

ASP Seminar

Monte Carlo Simulations in Radiotherapy: Enhancing Treatment with Radioprotectors and FLASH-RT

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- 2 Seminar Objectives
- 3 Methodology
- 4 Results and discussions
- 5 Conclusions and perspectives

Short description of the project

Cancer



- Cancer incidence was $\sim 19 \text{ million}$ new cases in 2020, accounting for nearly 10 million deaths
- With projections indicating an increase to ~ 28 *million* by 2040

Short description of the project

• Radiation therapy (RT)

- 50% of cancer patients receive radiation therapy during their course of illness
- It contributes towards 40% of curative treatment of cancer



External radiation beam therapy

Short description of the project

• Radiation therapy goal



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• Radiotherapy techniques



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Clinical management of cancer



Rising incidence of the disease

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Short description of the project

Radioprotectors



Chemical structure of radioprotectors

In addition to their radioprotective role, Cystamine/Cysteamine hold many clinical properties



Clinical properties of Cysteamine & Cystamine (Bindu et al., 2021)

Short description of the project

• Radioprotectors Mechanism of action



• How do they work?

 Radioprotectors exert their effects by scavenging free radicals, thereby reducing damages they may cause to DNA, and other cellular components

Radioprotectors Mechanism of action

Short description of the project

• Previous works - Protective agents - Conventional-RT

Healy, J. B. (1960). A trial of cystamine in radiation sickness. The British Journal of Radiology, 33(392), 512-514.

Wasserman, T. H., Brizel, D. M. (2001). The role of amifostine as a radioprotector. Oncology (Williston Park, NY), 15(10), 1349-54.

Ambroż, H. B., Kornacka, E. M., & Przybytniak, G. K.(2004) Influence of cysteamine on the protection and repair of radiation-induced damage to DNA. *Radiation Physics and Chemistry,* vol. 70, no 6, p. 677-686.

Adnan, M., Rasul, A., Shah, M. A., Hussain, G., Asrar, M., Riaz, A., ... Hussain, S. M. (2022). Radioprotective role of natural polyphenols: From sources to mechanisms. *Anti-Cancer Agents in Medicinal Chemistry (Formerly Current Medicinal Chemistry-Anti-Cancer Agents)*, 22(1), 30-39.

Short description of the project

- Previous works Protective agents Conventional-RT
- These studies have clearly demonstrated that radioprotectors such as amifostine, cystamine, and cysteamine possess radioprotective properties, characterized by their ability to scavenge free radicals



• Why are they nowadays not frequently used in clinical settings ?

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Short description of the project



- Conventional RT is limited by the toxicity and adverse effects of ionizing radiation on healthy tissues
- Complexity of targeted administration of radioprotectors

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Short description of the project

FLASH radiotherapy

• The advent of FLASH-RT has revolutionized the field of radiotherapy



- FLASH-RT is a RT technique that delivers radiation doses at ultra-high doses, typically exceeding 40 Gy/s
- This approach minimizes damage to healthy tissue while destroying effectively tumor cells
- FLASH radiotherapy is delivered in a single dose, unlike conventional RT, which is administered in multiple fractions

Short description of the project



Following this initial trial, several research works are continuing to improve cancer treatment by FLASH radiotherapy

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Short description of the project

• Biological mechanism of FLASH-RT



FLASH-RT & Conventional-RT (Binwei et al., 2021)

FLASH-RT hypothesis:

- Oxygen depletion
 - FLASH-RT induces a rapid depletion of oxygen, which minimizes reactive oxygen species (ROS) and free radical production, reducing normal tissue damage

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Short description of the project

• Biological mechanism of FLASH-RT

FLASH-RT hypothesis:

- Mitochondrial Protection and Immune Response
 - FLASH-RT protects healthy mitochondrial cells
 - FLASH-RT can promote the transformation of "cold tumors" into " hot tumors "



- FLASH-RT can enhance immune response against tumors
- FLASH-RT can generate an abscopal response

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Short description of the project

Tumor microenvironment (TME)

The TME is a complex network of extracellular, composed of cancer-associated fibroblasts, various immune cells, and non-cellular components



• Understanding the impact of radiotherapy on the immune microenvironment is crucial for enhancing the effectiveness of radiotherapy as a cancer treatment

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Short description of the project

CONV-RT vs FLASH RT

Radiotherapy can induce upregulation of immunostimulatory cells (CD8+ T cells, NK cells) and immunosuppressive cells (Tregs, MDSCs, M2 macrophages)



Short description of the project

Abscopal effect

• The abscopal response is when radiation therapy on one tumor not only affects that tumor but also helps the immune system attack other tumors in the body that weren't directly treated



- FLASH-RT induces:
 - Activation of immune cells
 - Reduction in the production of reactive oxygen species (ROS) and free radicals

• Although FLASH-RT seems to improve the cancer treatment therapeutic ratio, it does not provide total protection of surrounding healthy tissue

• It is therefore expected that the combination of a radioprotective agent with FLASH-RT could further improve the therapeutic ratio in cancer treatment

Short description of the project

• Nuclear power plant accident - nuclear weapons deployment



Fukushima-Daiichi-Nuclear-Plant



Nuclear weapons deployment

Background and Motivation Short description of the project

• Nuclear terrorism and for the protection of astronauts



Nuclear/radiological terrorism



Astronauts/cosmonauts

Nanotechnology in radioprotectors Delivery

• Controlled Release and Targeting: Nanoparticles can be designed to deliver cystamine or cysteamine in a targeted and controlled manner, precisely reaching damaged tissues or areas that need protection



• Increased Stability and Bioavailability: By encapsulating cystamine or cysteamine in nanoparticles, their stability and bioavailability in the body can be improved

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Limits and Problems

- No studies have explored the synergy between FLASH-RT and radioprotectors such as cystamine and cysteamine
- No study has been conducted to compare the radioprotective capacity of cysteamine with that of cystamine under various LETs and High Dose Rates irradiation conditions
- Lack of data to better understand the mechanisms underlying the FLAH radiotherapy
- Protection of population from unintentional exposure at Ultra-High Dose Rate

Objective

• The aim of this research is to elucidate the mechanisms underlying the efficacy of cystamine and cysteamine as radioprotectors in the context of FLASH radiotherapy and hadrontherapy from a radiochemical perspective using Monte Carlo simulation

Ionizing radiation - Radiolysis of water - DNA damage



Side effects following cancer treatment with radiotherapy are mostly caused by the indirect effects of radiation through the formation of free radicals

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Radiolysis of water - Mechanisms of radiolysis of water



Reaction pathway of reactive oxygen species and free radicals

In the living body, free radicals exist as ROS, lipid, protein, and DNA radicals



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Radiolysis of water - Mechanisms of radiolysis of water

• The amount of free radicals is determined in terms of radiolytic yields



Radiolysis of water - Radiolytic yields - Influence of parameters

Influence of parameters

Radiolytic yields change as a function of several parameters such as

- Time
- pH
- Type of ionizing particle
- Linear Energy Transfer (LET)
- Dose Rate
- Solute concentration

Radiolysis of water - Radiolytic yields - Influence of parameters

Influence of LET

The radiolytic yield of the formed species are dependent on the spatial distribution of the energy deposited in the studied medium



Low LET & High LET (KANIKE et al., 2015)

Radiolysis of water - Radiolytic yields - Influence of parameters



Left panel: Illustration of our simulation model in the case of ten 300 MeV incident protons ($LET \sim 0.3 keV/\mu m$), which randomly and simultaneously impact the XZ plane perpendicularly on the surface of the solution within a circle of radius $R_o = 0.1 \mu m$. Right panel: 3D representation of the N = 10 proton tracks traversing through the solution calculated at $\sim 1ps$ from our Monte Carlo code. All protons travel along the Y-axis over the whole track length chosen for the calculations.

Radiolysis of water - Radiolytic yields - Influence of parameters

Influence of solute concentration

When chemical scavengers are present in a solution, they are able to capture the radical species resulting from the radiolysis of water

$$R+S \xrightarrow{k_{rs}} P$$

The efficiency with which the solute S reacts with the radical R is characterized by the scavenging power of S expressed in s^{-1} and defined as:

Scavenging power = $k_{rs} \times [S]$

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Materials and methods

Study Model

• This quantitative study was conducted using the Fricke dosimeter as a model through Monte Carlo simulations

• What is the Fricke dosimeter ?

- The Fricke dosimeter is a dosimetry method that uses a ferrous sulfate solution to measure the absorbed radiation dose, mainly in the context of radiotherapy
- The Fricke dosimeter is quite sensitive and can measure relatively low radiation doses, which makes it useful in medical applications

• The standard Fricke dosimeter is composed of:



Materials and methods

Monte Carlo methods



Fricke Dosimeter - Chemical reactions - Radiolytic yields

• Free radicals in the Fricke dosimeter are quantified by the oxidation of Fe^{2+} to Fe^{3+}

Chemical Reactions

• Main reactions for ferric ion production in Fricke solution

```
 \begin{array}{lll} {\sf R}.(1) & {\sf Fe}^{2+} + {}^{\bullet}{\sf OH} \rightarrow {\sf Fe}^{3+} + {\sf OH}^{-} & k = 3.4 \times 10^8 \\ {\sf R}.(2) & {\sf e}^-{}_{aq} + {\sf H}_3{\sf O}^+ \leftrightarrow {\sf H}^{\bullet} + {\sf H}_2{\sf O} & k = 2.3. \times 10^{10} \\ {\sf R}.(3) & {\sf H}^{\bullet} + {\sf O}_2 \rightarrow {\sf HO}_2^{\bullet} & k = 2.1 \times 10^{10} \\ {\sf R}.(4) & {\sf Fe}^{2+} + {\sf HO}_2^{-} \rightarrow {\sf Fe}^{3+} + {\sf HO}_2^{-} & k = 7.9 \times 10^5 \\ {\sf R}.(5) & {\sf HO}_2 - {\sf H}_3{\sf O}^+ \rightarrow {\sf H}_2{\sf O}_2 + {\sf H}_2{\sf O} & k = 5.0 \times 10^{10} \\ {\sf R}.(6) & {\sf Fe}^{2+} + {\sf H}_2{\sf O}_2 \rightarrow {\sf Fe}^{3+} + {\sf OH} + {\sf OH}^- & k = 52 \\ {\sf R}.(7) & {\sf Fe}^{2+} + {\sf H}^{\bullet} \rightarrow {\sf Fe}^{3+} + {\sf H}_2 & k = 1.3 \times 10^7 \\ \end{array}
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These reactions are function of the rate constant, noted k, expressed in M⁻¹s⁻¹

Materials and methods

Fricke Dosimeter - Chemical reactions - Radiolytic yields

•
$$G(Fe^{3+}) = \sum g_i$$
,

where g_i represents the produced radical or molecular species

• The $G(Fe^{3+})$ value in aerated environments (analogous to healthy tissue) is:

 $G(Fe^{3+}) = 15.5 molecule/100 eV$ (1)

In extreme hypoxic environments (analogous to tumors), the $G(Fe^{3+})$ value is:

 $G(Fe^{3+}) = 8.1 molecule/100eV$ (2)

The radioprotective properties of radioprotectors are evaluated by the decrease of $G(Fe^{3+})$

Materials and methods

Fricke Dosimeter - cystamine - Chemical reactions

Chemical Reactions - Fricke solution - Radioprotectors	
Cystamine (RSSR)	\$
$ \begin{array}{ccc} (M^{-1}s^{-1}) \\ \text{E.(1)} & \text{RSSR} + e_{aq}^{-} \rightarrow (\text{RSSR})^{\bullet-} & k = 4.1 \times 10^{10} \\ \text{E.(2)} & \text{RSSR} + \mathbf{I}^{\bullet} \rightarrow \text{RS}^{\bullet} + \text{RSH} & k = 8 \times 10^{9} \\ \text{E.(3)} & \text{RSSR} + {}^{\bullet}\text{OH} (+ \mathrm{H}^{+}) \rightarrow (\text{RSSR})^{\bullet+}) + \mathrm{H_2O} & k = 1.7 \times 10^{10} \\ \text{E.(4)} & \mathrm{Fe}^{2+} + \mathrm{RS}^{\bullet} \rightarrow \mathrm{Fe}^{3+} + \mathrm{RS}^{-} & k = 2.5 \times 10^{8} \end{array} $	
E.(5) $Fe^{2+} + RSSR^{\bullet+} \rightarrow Fe^{3+} + RSSR$ $k = 2 \times 10^6$	• Rate constant
	Diffusion constant
Cysteamine (RSH)	Radioprotectors
$ \begin{array}{lll} \text{E.(1)} & \text{RSH} + e_{aq}^{-}(+\text{H}^{+}) \to \text{R}^{\bullet} + \text{H}_2\text{S} & \text{k} = 3 \times 10^{10} \\ \text{E.(2)} & \text{RSH} + \text{H}^{\bullet} \to \text{RS}^{\bullet} + \text{H}_2 & \text{k} = 1.8 \times 10^9 \\ \text{E.(3)} & \text{RSH} + ^{\bullet}\text{OH} \to \text{RS}^{\bullet} + \text{H}_2\text{O} & \text{k} = 1.7 \times 10^{10} \\ \text{E.(4)} & \text{Fe}^{2+} + \text{RS}^{\bullet}(+\text{H}^{+}) \to \text{Fe}^{3+} + \text{RSH} & \text{k} = 2.5 \times 10^8 \\ \end{array} $	concentration

Results and discussions

1st Publication





Effect of Linear Energy Transfer on Cystamine's Radioprotective Activity: A Study Using the Fricke Dosimeter with 6–500 MeV per Nucleon Carbon Ions—Implication for Carbon Ion Hadrontherapy

Samafou Penabeï ¹0, Esteban Sepulveda, Abdullah Muhammad Zakaria, Jintana Meesungnoen and Jean-Paul Jay-Gerin *¹2

Results and discussions - 1st Publication

 $G(Fe^{3+})$ in Fricke Solutions and in the presence of Cystamine (dimer) Subjected to extreme energies 6–500 MeV per Nucleon Carbon Ion Irradiation



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Results and discussions - 1st Publication

Dependence of the $G(Fe^{3+})$ as a function of cystamine concentration, ranging from 10^{-6} to 1 M, in Fricke solutions, subjected to 6 - 500 MeV/Nucleon Carbon Ion

(Fig.2) Dependence of the $G(Fe^{3+})$ as a function of cystamine concentration - 10^{-6} to 1 M



• Figure 3 indicates that the decrease in *G*(*Fe*³⁺) can be attributed to two radioprotective effects: LET itself and due to the presence of cystamine

As the LET increases, the efficiency of cystamine declines gradually

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Results and discussions

2nd Publication





Communication

Assessment of Cystamine's Radioprotective/Antioxidant Ability under High-Dose-Rate Irradiation: A Monte Carlo Multi-Track Chemistry Simulation Study

Samafou Penabeï, Jintana Meesungnoen 🕑 and Jean-Paul Jay-Gerin *🖸

Results and discussions - 2nd Publication

Effect of dose rate on $G(Fe^{3+})$ in aerated and dearerated Fricke solutions, with added cystamine at $10^{-3}M$, subjected to 300 MeV proton irradiation



- G(Fe³⁺) decreases in the presence of cystamine under both aerated and deaerated conditions, and this decrease
 becomes more pronounced with increasing dose rate.
- For example, for N = 100, in aerated solution, G(Fe³⁺) decreases from 15.5 to 8 (i.e., a decrease of about 7.5 G-units).
- In the absence of oxygen, this decrease in G(Fe³⁺) is attenuated as the dose rate increases, with G(Fe³⁺) decreasing from 8.1 to 5.2 (i.e., a reduction of 2.9 G-units)

Results and discussions - 2nd Publication

Dependence of the $G(Fe^{3+})$ as a function of cystamine concentration, ranging from 10^{-6} to 1 M, in aerated and deaerated Fricke solutions, under different dose rates



• As N increases, $G(Fe^{3+})$ in aerated and de-aerated solutions gradually decreases at low cystamine concentrations

- In aerated environment, at concentrations between $10^{-4}M$ and $10^{-2}M$, $G(Fe^{3+})$ decreases sharply with increasing cystamine concentration and stabilizes after $10^{-2}M$
- In deaerated environment, $G(Fe^{3+})$ decreases gradually at concentrations between $10^{-4}M$ and $10^{-2}M$ and decreases sharply after $10^{-2}M$ and 45/55

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Results and discussions

3rd Article



International Journal of *Molecular Sciences*



Article

Comparative Analysis of Cystamine and Cysteamine as Radioprotectors and Antioxidants: Insights from Monte Carlo Chemical Modeling under High Linear Energy Transfer Radiation and High Dose Rates

Samafou Penabeï 💿, Jintana Meesungnoen and Jean-Paul Jay-Gerin *💿

 $G(Fe^{3+})$ in aerated Fricke solutions, with added cystamine and cysteamine at 1mM, subjected to proton irradiation for extreme energies - 0.15 MeV and 300 MeV



 In the presence of cystamine, G(Fe³⁺) is less sensitive to LET (ranging from approximately 0.3 to 72 keV/μm), decreasing from about 8.5 to 6.8 molecules/100 eV, corresponding to a reduction of 1.7 G units.

With cysteamine, the decrease is more pronounced, from 14 to 8.3 molecules per 100 eV (a 5.7 G-unit drop)

 $G(Fe^{3+})$ in deaerated Fricke solutions, with added cystamine and cysteamine at 1mM, subjected to proton irradiation for extreme energies - 0.15 MeV and 300 MeV



LET is less effective in reducing G(Fe³⁺) when cystamine is used as opposed to cysteamine

Dependence of the $G(Fe^{3+})$ as a function of cystamine/cysteamine concentration, ranging from 10^{-6} to 0.1 M, in aerated Fricke solutions



 In an aerated environment, and with the addition of either cystamine or cysteamine, G(Fe³⁺) decreases, regardless of energy

Dependence of the $G(Fe^{3+})$ as a function of cystamine/cysteamine concentration, ranging from 10^{-6} to 0.1 M, in deaerated Fricke solutions



However, with cysteamine, G(Fe³⁺) remains unchanged at high energies but decreases at low energies

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Dependence of the $G(Fe^{3+})$ as a function of cystamine/cysteamine concentration, ranging from 10^{-6} to 0.1 M, in aerated Fricke solutions, under different dose rates

 In an aerated environment with cystamine or cysteamine, G(Fe³⁺) decreases with increasing radioprotector concentration and dose rate, indicating their ability to scavenge free radicals



• Cystamine is more effective at concentrations between 10^{-4} and 10^{-2} M, as indicated by the significant decrease in $G(Fe^{3+})$

• Cysteamine is more effective at concentrations between 10^{-3} and 0.1 M, as indicated by a significant reduction in $G(Fe^{3+})$ within this range

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Dependence of the $G(Fe^{3+})$ as a function of cystamine/cysteamine concentration, ranging from 10^{-6} to 0.1 M, in de-aerated Fricke solutions, under different dose rates



- In a deaerated environment, in the presence of cystamine, the same remark as in an aerated environment is observed: $G(Fe^{3+})$ decreases as a function of the added radioprotector concentration
- However, in the presence of cysteamine, G(Fe³⁺) does not decrease as a function of the added radioprotector concentration
- In the range 10⁻³ M to 10⁻² M, cysteamine reaches its maximum unprotective capacity in a deaerated environment ("tumor-like"), which is beneficial for the treatment of cancer by radiotherapy 5

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Conclusion

- Objectives
- Achievements
- Cystamine offers protection to (healthy tissue) like and (tumors) like environments, although its capacity in a deaerated environment is lower than in an aerated environment
- Cysteamine provides protection to (healthy tissues) like environments but not to tumors like environments (tumors), especially at the concentration of approximately 10⁻³ - 10⁻² M
- The radioprotective capacity of cystamine and Cysteamine decrease with increasing radiation LET
- Cysteamine offer better tissue protection under high dose rates irradiation "FLASH-RT" in comparison to CONV-RT without compromising the treatment compared to cystamine

Perspectives

- Predictive Modeling with AI: Use machine learning algorithms to predict the radioprotective effectiveness of radioprotectors under various FLASH RT parameters
- Optimization of Simulation Parameters: Apply AI to identify optimal Monte Carlo simulation conditions, thus accelerating the search for effective radioprotective scenarios
- Development of an Integrated Al Model: Create an Al model capable of combining simulation and biological data to anticipate the effects of radioprotectors under real conditions and minimize toxicity

THANK YOU FOR YOUR KIND ATTENTION





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