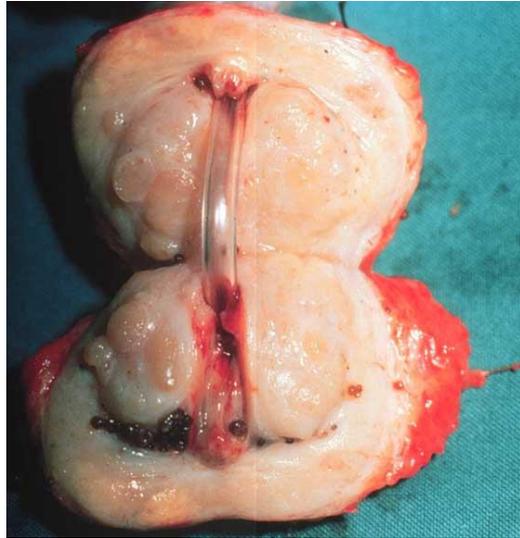
# Clinical Problem of Prostate Cancer

- most frequent cancer in men
- second leading cause of cancer death in males
- after prostatectomy or radiotherapy of the primary tumor, a subset of T1-T3 “organ confined” cancers progress towards incurable metastasis



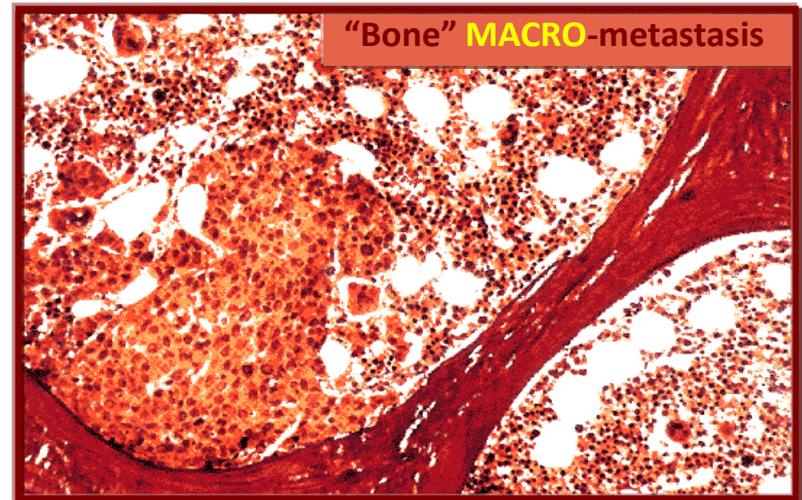
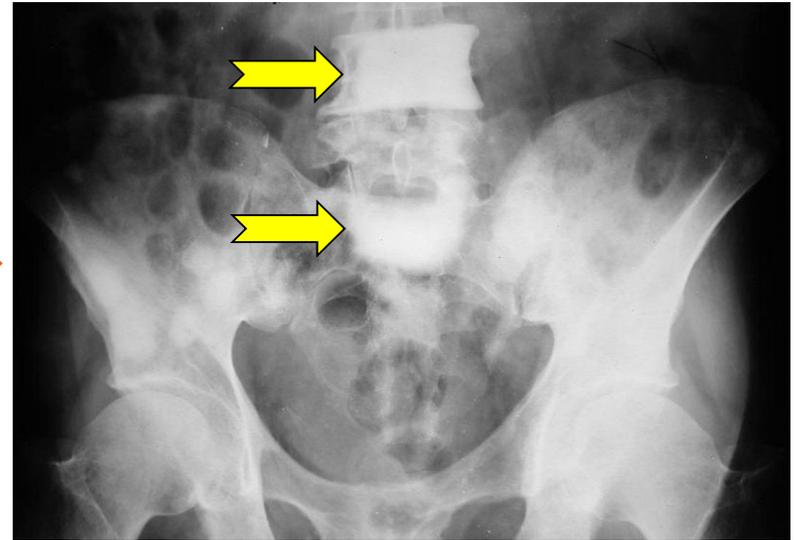
# The problem!

Stage: T1-3



20-30%

Bone metastases

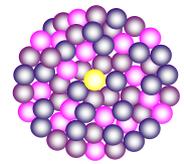


Mechanism(s) ? Novel Therapy?

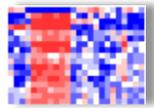


**Cancer Cells**

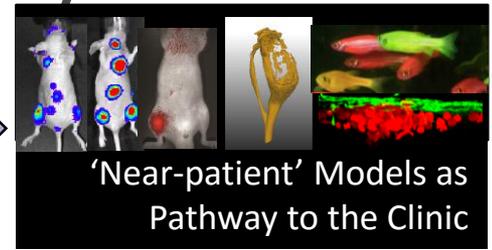
**Clinical Problem**  
Lethal Metastasis (MRD)  
Therapy Resistance  
Intra-Tumor Heterogeneity



Molecular Profiling



Functional Studies



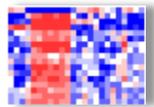
'Near-patient' Models as Pathway to the Clinic

**BioMedical Imaging**  
-Novel Imaging Agents  
-Improved Detection of MRD  
-Companion diagnostics

**Supportive Stroma**

- Primary tumor
- Metastasis

Molecular Profiling

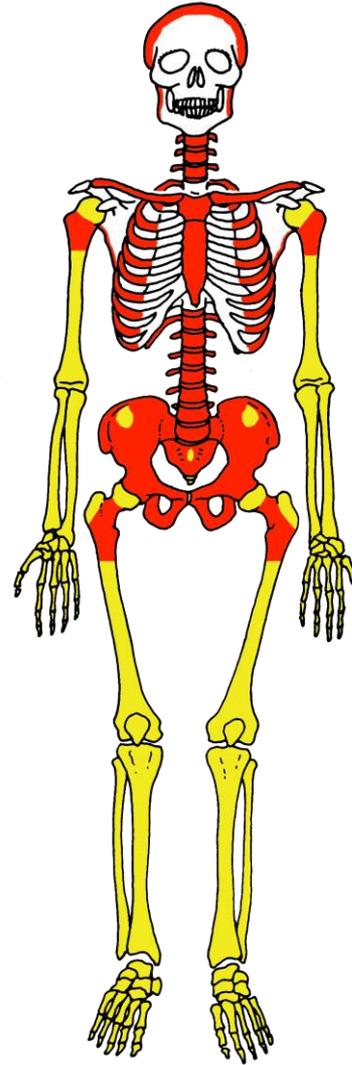


→ Novel Therapy  
→ Drug Respositioning  
Nanodrug Delivery

# 'Anatomical' osteotropisms



Bone Metastases



Red marrow distribution

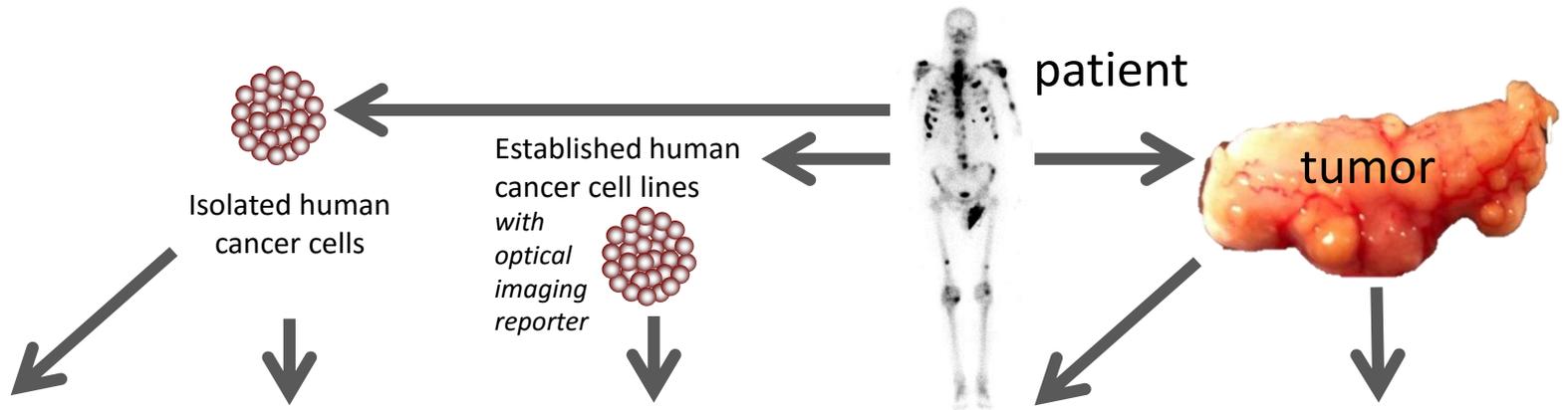
# Major Aim

- 1) better identify newly diagnosed cancer patients with ostensible localized disease that are at risk of disease progression.
- 2) select novel, effective inhibitors of perturbed, key pathways and predict an individualised therapy response in patients (personalised medicine).



*'Near-patient' prostate cancer models for the assessment of disease prognosis and therapy response. (Period 2015-2021)*

# 'Near-patient' models

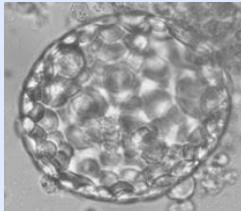


**IN VIVO**



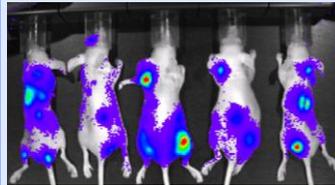
**Zebrafish**

**IN VITRO**



**2D Cultures  
Spheroid/Organoid**

**IN VIVO**



**Xenografting in  
immunodeficient  
mice**

**IN VIVO**



**Patient-derived  
Xenografting  
(PDX)**

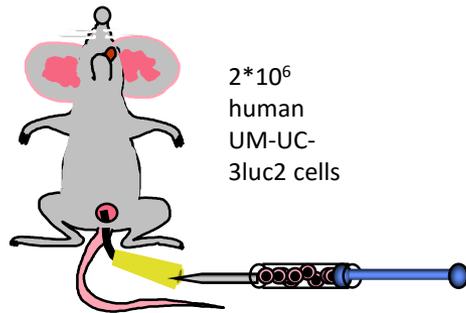
**EX VIVO**



**Tumor Slice  
cultures**

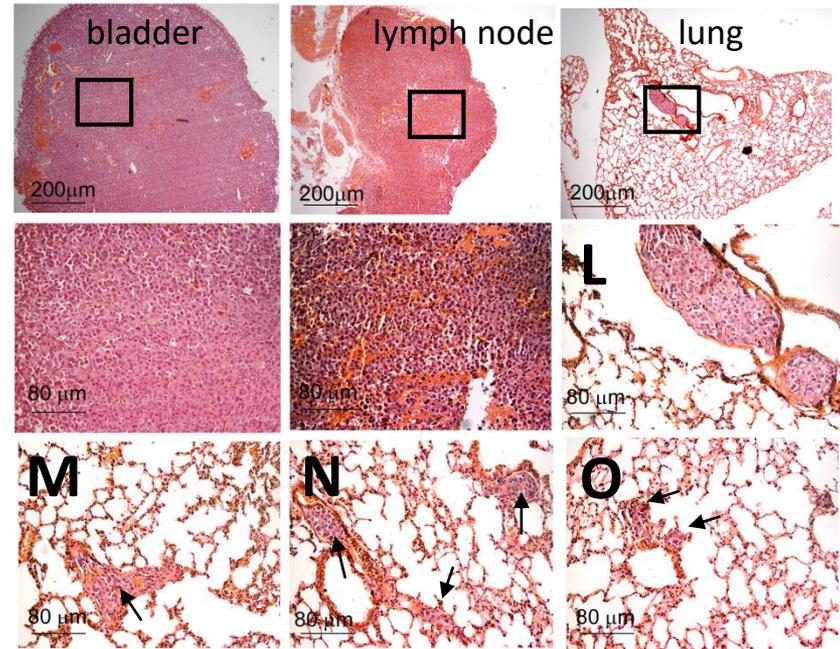
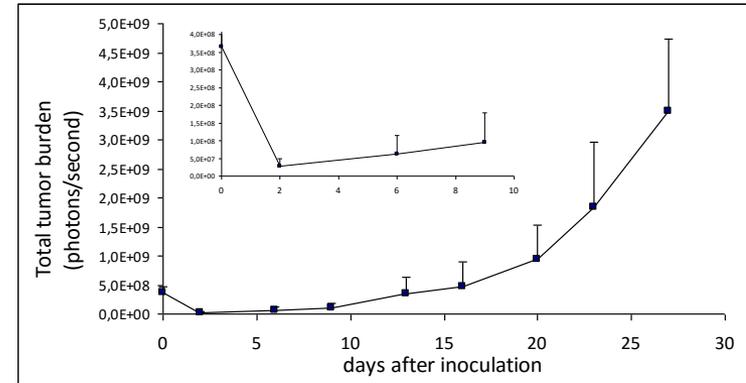
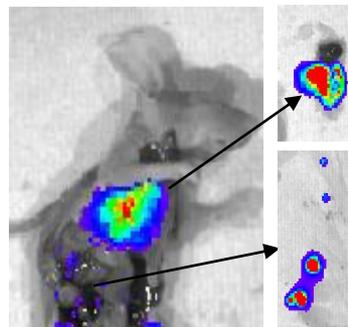
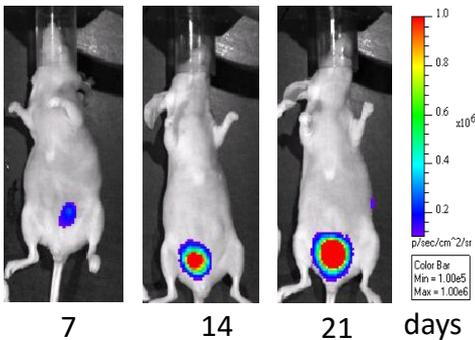
# Bladder cancer orthotopic *in vivo* xenograft model

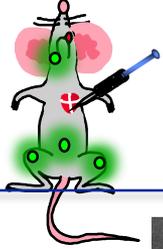
Preclinical model using bioluminescent imaging of orthotopically inoculated UM-UC-3luc2 cells



$2 * 10^6$   
human  
UM-UC-  
3luc2 cells

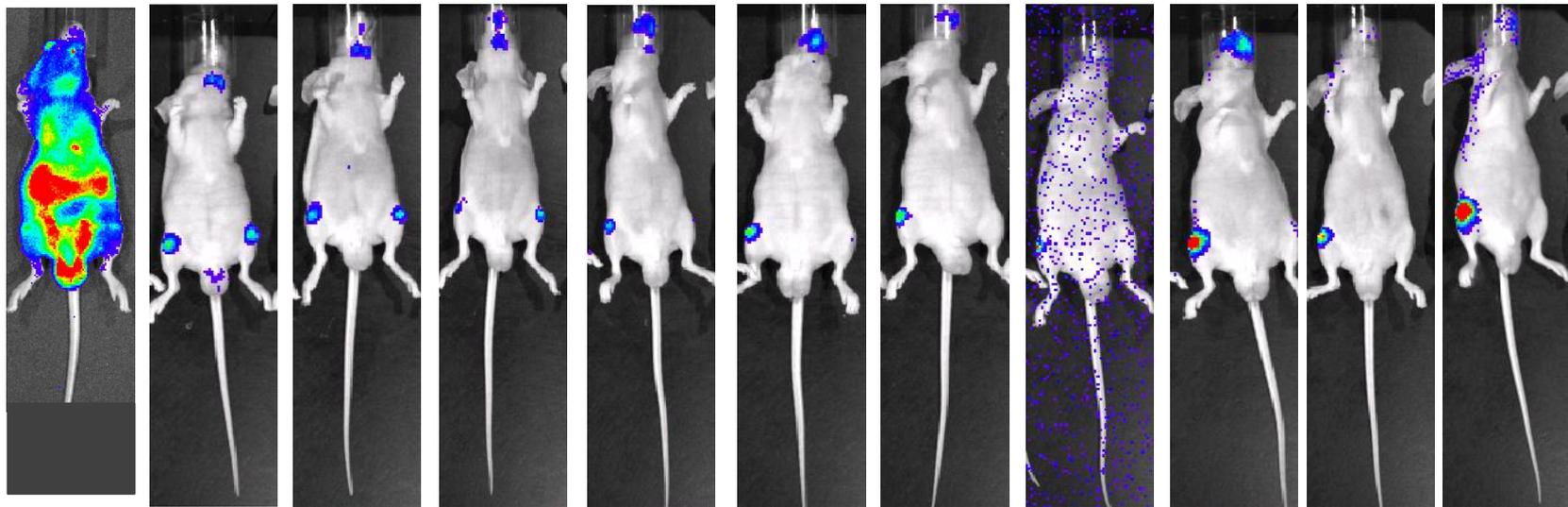
Nude BalbC mouse



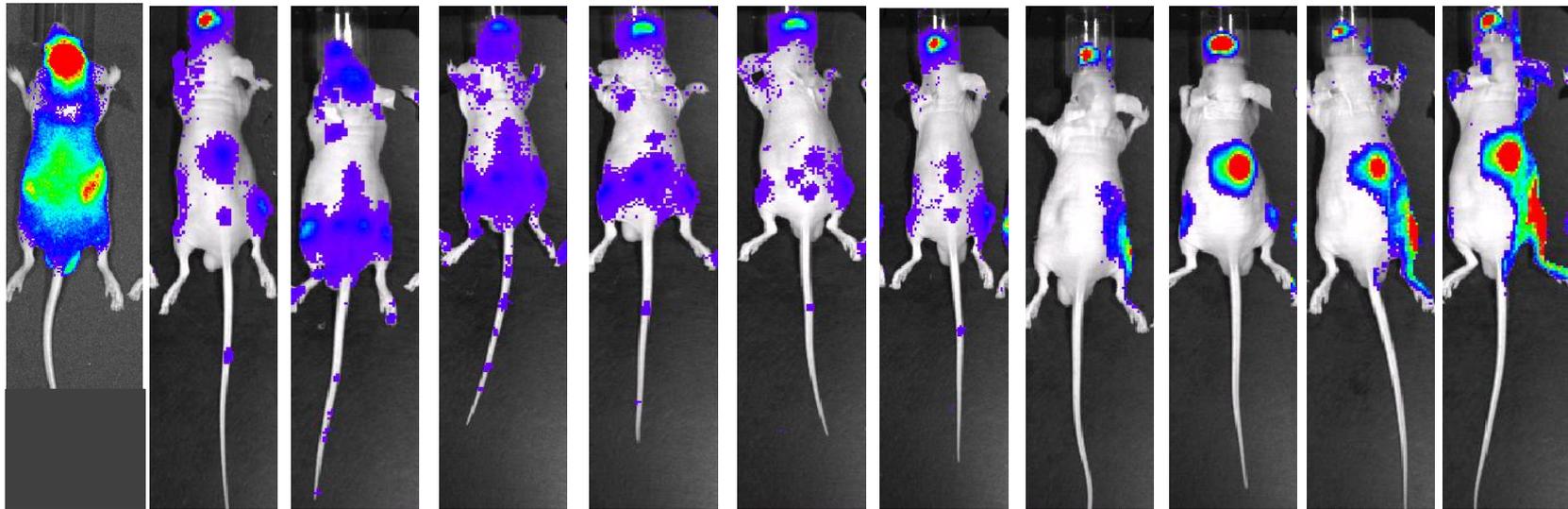


# Kinetics of Bone Metastasis (PC-3M-Pro4luc2)

ventral



dorsal



0

1

2

7

10

14

17

21

24

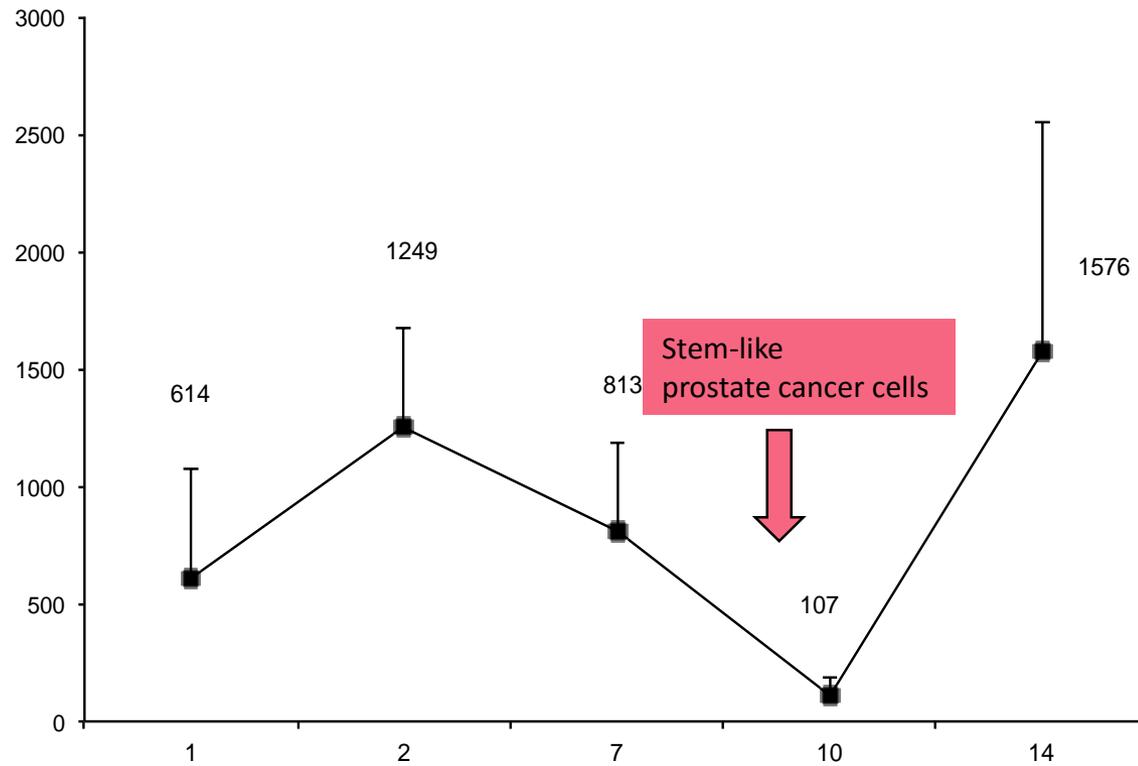
28

31

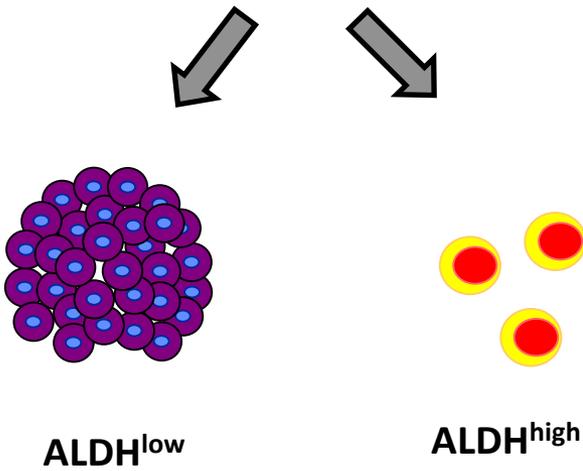
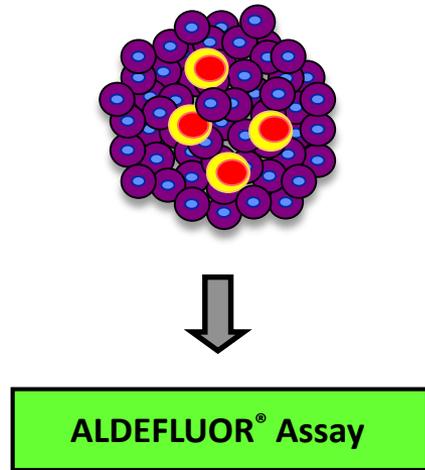


# Seed & Soil in real time

## Cell Number in Tibial Bone Metastasis



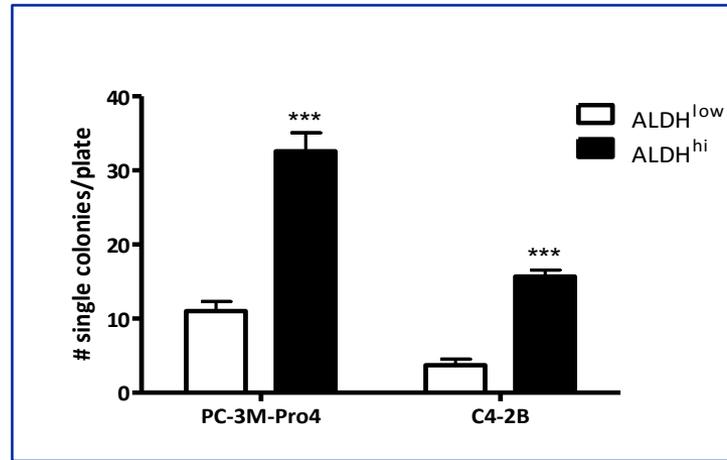
# ALDH<sup>high</sup> subpopulation & cancer stem/progenitors



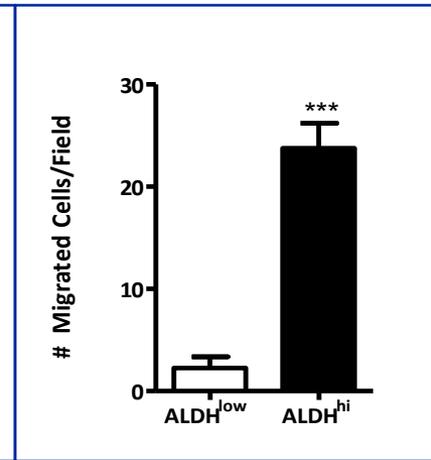
Differentiated Epithelial Phenotype

Mesenchymal Phenotype Stem/progenitor cells ( $\alpha 2^{\text{hi}}$ ,  $\text{CD44}^{\text{hi}}$ ,  $\alpha \text{v}^{\text{hi}}$ ,  $\text{CK5}^+$ )

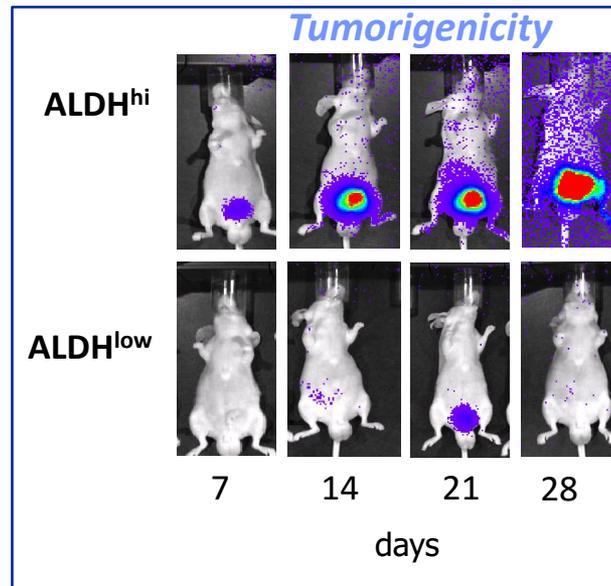
## Clonogenicity



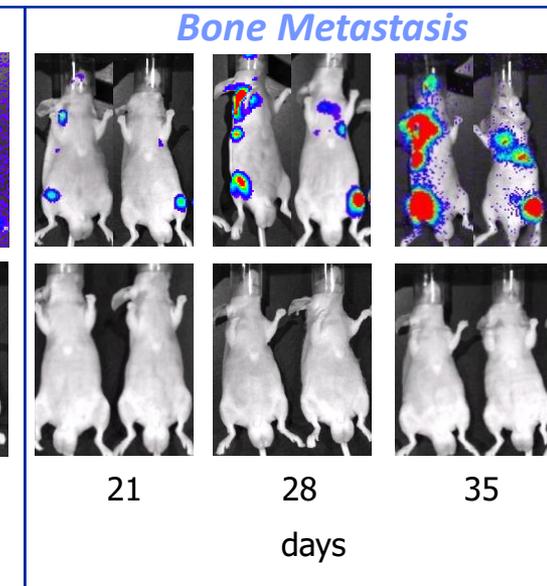
## Migration



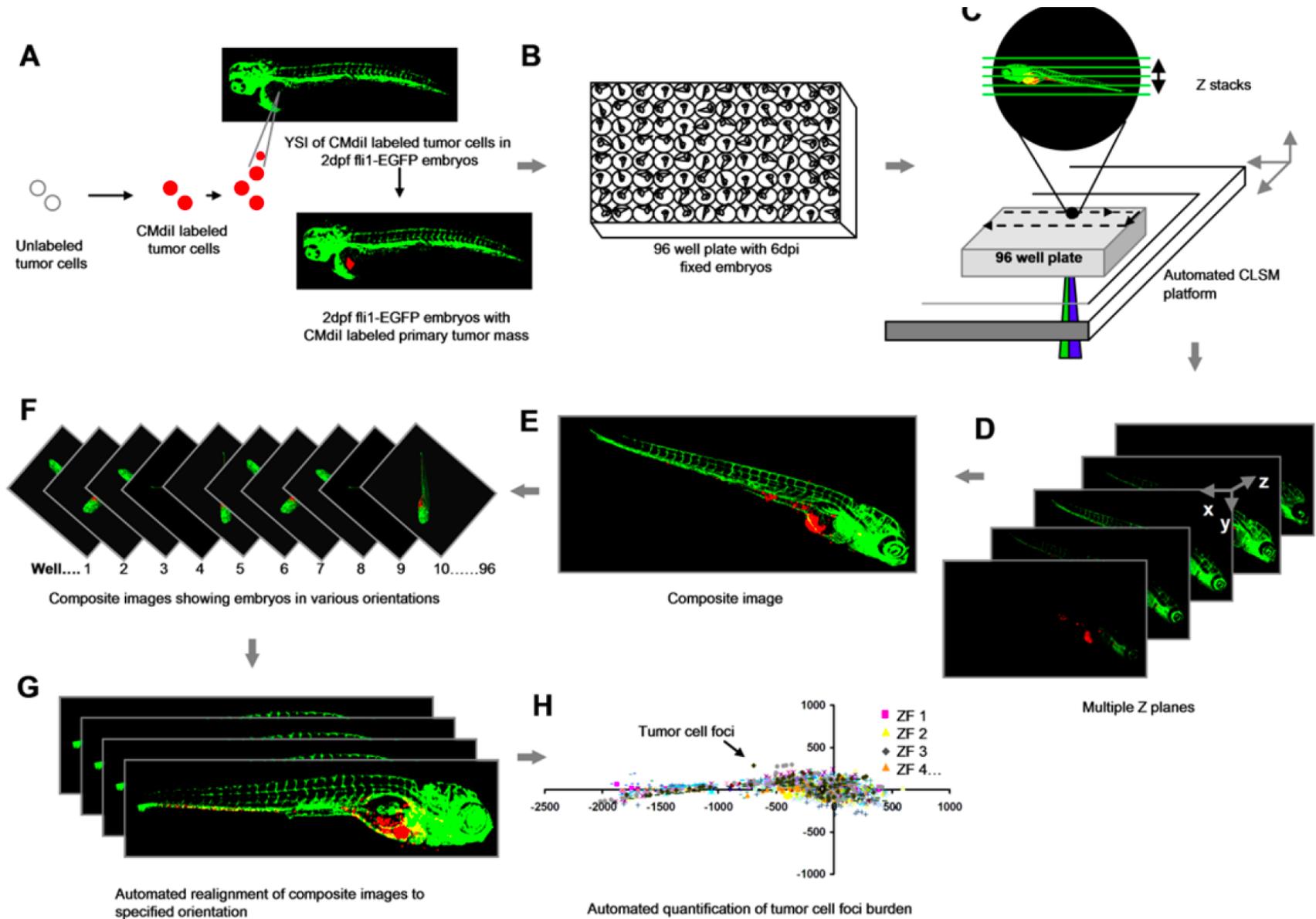
## Tumorigenicity



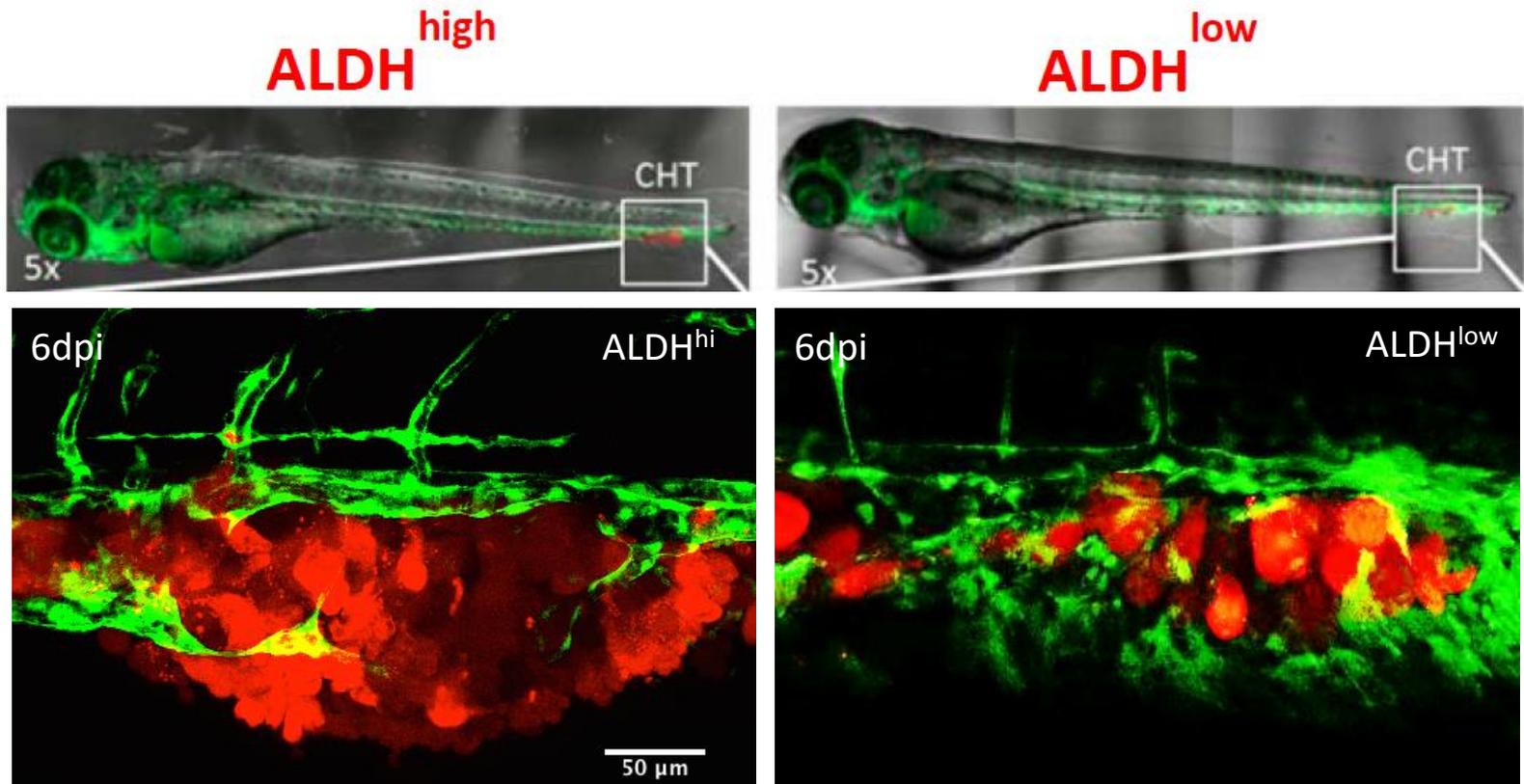
## Bone Metastasis



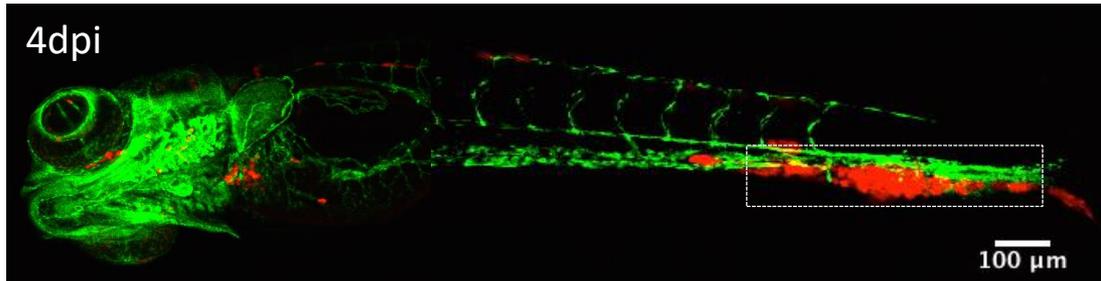
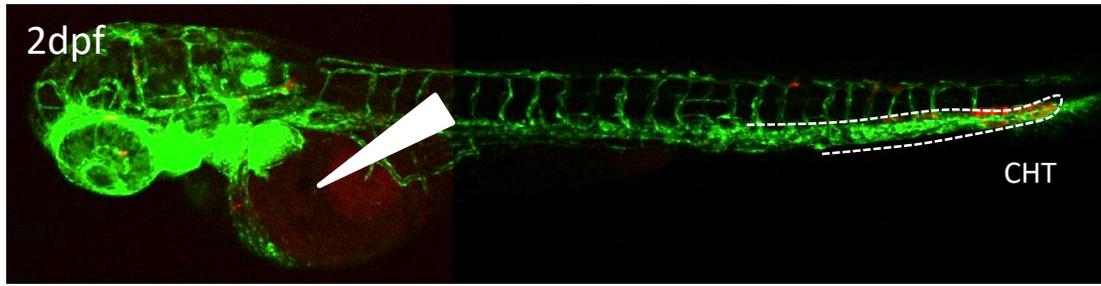
# Strategy for quantification of tumor dissemination in zebrafish



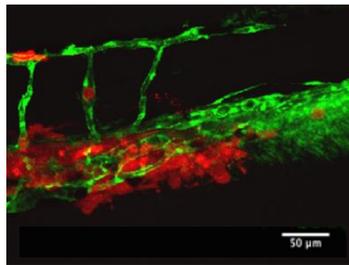
# Prostate Cancer Stem-like Cells are identified as Metastasis-initiating Cells in the Zebrafish Model



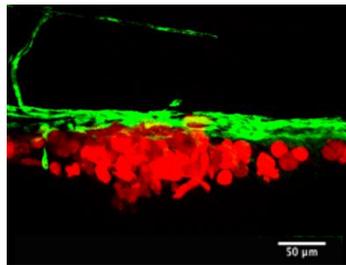
# human cancer xenograft model for studying metastatic onset



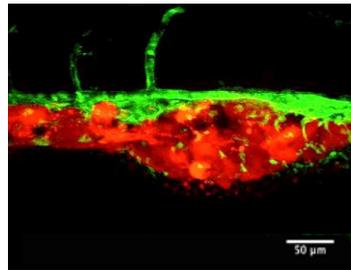
MDA-MB-231/B1



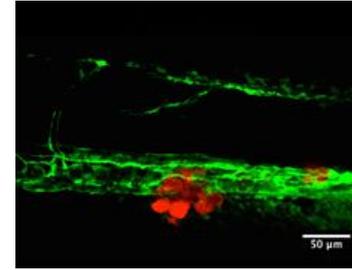
UMUC-3



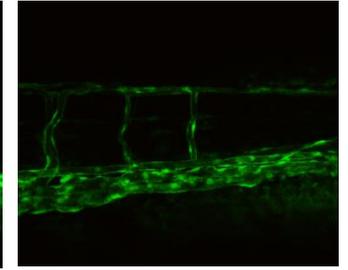
PC-3M-Pro4



Prostate cancer



Bladder cancer



*invasive cancers*

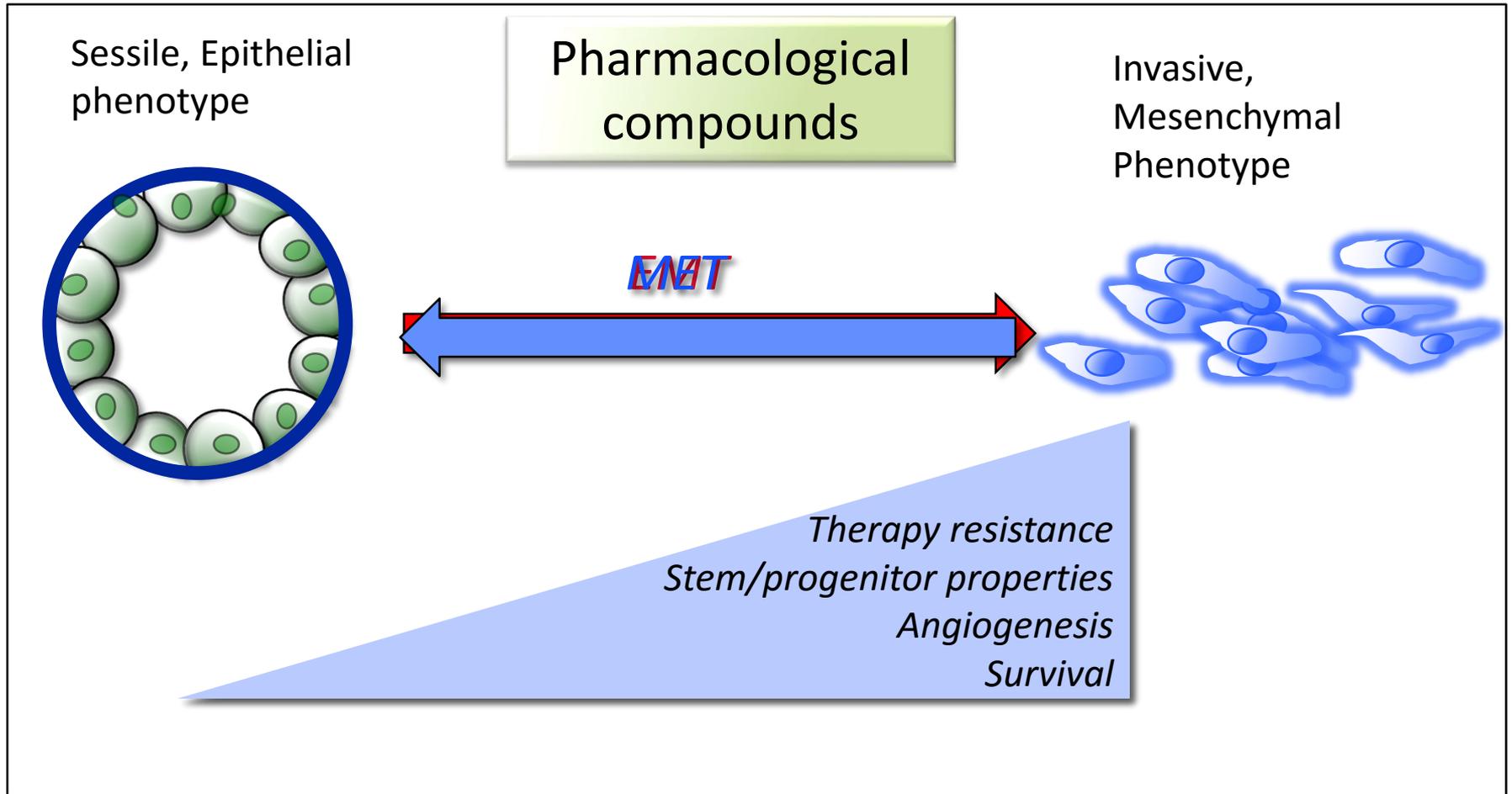
*less aggressive cancers*

# Development of Novel Therapy for Urological Malignancies



- Drug discovery & development
- Drug repositioning/repurposing
- Nanodrug delivery
- Targeting chemotherapy resistance
- Companion diagnostics

# Oncological Epithelial Plasticity



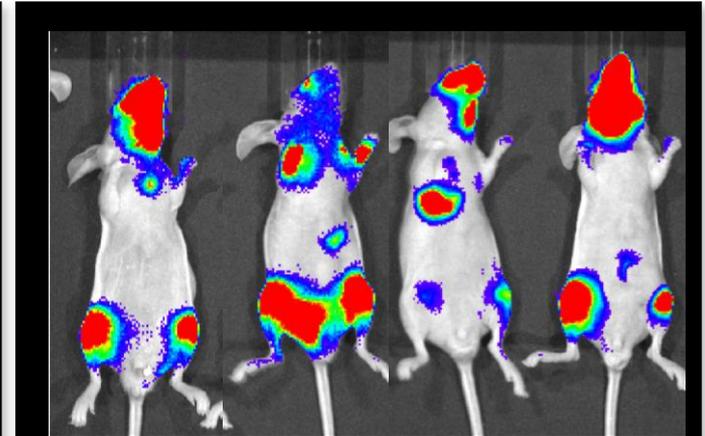
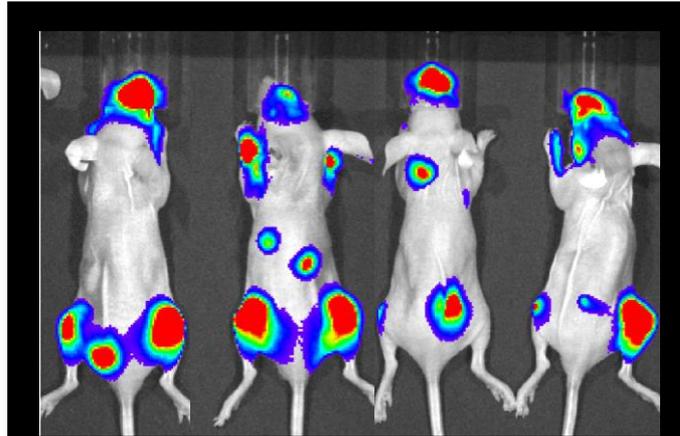
# OCD155 inhibits Bone Metastasis in Prostate Cancer

(PC-3M-Pro4 luciferase expressing, day 35)

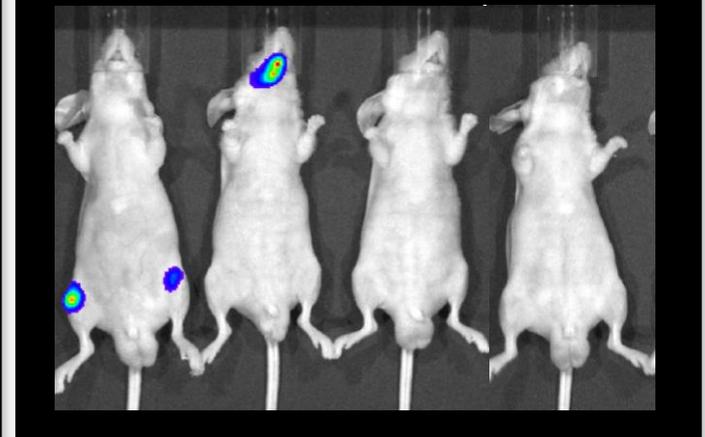
dorsal

ventral

Vehicle



OCD155  
(5mg/kg/d)



# Drug Repurposing/Repositioning

Safety profile and clinical properties are well studied and understood,

Considerably reduction of failure in later stages of clinical development

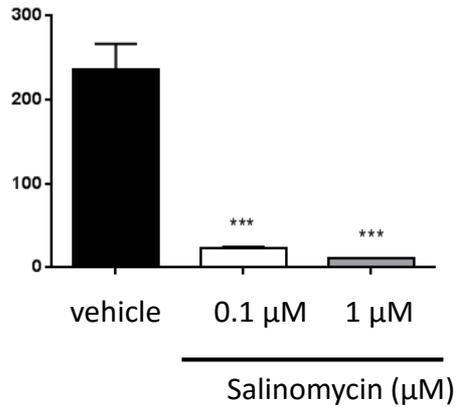
*Antibiotic (Salinomycin)*

*Anti-depressant (Penfluoridol)*

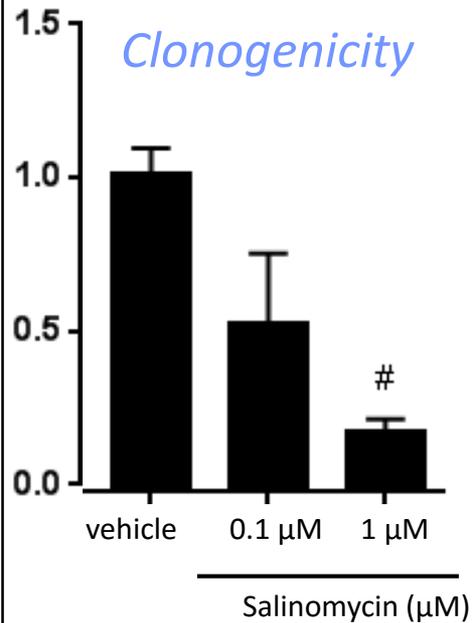
# Anti-tumorigenic & anti-metastatic properties of salinomycin

## *In vitro*

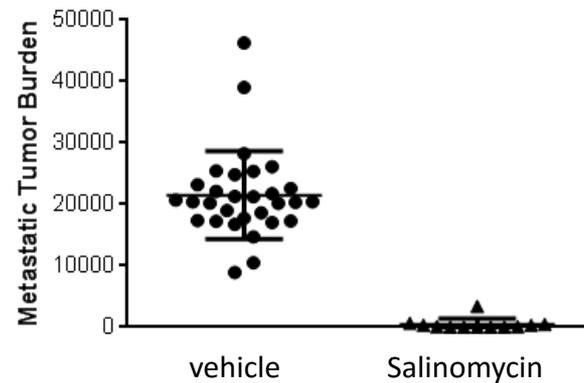
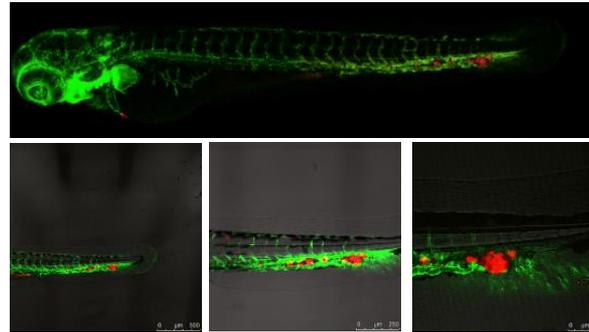
### Migration



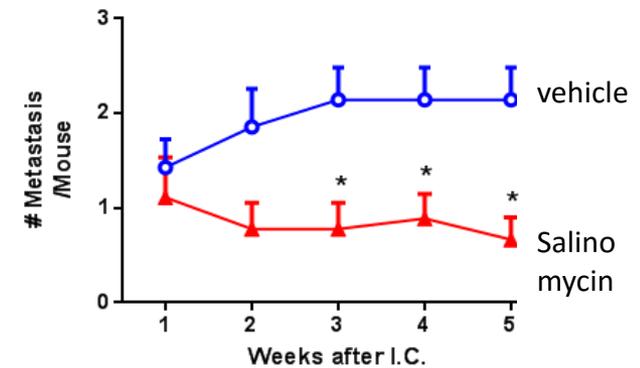
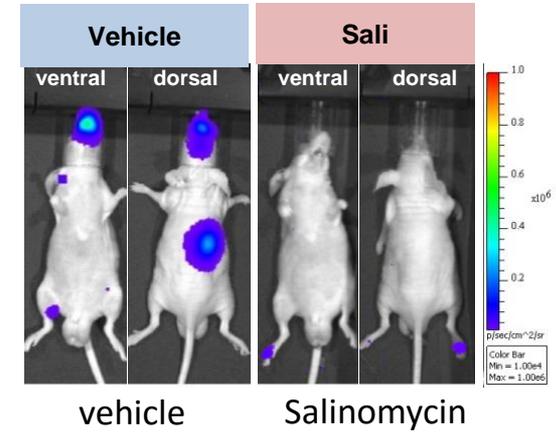
### Clonogenicity



## *Zebrafish model*



## *Preclinical mouse model*

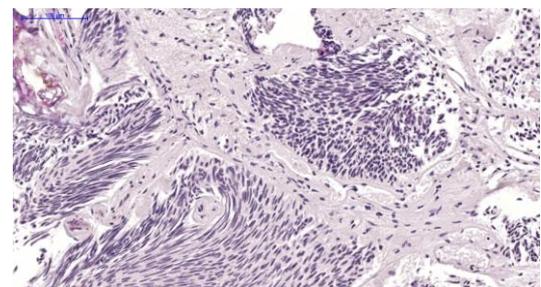
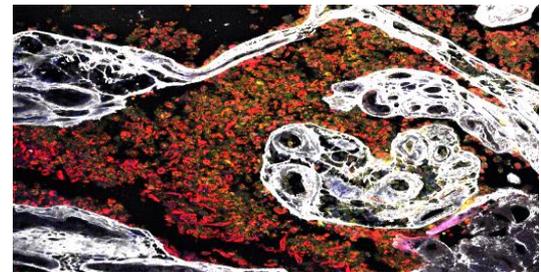
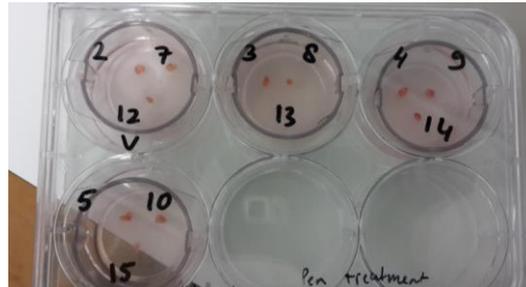
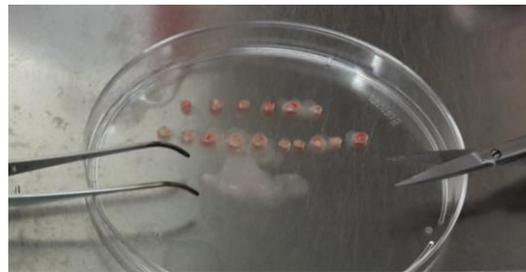


# patient-tumor slices cultured *ex vivo*

Patient-derived  
Tumor material

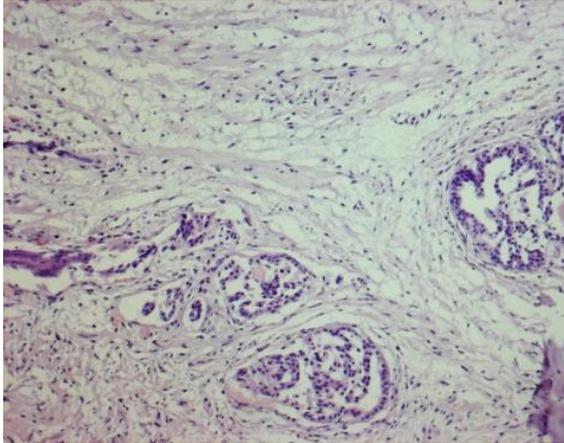
Treat tumor pieces  
with compound

Fix, embed, cut,  
stain & analyze,

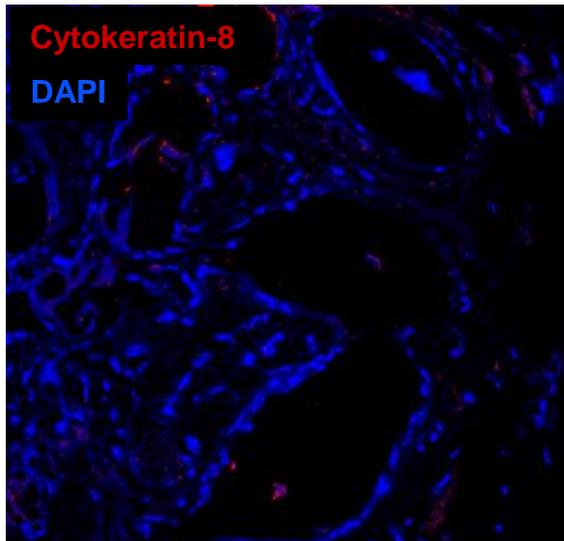
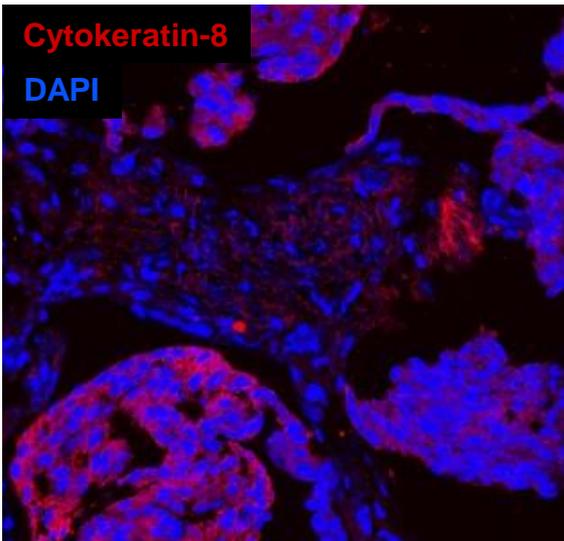
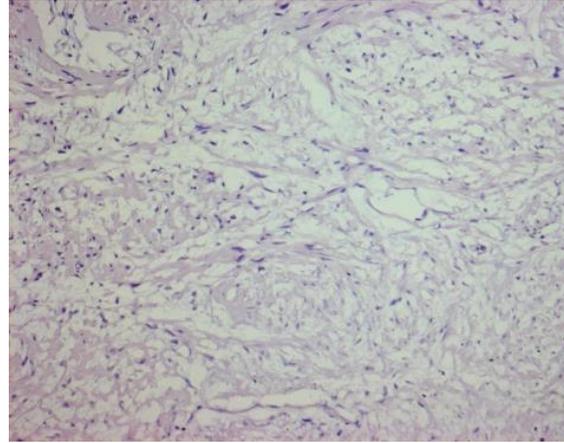


# Patient-derived prostate cancer slices cultured ex vivo

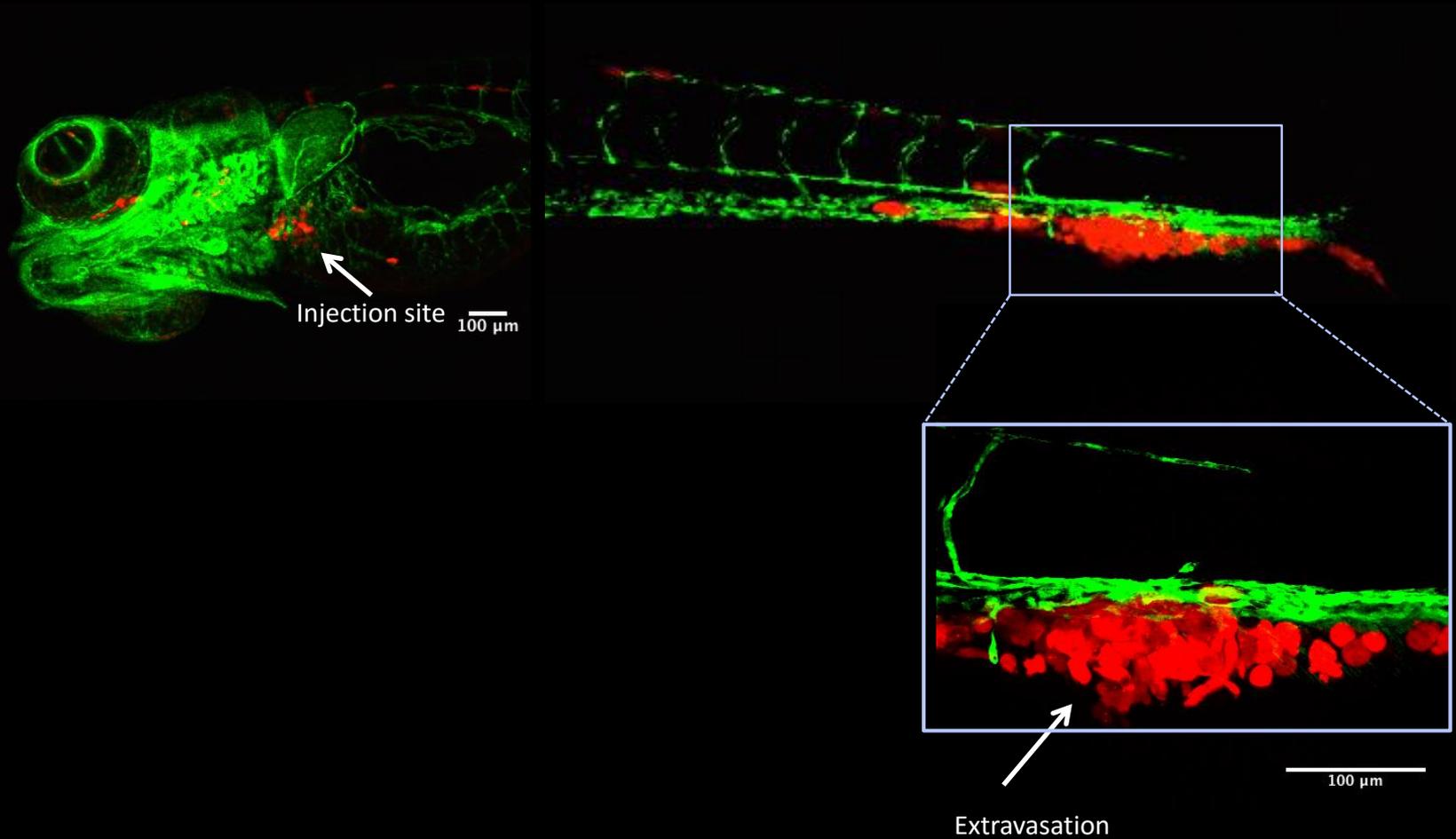
**Vehicle**



**Salinomycin(10 $\mu$ M)**



# Dissemination and metastasis of bladder cancer cells

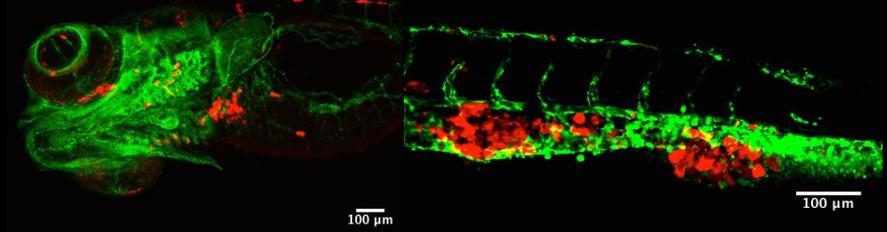
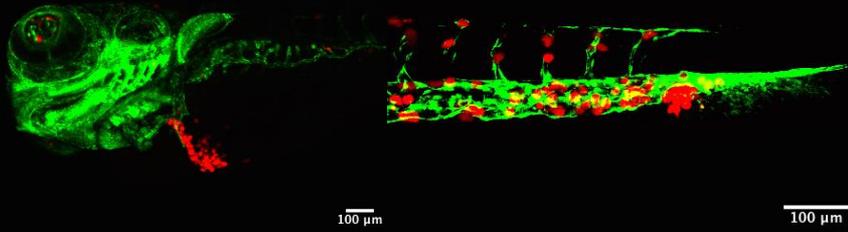


# Treatment with **salinomycin** of bladder cancer cells

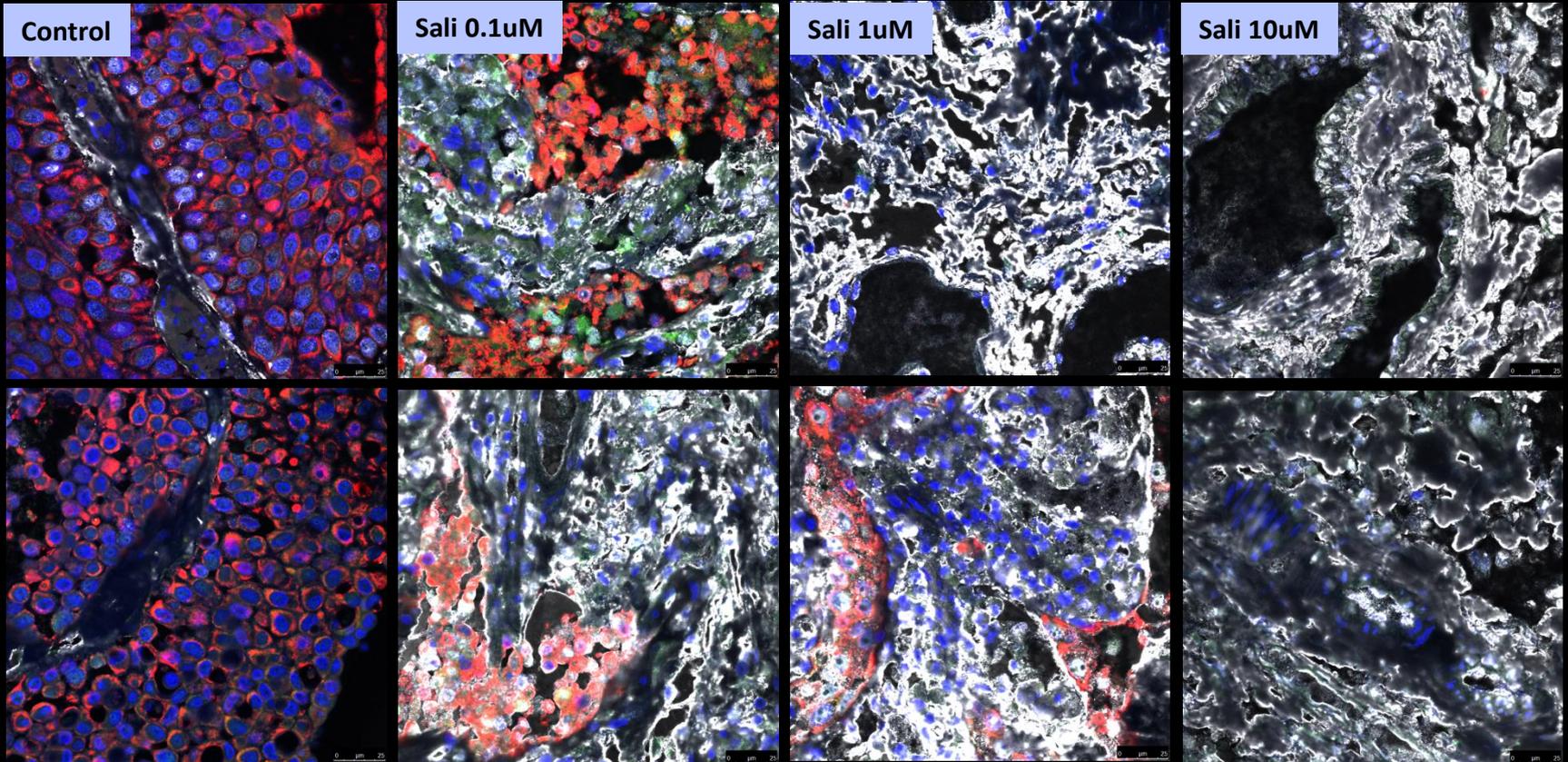
2 dpi

4 dpi

Vehicle



# Salinomycin in *ex vivo* cultured tumor slices from urothelial carcinoma



Pancytokeratin

DAPI

PCNA

Collagen

# Cationic Amphiphilic Drugs

Review

Cancer incidence in patients with schizophrenia and their first-degree relatives – a meta-analysis

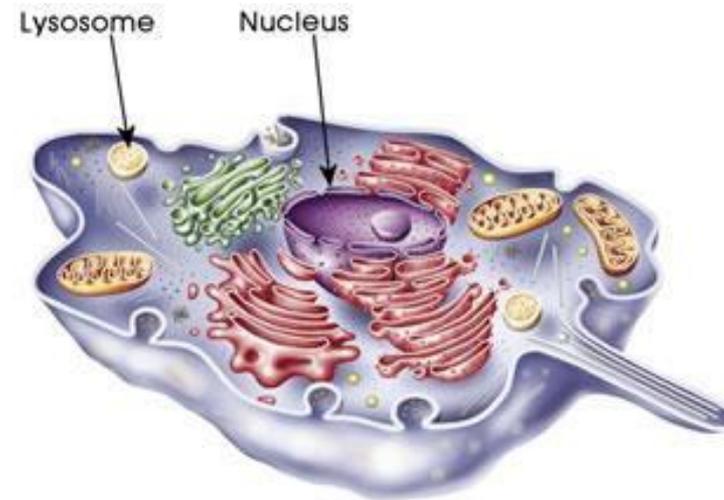
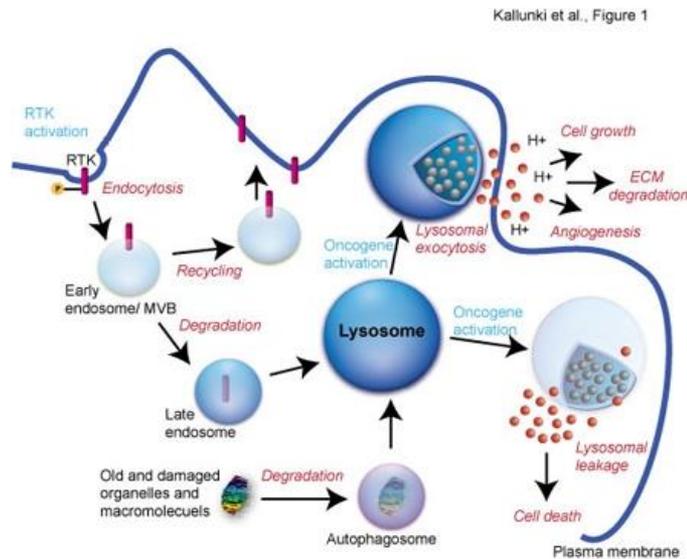
Catts VS, Catts SV, O'Toole BI, Frost ADJ. Cancer incidence in patients with schizophrenia and their first-degree relatives – a meta-analysis.

V. S. Catts<sup>1</sup>, S. V. Catts<sup>1,2</sup>, B. I. O'Toole<sup>3</sup>, A. D. J. Frost<sup>2</sup>

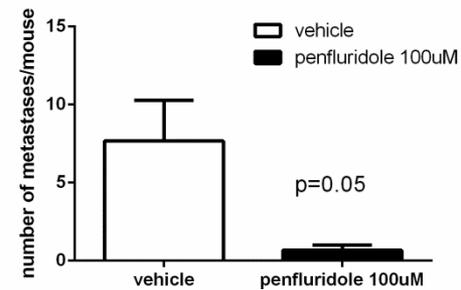
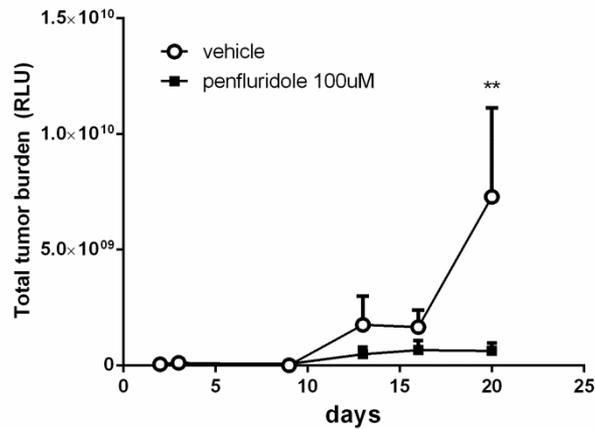
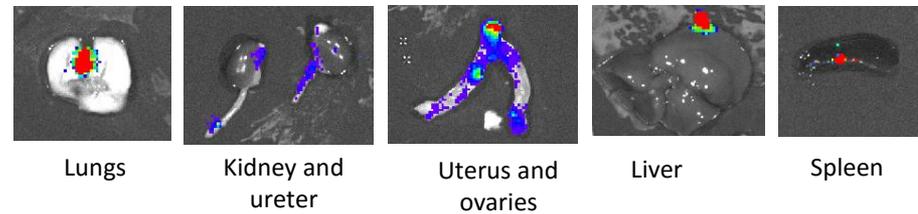
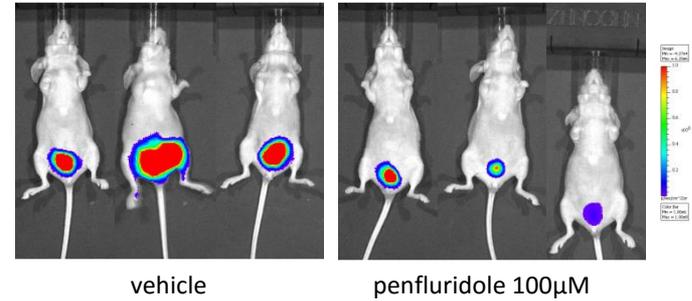
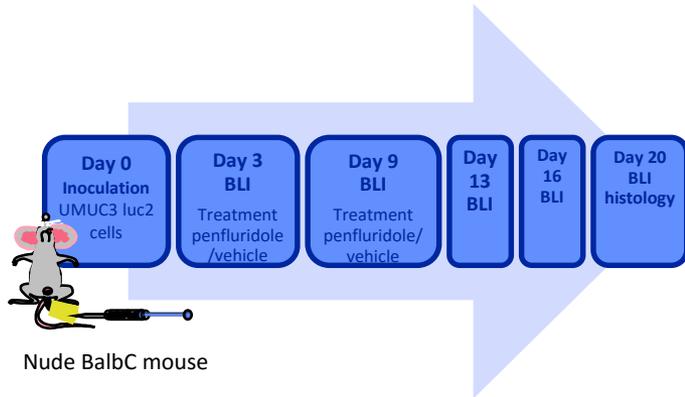
<sup>1</sup>School of Medicine, The University of Queensland, St

*Acta Psychiatr Scand.* 2008 May;117(5):323-36.

- Lower incidence of cancer in schizophrenia patients
- Cationic Amphiphilic Drugs (CADs) often used as anti-depressants/psychotics  
Known to induce lysosomal cell-death

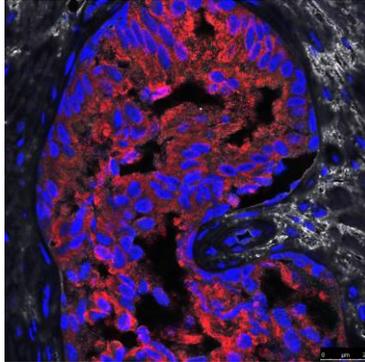


# Bladder cancer orthotopic *in vivo* xenograft model

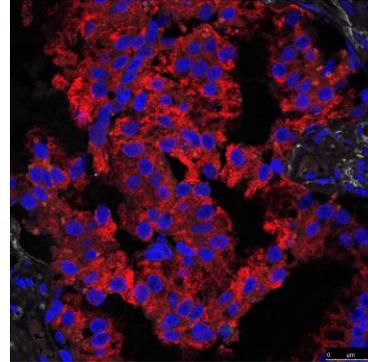


# High grade papillary urothelial cell carcinoma with invasion in stroma. (Non muscle invasive)

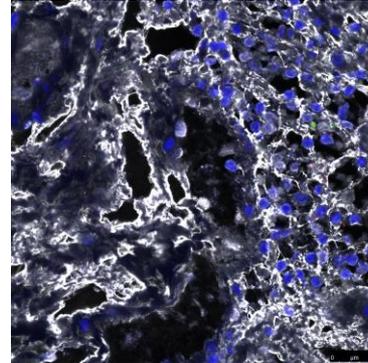
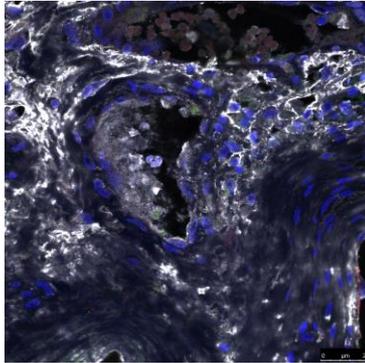
Day 3



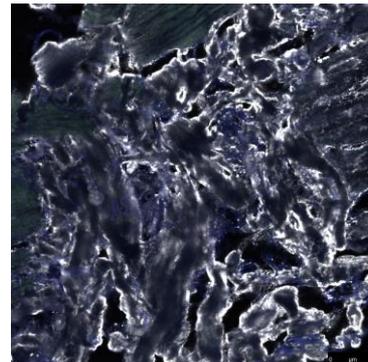
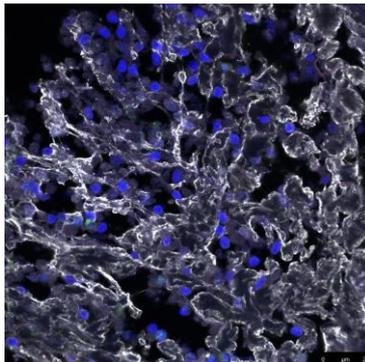
Day 7



vehicle



10uM penfluridol



50uM penfluridol

Pancytokeratin  
DAPI  
Collagen

# Summary & Conclusions

- Each disease model has specific intrinsic limitations
  - lack of functioning immune system (PDX, xenografting)
  - lack of cellular and extracellular stroma (cell cultures, organoids)
  - species differences (mice, zebrafish..)
  - etc.
- ‘weaknesses’ can be exploited for the study of mechanisms of tumor progression & the identification of novel therapeutic targets !
- Clinical validation of preclinical findings in human tissues facilitates clinical translation



# Acknowledgements

## LUMC dept. Urology

Geertje van der Horst  
Marjan van de Merbel  
Jeroen Buijs  
Eugenio Zoni  
Jan Kroon  
Federico La Manna  
Maaïke van der Mark  
Rob Bevers  
Rob Pelger

## IRST-Meldola, Italy

Laura Mercatali  
Toni Ibrahim

## EMC, Rotterdam, The Netherlands

### Dept. of Pathology

Ellen Zwarthoff

### Dept. Urology

Wytske van Weerden  
Chris Bangma

## Radboud MC

### Dept. Exp. Urology

Onno van Hooij  
Tilly Aalders  
Jack Schalken

## Univ. of Utrecht Dept. Pharmaceutics

Gert Storm  
Bart Metselaar

## Univ. of Berne Dept. Urology Switzerland

Janine Hensel  
Marianna de Julio  
George Thalmann  
Marco Cecchini

## IBL, Leiden, The Netherlands

### Institute of Biology

Lanpeng Chen  
Ewa Snaar-Jagalska

