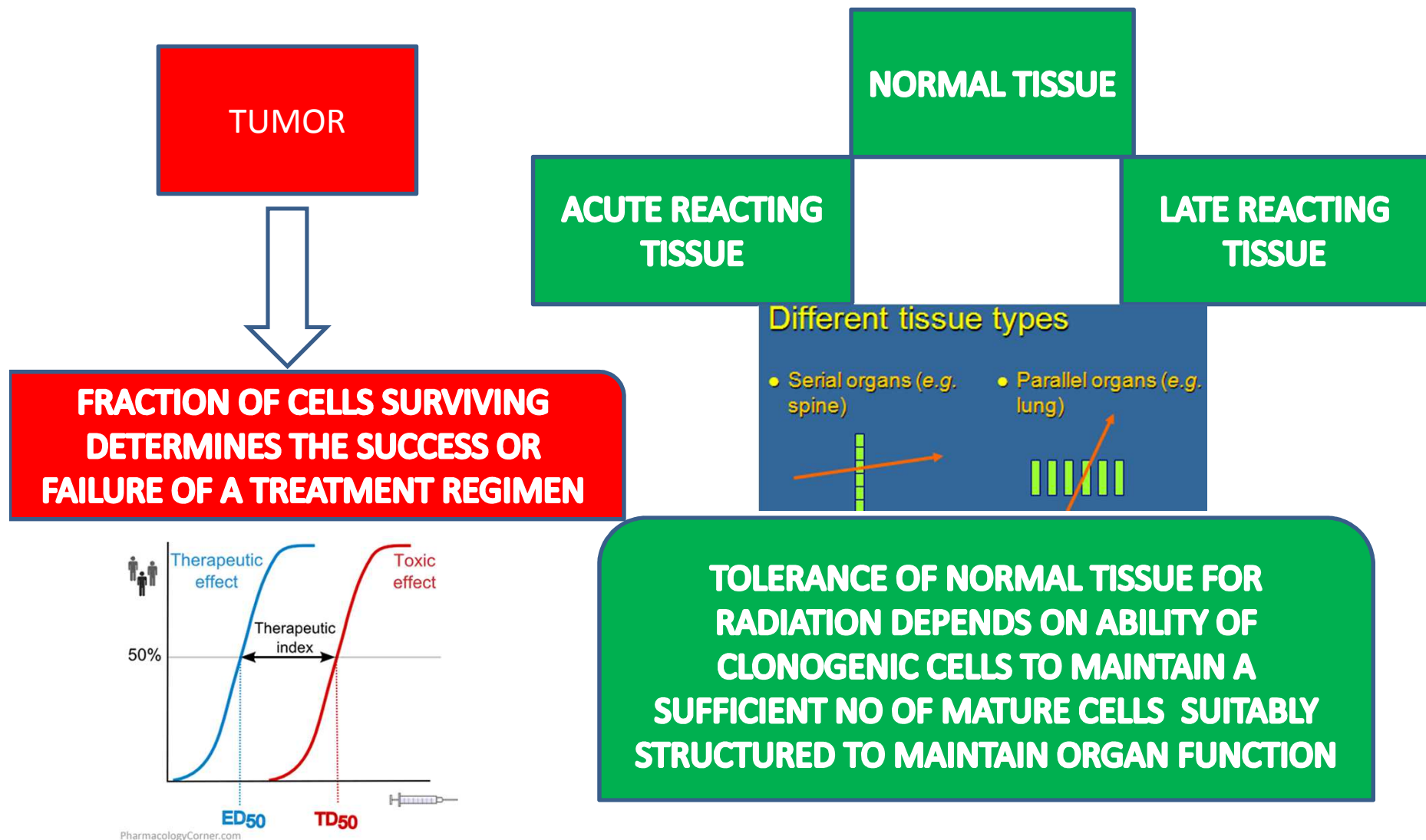


CELL CYCLE ,CHECK POINTS

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IN RADIATION ONCOLOGY



CELL DEATH

- CELL DEATH AFTER IRRADIATION OCCURS MOSTLY AS CELLS ATTEMPT TO DIVIDE.
- RAPIDLY DIVIDING TISSUE:-DAMAGE EVIDENT QUICKLY
- SLOW/RARELY DIVIDING CELL:-RADIATION DAMAGE REMAIN LATENT FOR LONG PERIOD.

LAW OF BERGONIE' & TRIBONDEU:- Tissue appears to be more radiosensitive if their cells are **less differentiated**, have a greater proliferative capacity and divide more rapidly.

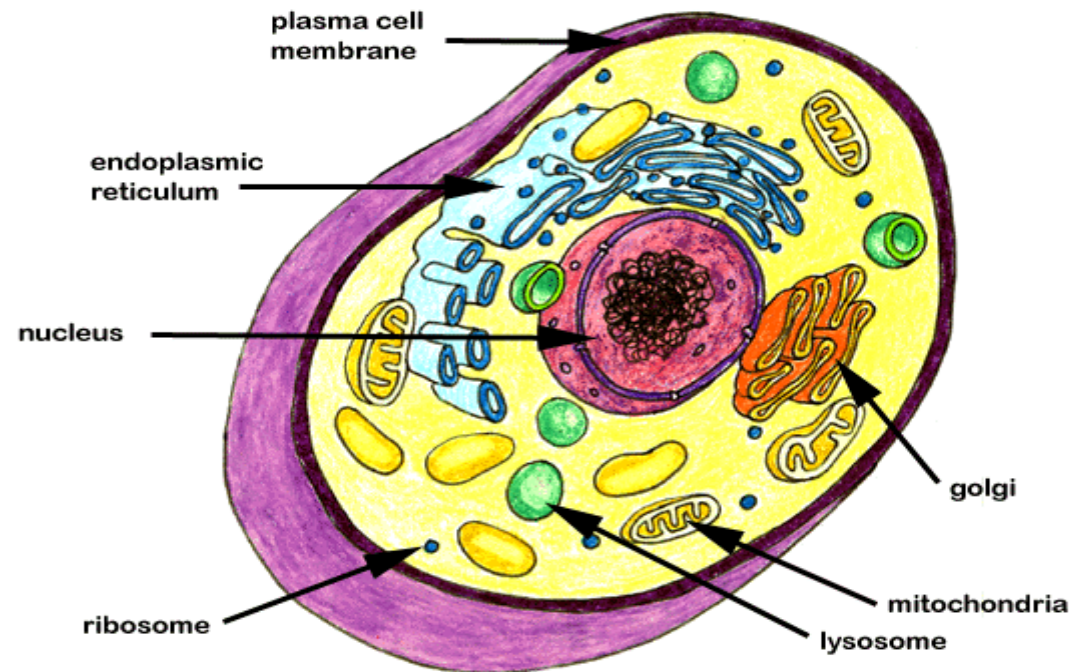
CASARETT'S CLASSIFICATION OF RADIOSENSITIVITY

	CELL TYPE	PROPERTIES	EXAMPLE	SENSITIVITY
I	VEGETATIVE INTERMITOTIC CELLS	DIVIDE REGULARLY.NO DIFFERENTIATION	ERYTHROBLAST INT CRYPTS GERMINAL CELL OF EPIDERMIS	HIGH
II	DIFFERENTIATING INTERMITOTIC CELLS	DIVIDE REGULARLY.SOME DIFFERENTIATION BETWEEN DIVN.	MYELOCYTE	HIGH
III	REVERTING POST MITOTIC CELLS	DO NOT DEVIDE REGULARLY,VARIABLY DIFFERENTIATED	LIVER,KIDNEY, PANCREAS	LOW
IV	FIXED POST MITOTIC CELL	DO NOT DEVIDE HIGHLY DIFFERENTIATED	NERVE CELLS MUSCLE CELLS	LOW

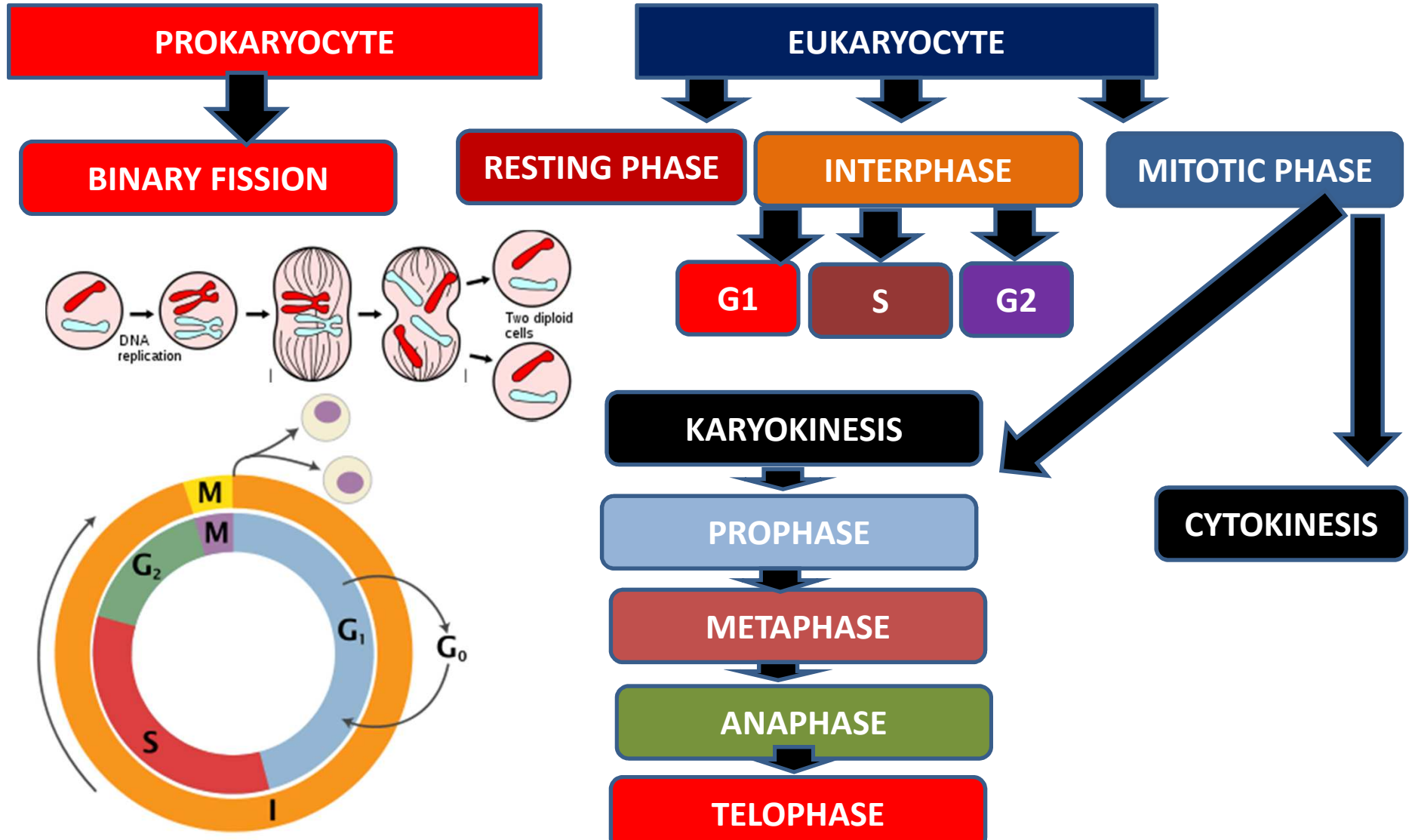
S
E
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I
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Y
D
E
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A
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S

The CELL

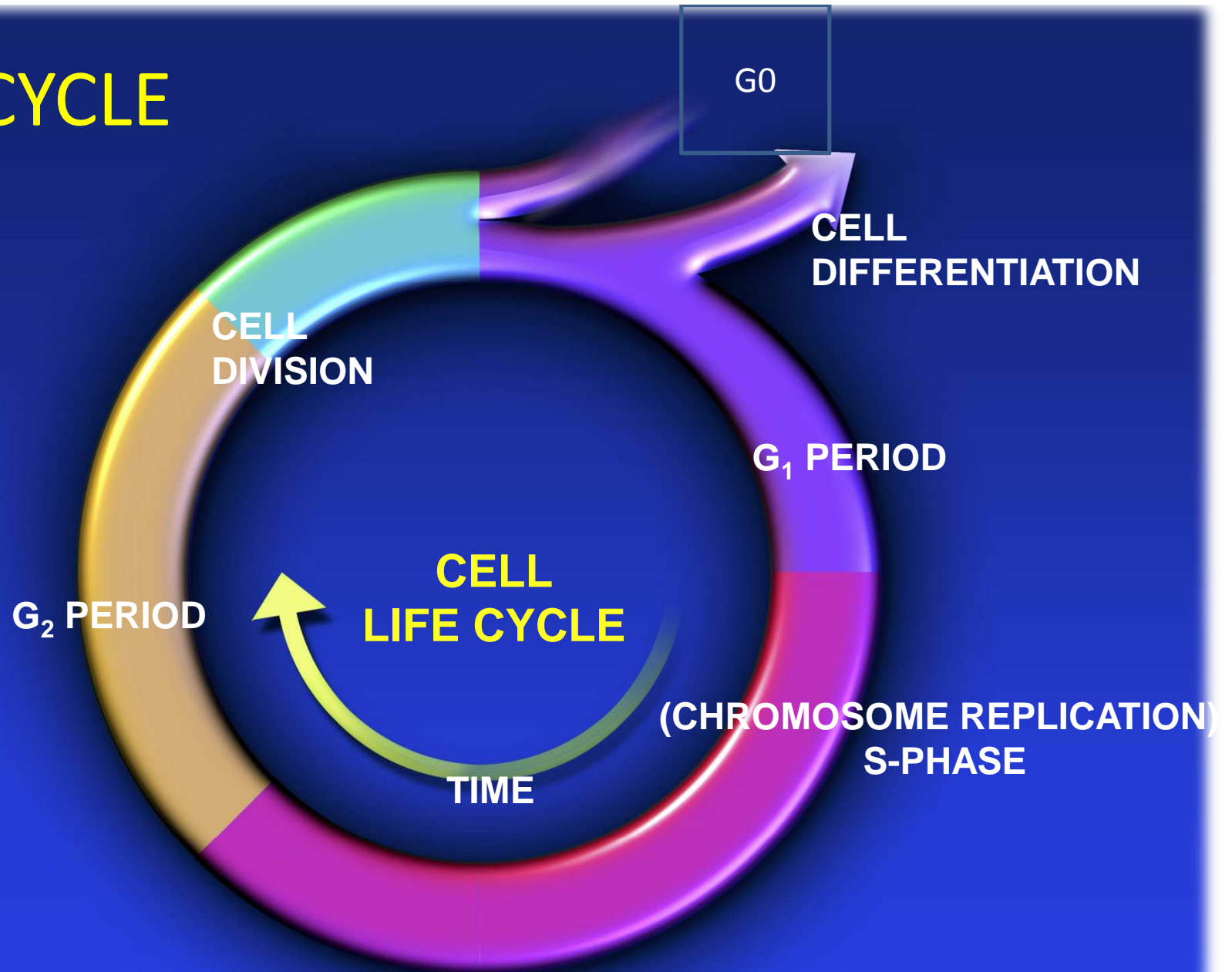
- Cell membrane
- Cytoplasm
- Nucleus
- Mitochondria
- Lysosomes
- Golgi complex
- Endoplasmic retic
- Ribosome



CELL DIVISION



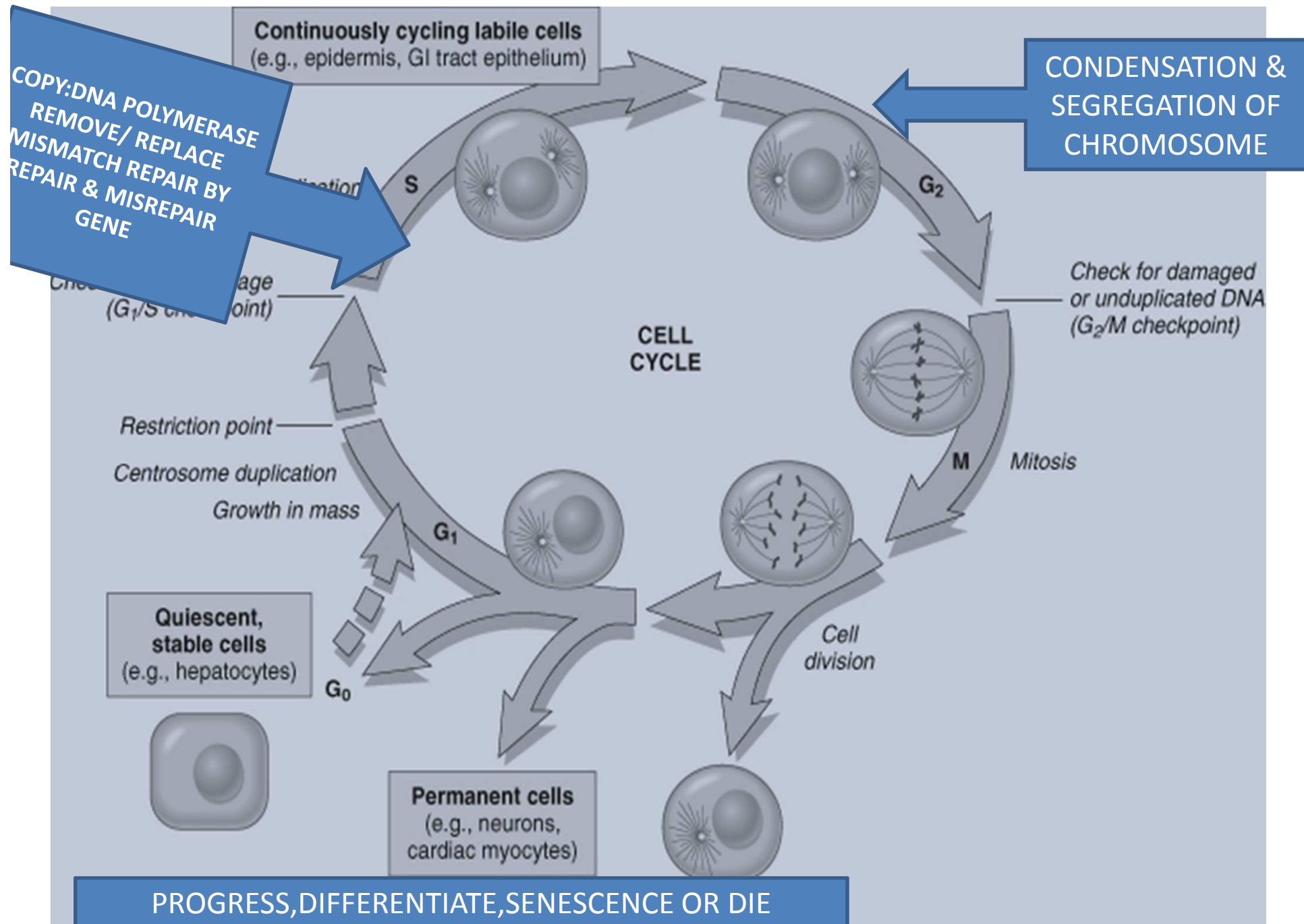
CELL CYCLE



CYCLIC PHENOMENON

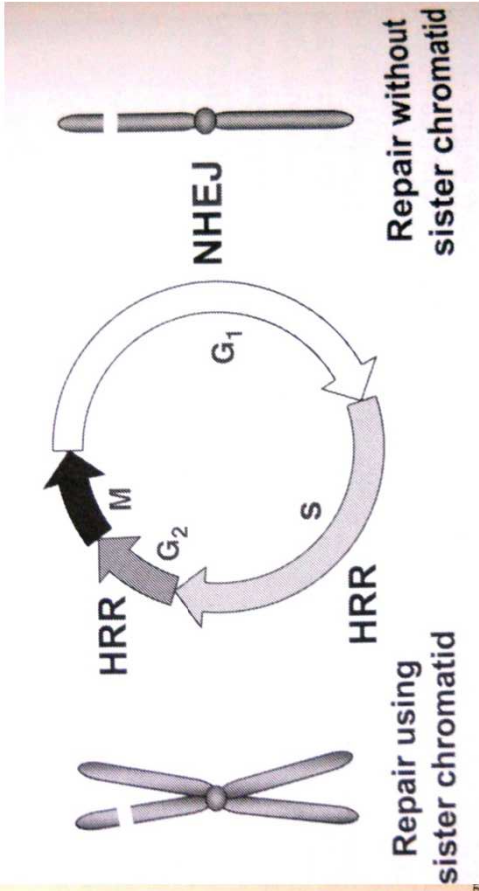
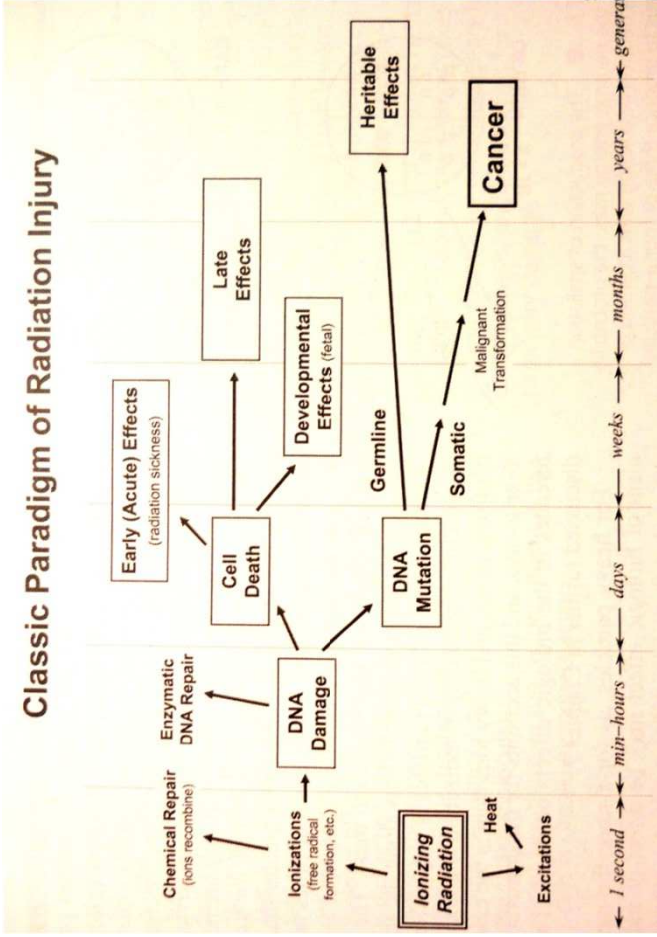
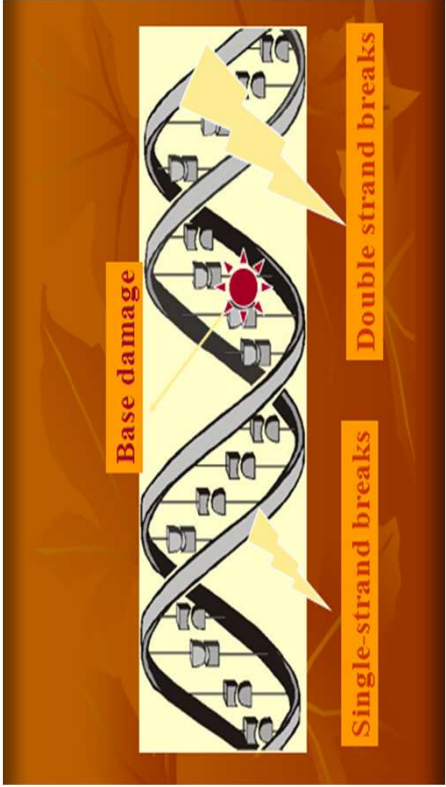
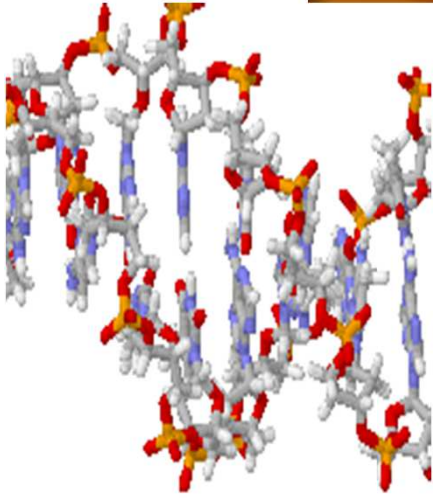
MITOTIC CYCLE TIME OR CELL CYCLE TIME(T_c)

TIME BETWEEN SUCCESSIVE
DIVISION OF CELL IS KNOWN AS
MITOTIC CYCLE TIME



DIFFERENCE IN CELL CYCLE TIME IS
MOSTLY DUE TO VARIATION IN
LENGTH OF G1 PERIOD

	HAMSTER CELL	HELA CELL
	11HRS	24 HRS
Tc	11	24
Tm	1	1
Ts	6	8
Tg1	1	11
Tg2	3	4



REPAIR OF DOUBLE STRAND BREAK

HOMOLOGOUS RECOMBINATION

NONHOMOLOGOUS END JOINING

LATE S,G2 PHASE

G1 & EARLY S

CRITICAL IN CELL CYCLE SIGNALLING

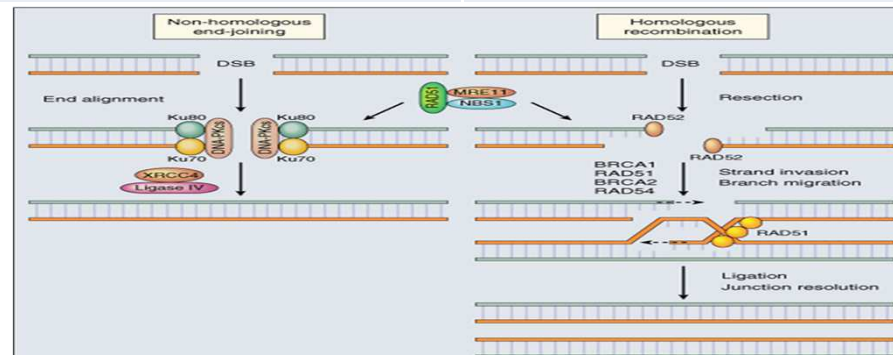
**PREDOMINANT MECHANISM OF
DOUBLE STRAND BREAK**

**REQUIRE AN UNDAMAGED DNA
STRAND AS PARTICIPANT**

MEDIATES END TO END JOINING

ERROR FREE

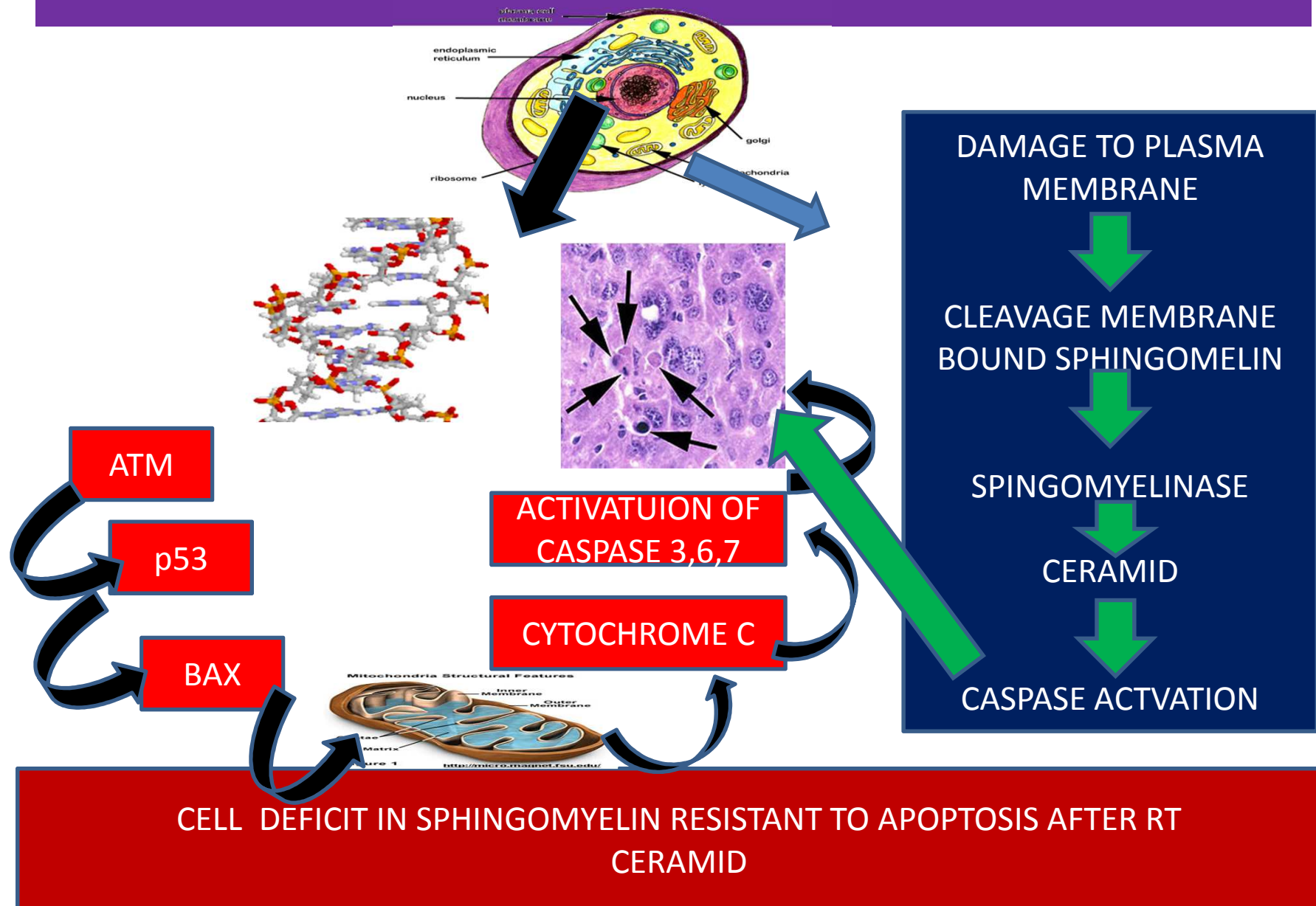
ERROR PRONE



RADIATION INDUCED CELL DEATH

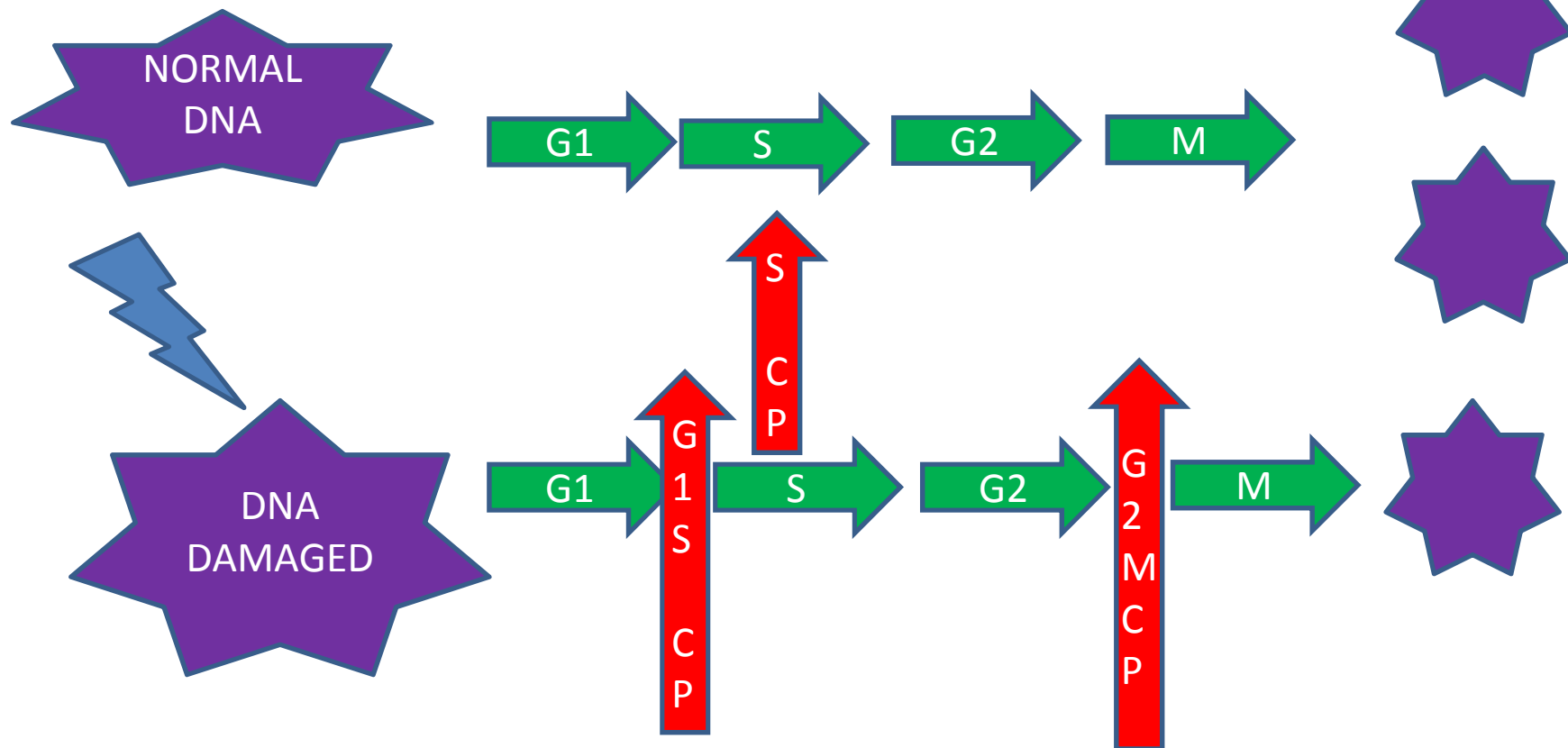
NECROTIC DEATH	APOPTOTIC CELL DEATH
PASSIVE PROCESS, CELL PASS THROUGH MITOSIS WITH UNREPAIRED DNA BREAK	ACTIVE PROCESS, CASCADE OF EVENT AFTER CELLULAR STRESS
LOSS OF MEMBRANE INTIGRITY, CYTOPLASMIC VESICLE, DEGRADATION OF DNA	FRAGMENTATION OF DNA, NUCLEAR FRAGMENTATION, CONDENSED CHROMATIN, EOSINOPHILIC CYTOPLASM

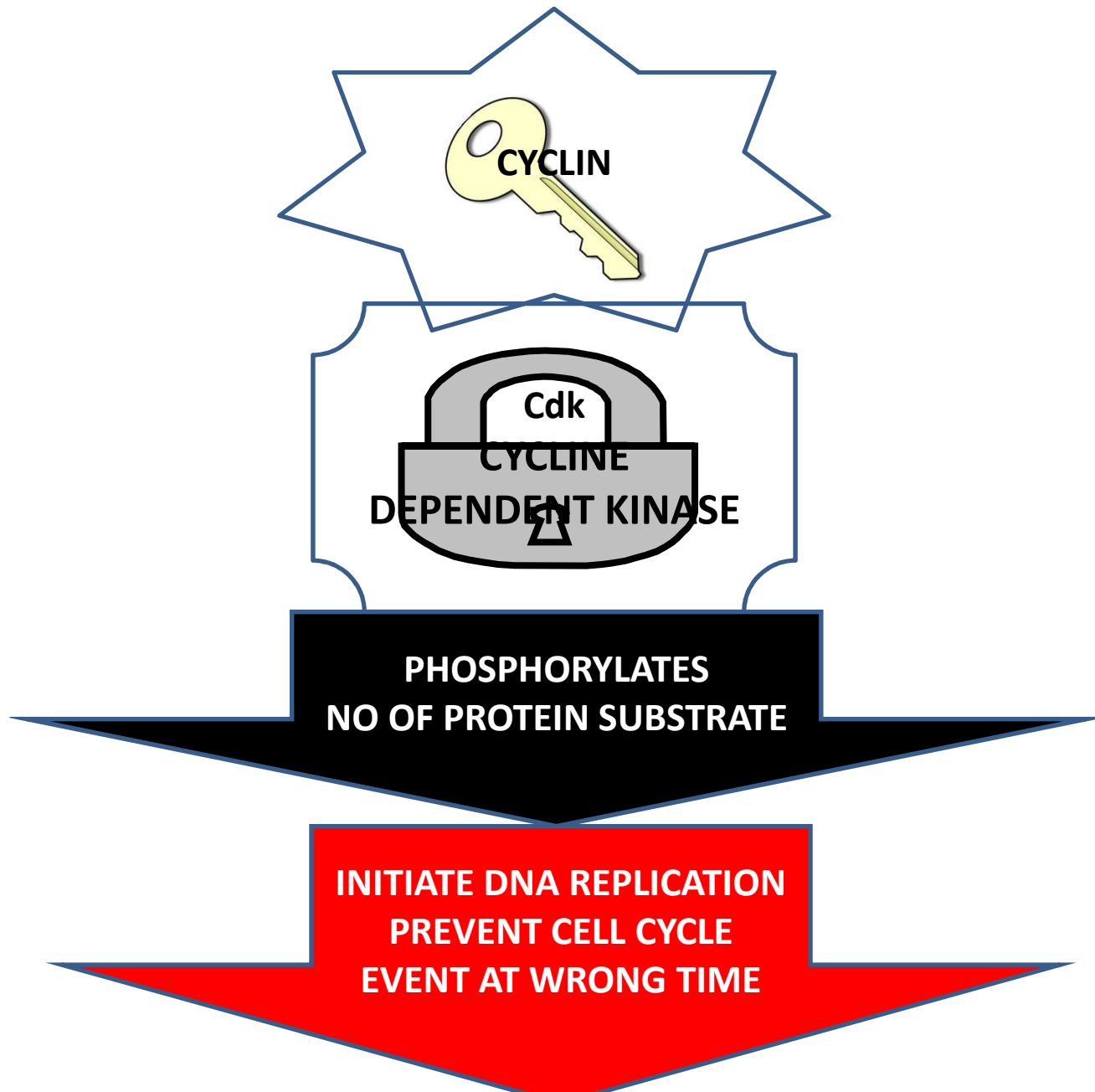
APOPTOSIS



CHECK POINTS

EVENTS IN THE CELL CYCLE MUST TAKE PLACE IN SPECIFIC ORDER
DUE TO FUNCTION OF A NUMBER OF CHECK POINT GENES





TYPE OF CYCLINS:-A,-H

EACH CYCLIN SYNTHESIZES AT A PARTICULAR PHASE OF CELL CYCLE

G1:-cyclin D & E

S:-CYCLIN A

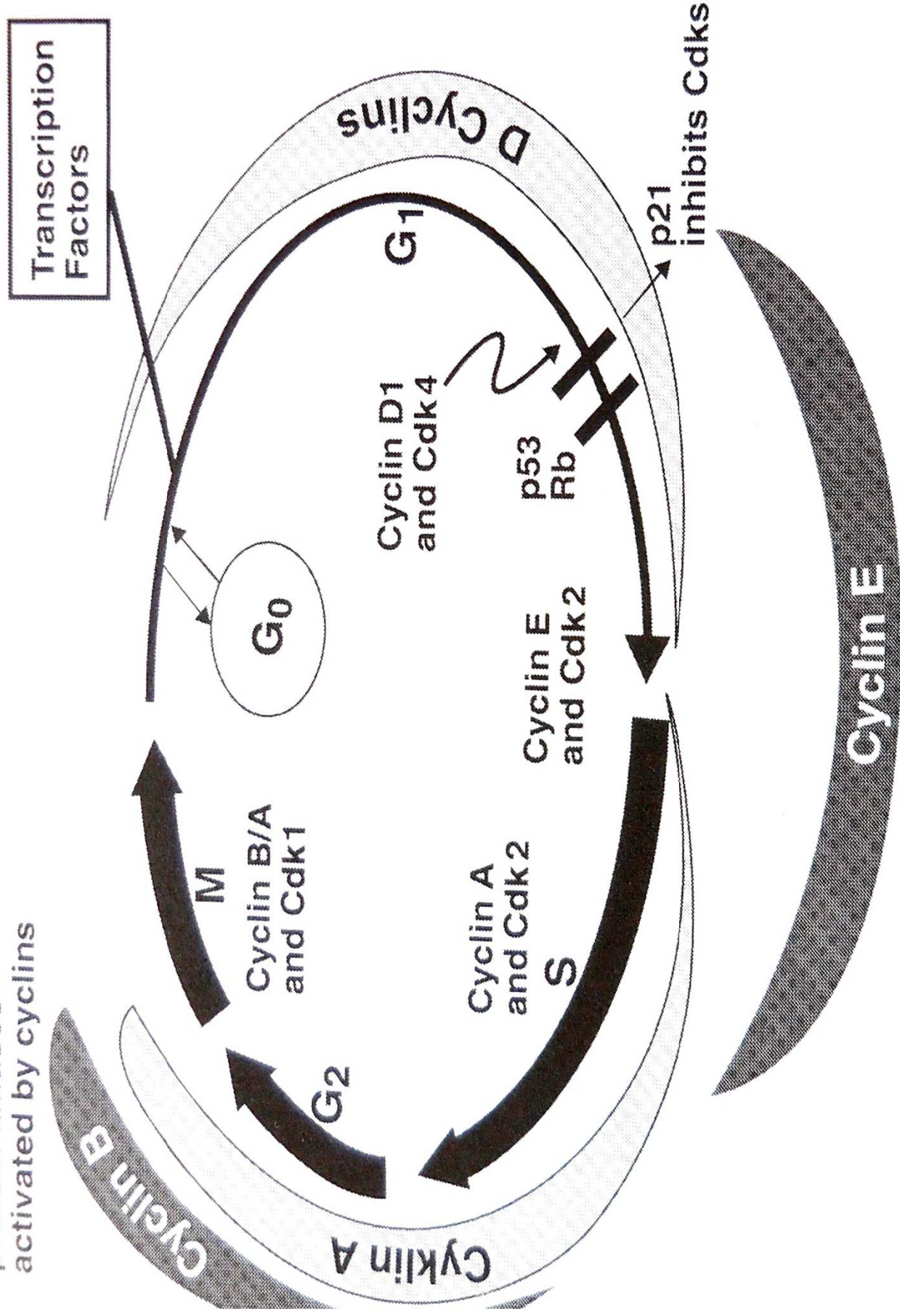
G2:-cyclin A

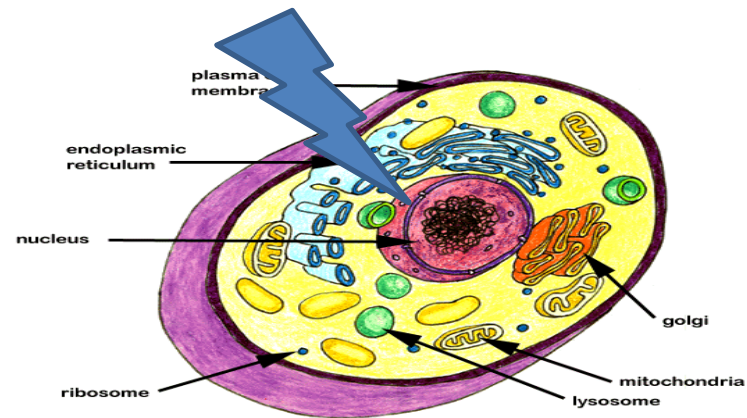
G2-M:- cyclin B

CYCLINE LEVEL OSCILLATE WITH THE PHASE OF CELL CYCLE

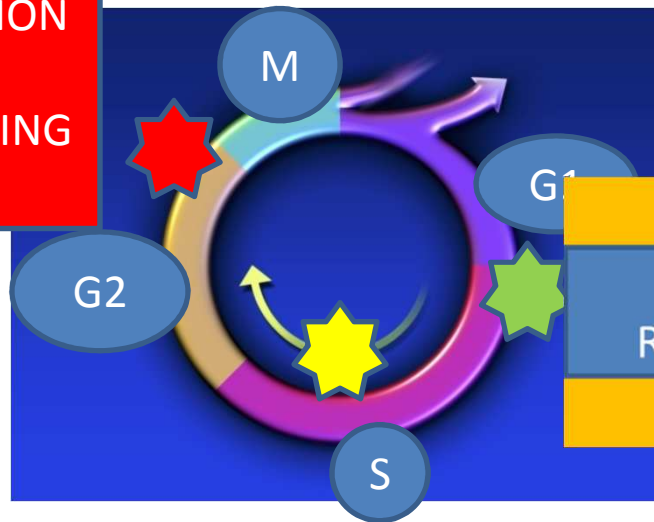
Cdk :- SEVEN TYPES AND LEVELS ARE CONSTANT THROUGH OUT THE CELL CYCLE. ACTIVITY OF Cdk REGULATED BY ACTIVATING KINASES, CYCLIN REGULATORY SUBUNITS, Cdk INHIBITORS

Progression through cycle governed by
protein kinases—
activated by cyclins

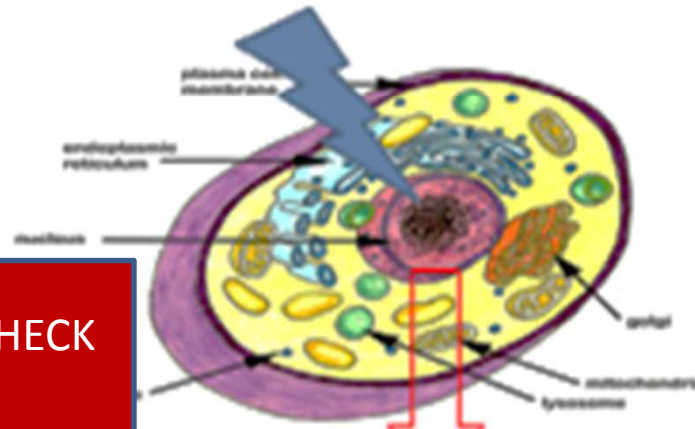




PREVENT SEGREGATION
OF ABERRANT
CHROMOSOME DURING
M PHASE

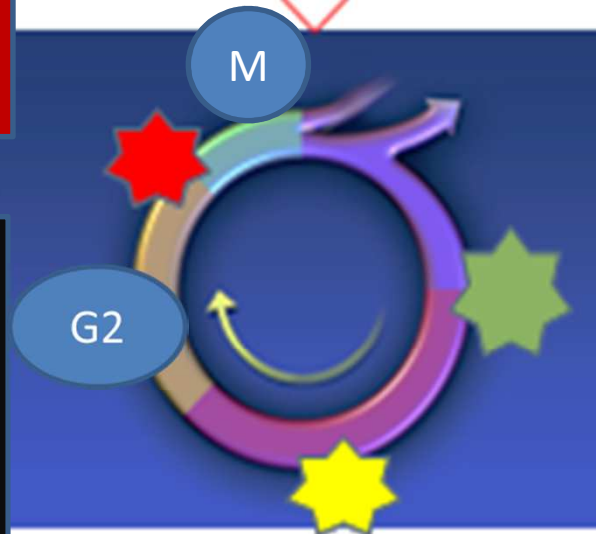


PREVENT
REPLICATION

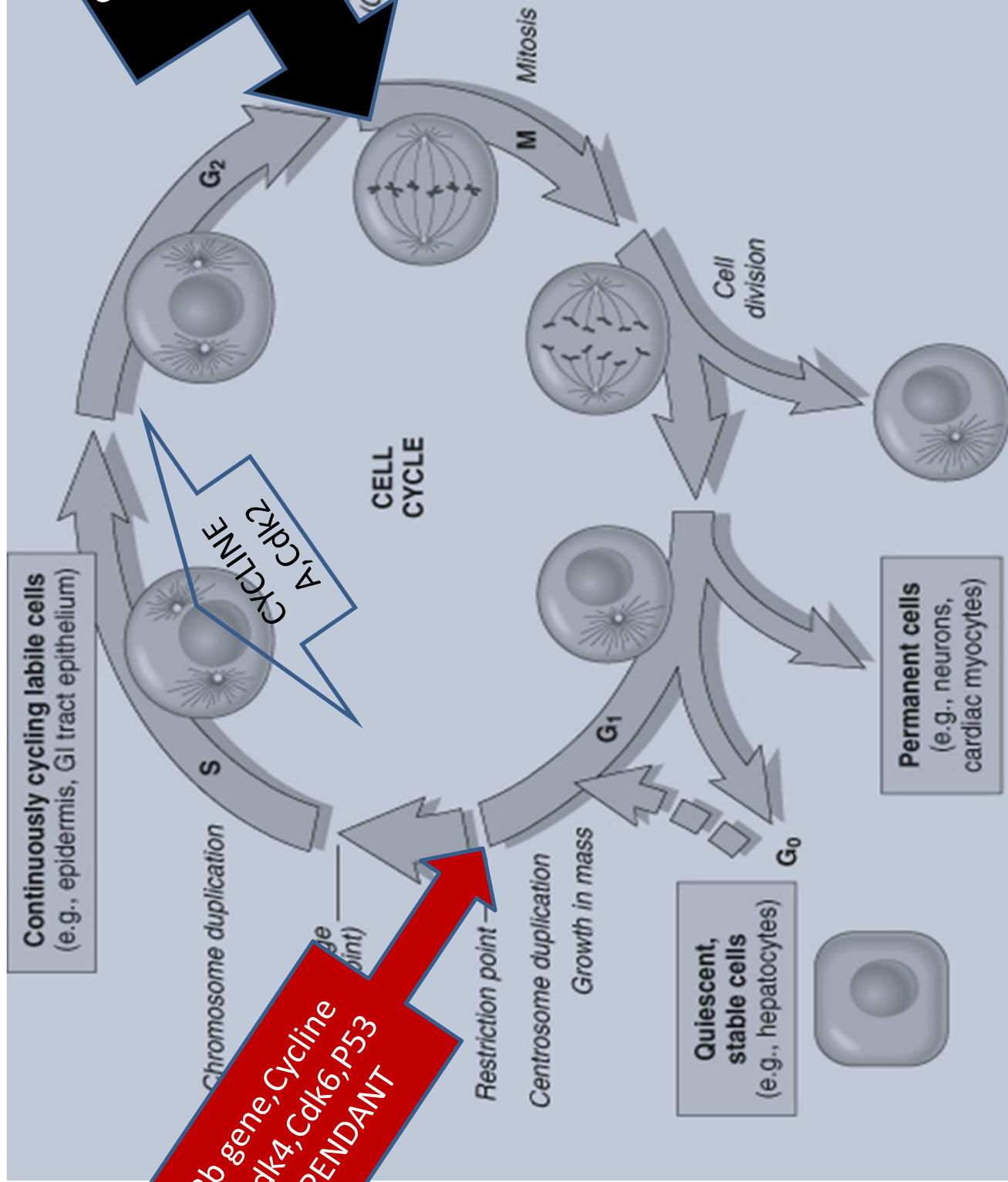


LATE G2/M CHECK
POINT
ATM INDEPENDANT
DOSE DEPENDANT

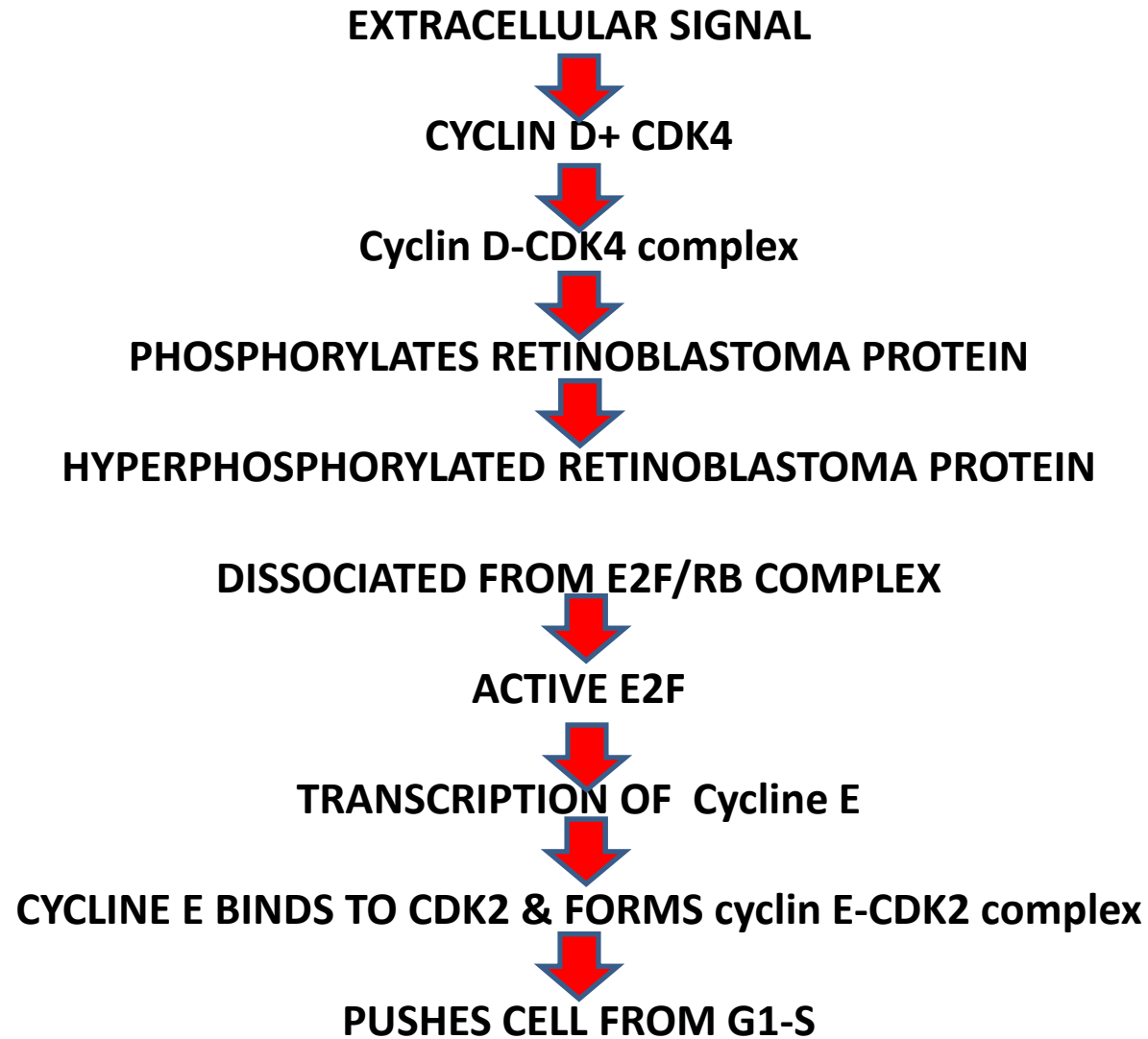
EARLY G2/M CHECK
POINT
ATM DEPENDANT
DOSE
INDEPENDANT

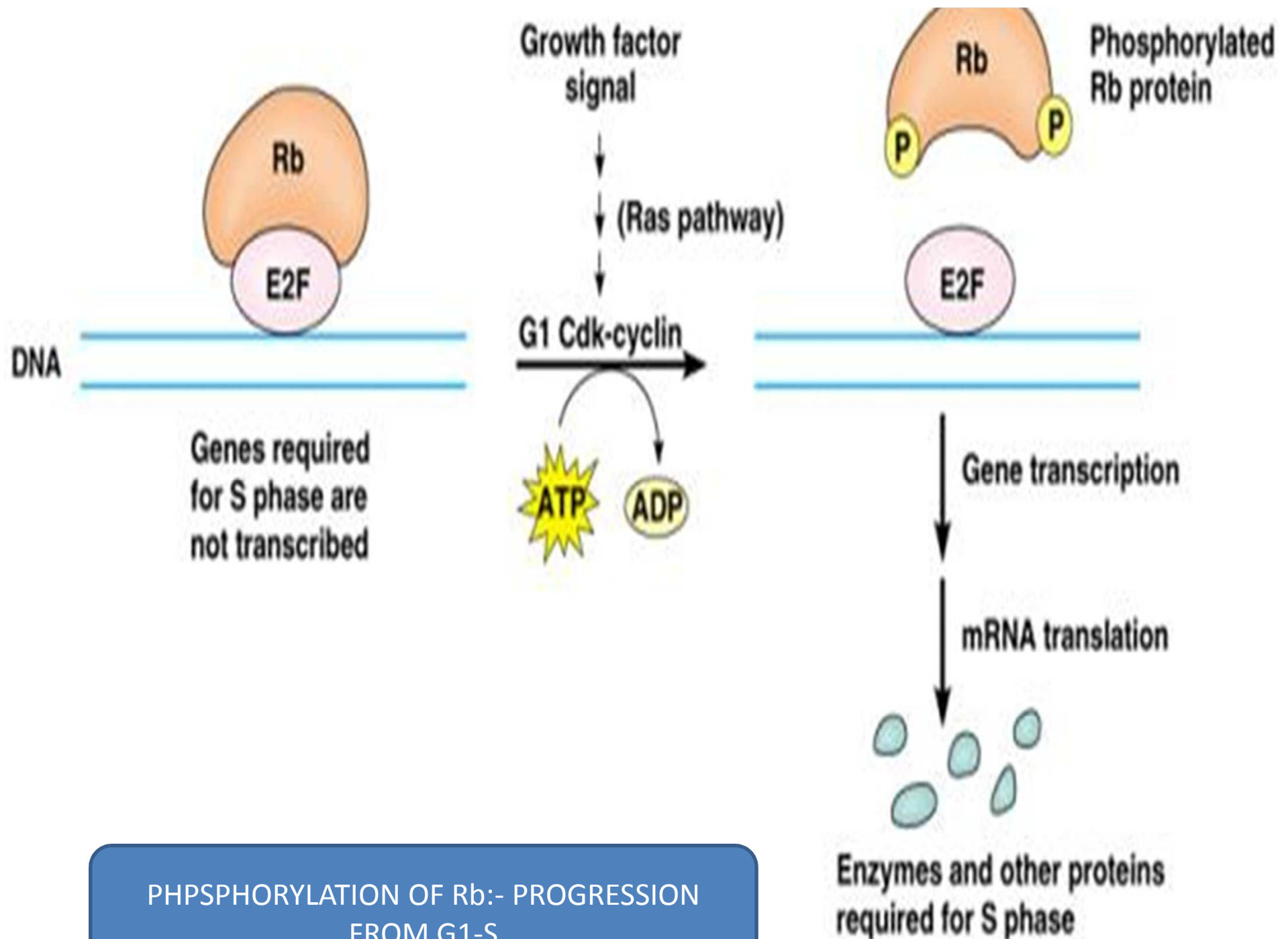


CYCLINE
 B, A, Cdk1
 P53, p21 NOT
 NEEDED FOR
 INITIATION BUT
 NECESSARY FOR
 SUSTAINING
 G2/M ARB

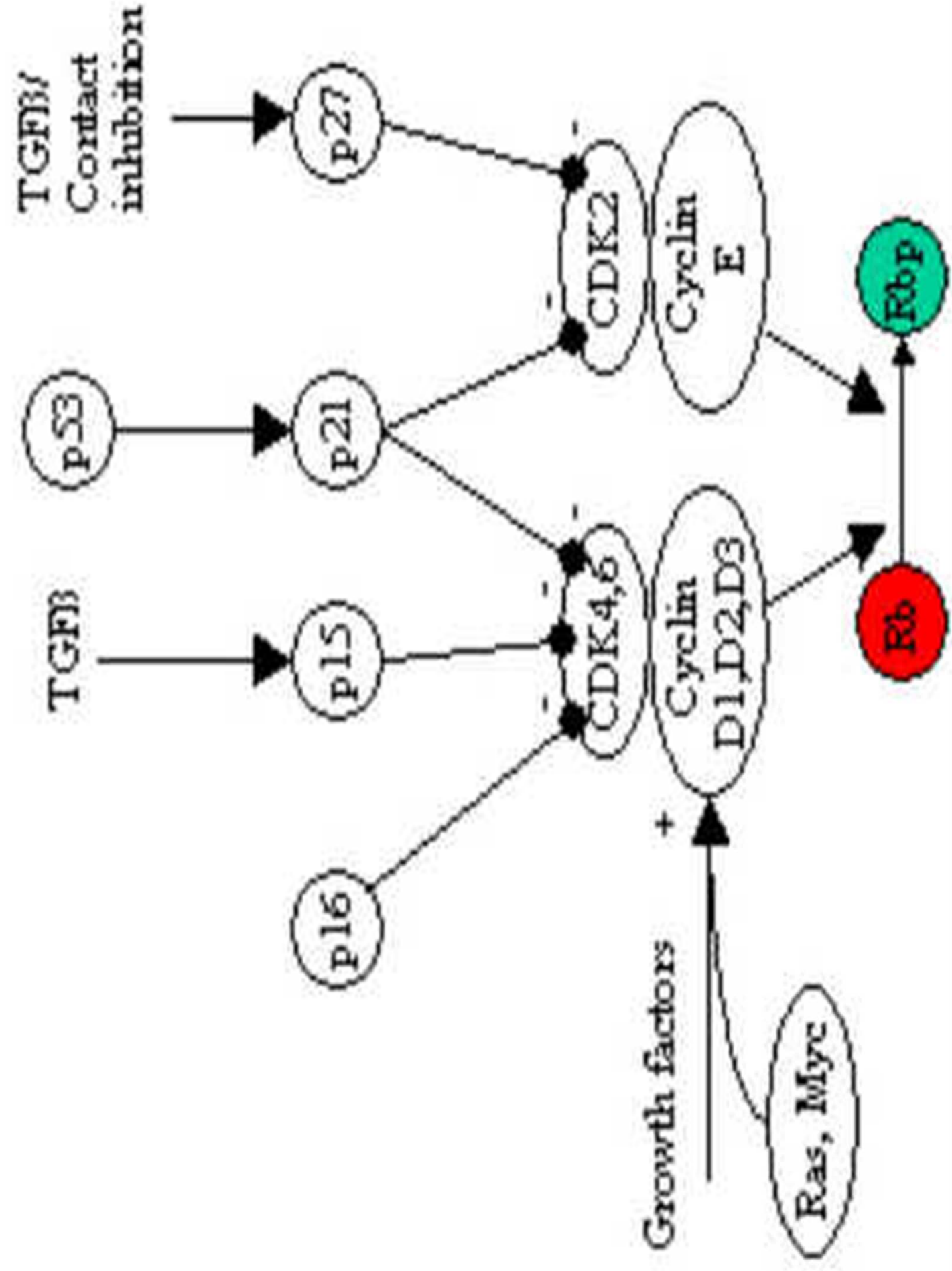


Rb gene, Cycline
 D, Cdk4, Cdk6, P53
 DEPENDANT





PHOSPHORYLATION OF Rb:- PROGRESSION
FROM G1-S



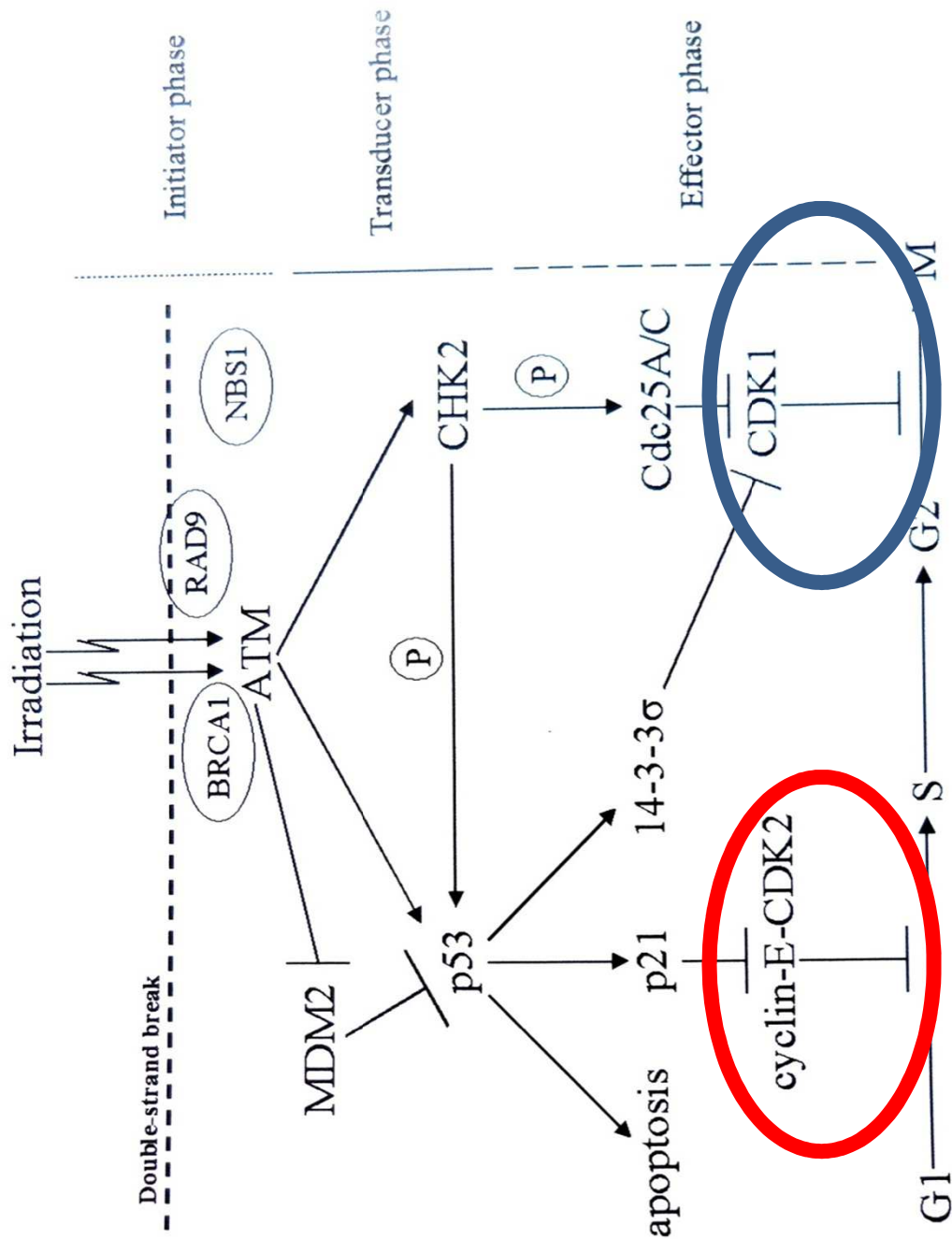
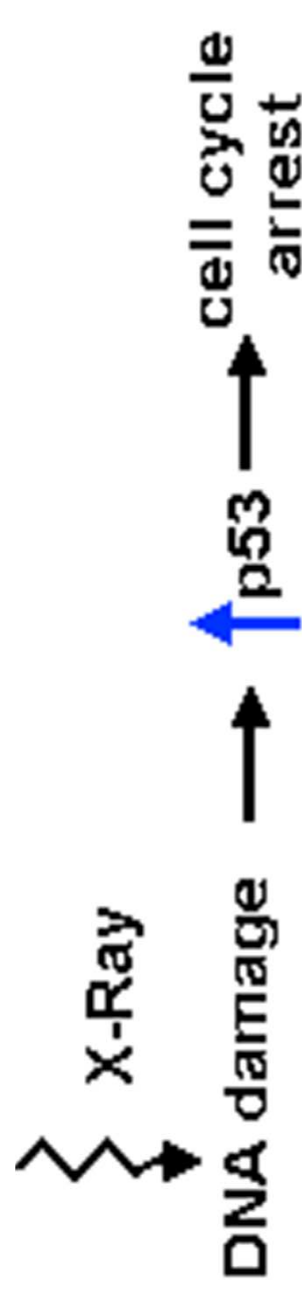


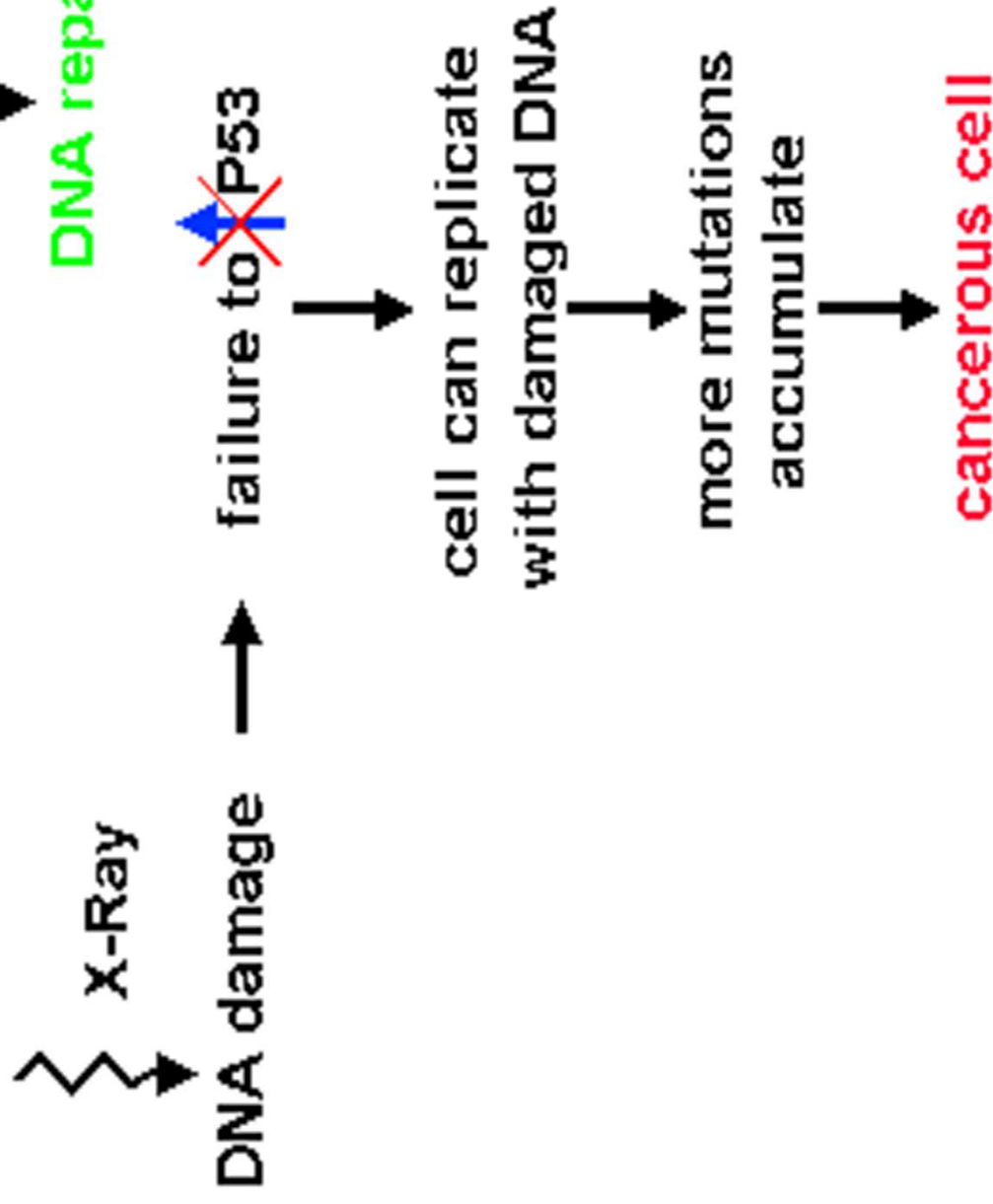
Fig. 2. Ionizing radiation rapidly induces the protein kinase activity of the ATM gene, which in turn interacts with a broad network of proteins to block progression through the cell cycle, allowing time for DNA repair. ATM activates both p53 and CHK2, leading to either a G₁/S or G₂/M cell cycle block, depending on interactions with downstream target genes. Adapted from Samuel T, Weber HO, Funk JO. Linking DNA damage to cell cycle checkpoints. *Cell Cycle*.

wild type P53



DNA repair

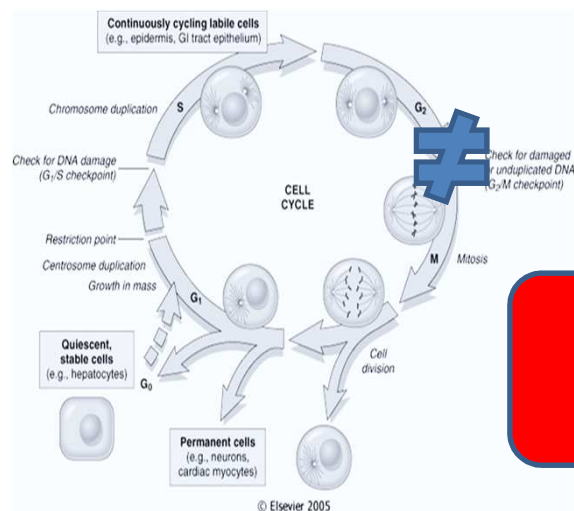
mutant p53



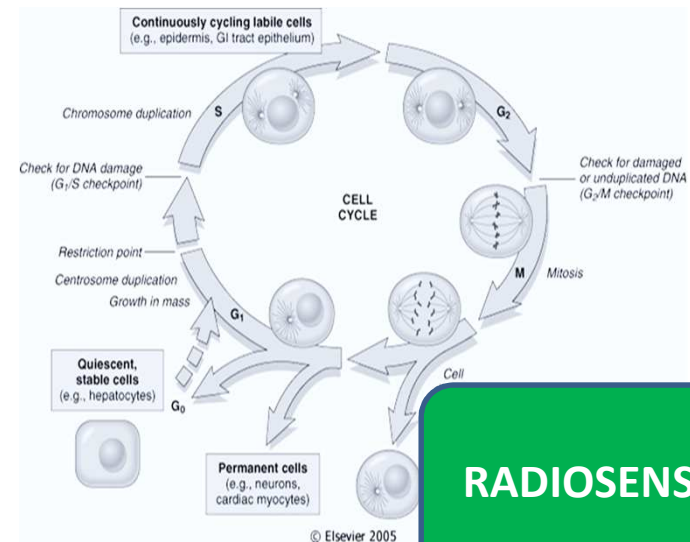
G2/M CHECK POINT

MOST REGULATED OF ALL CHECKPOINTS AND MOST IMPORTANT IN PREVENTING IN APPROPRIATE ENTRY OF DAMAGED CELL IN TO MITOSIS

CELLS LACKING G2 CHECK POINT ARE RADIOSENSITIVE AS THEY CAN NOT REPAIR DAMAGED CHROMOSOME BEFORE ENTERING M



NORMAL



RADIOSENSITIVE

CLINICAL IMPORTANCE

CELL AGE

REASSORTMENT

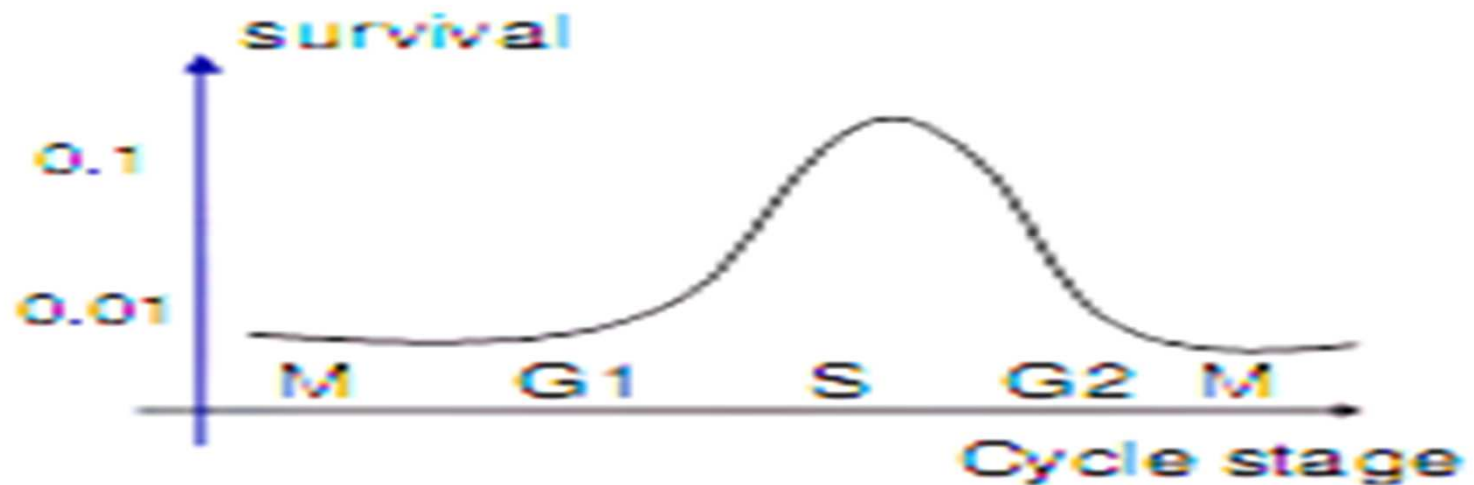
LET VS CELL AGE

CHEMORADIATION

**DAMAGE THE
CHECK POINTS**

AGE RESPONSE

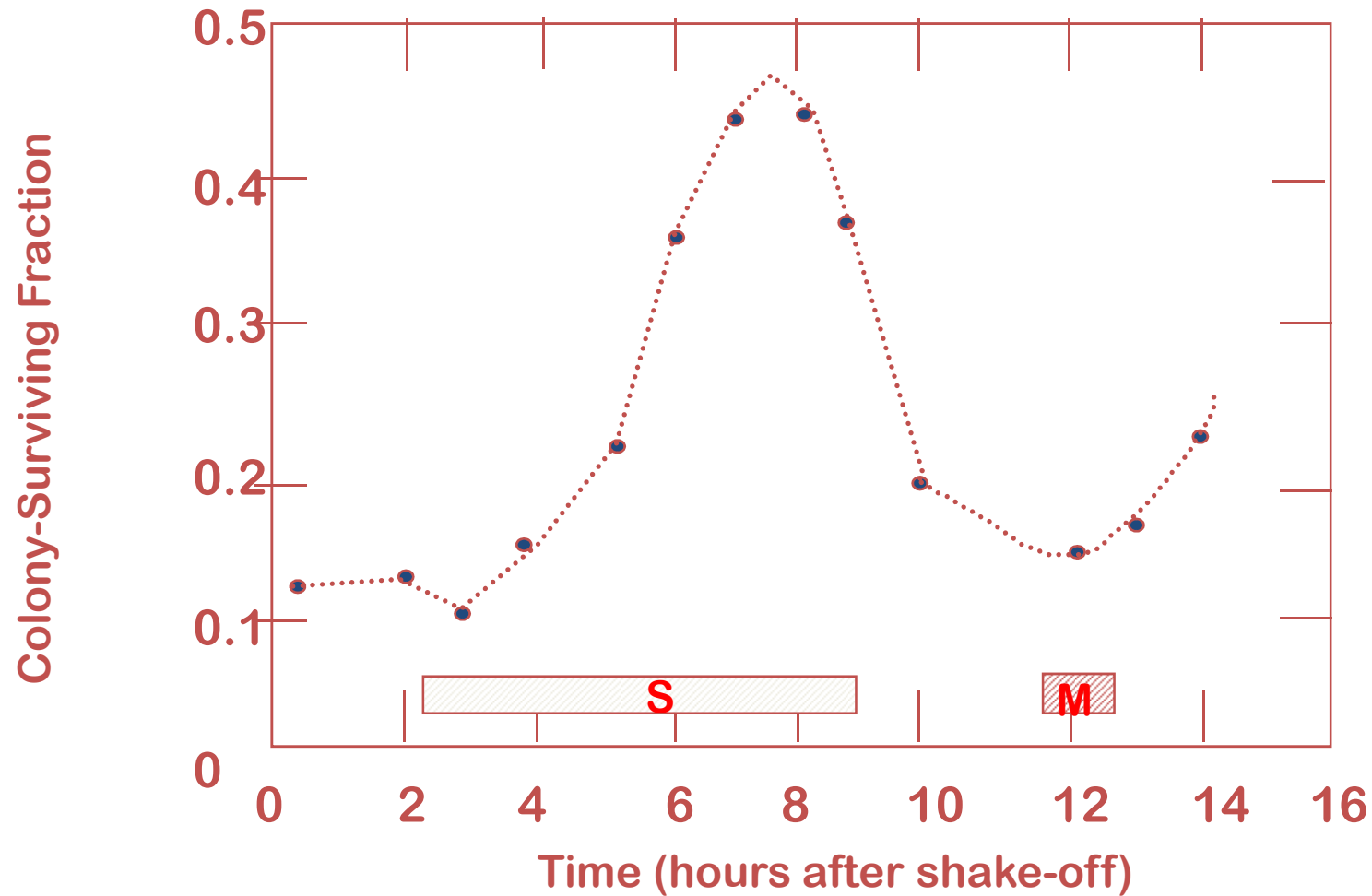
CHANGING RADIOSENSITIVITY DURING THE CELL CYCLE IS OFTEN CALLED AGE RESPONSE



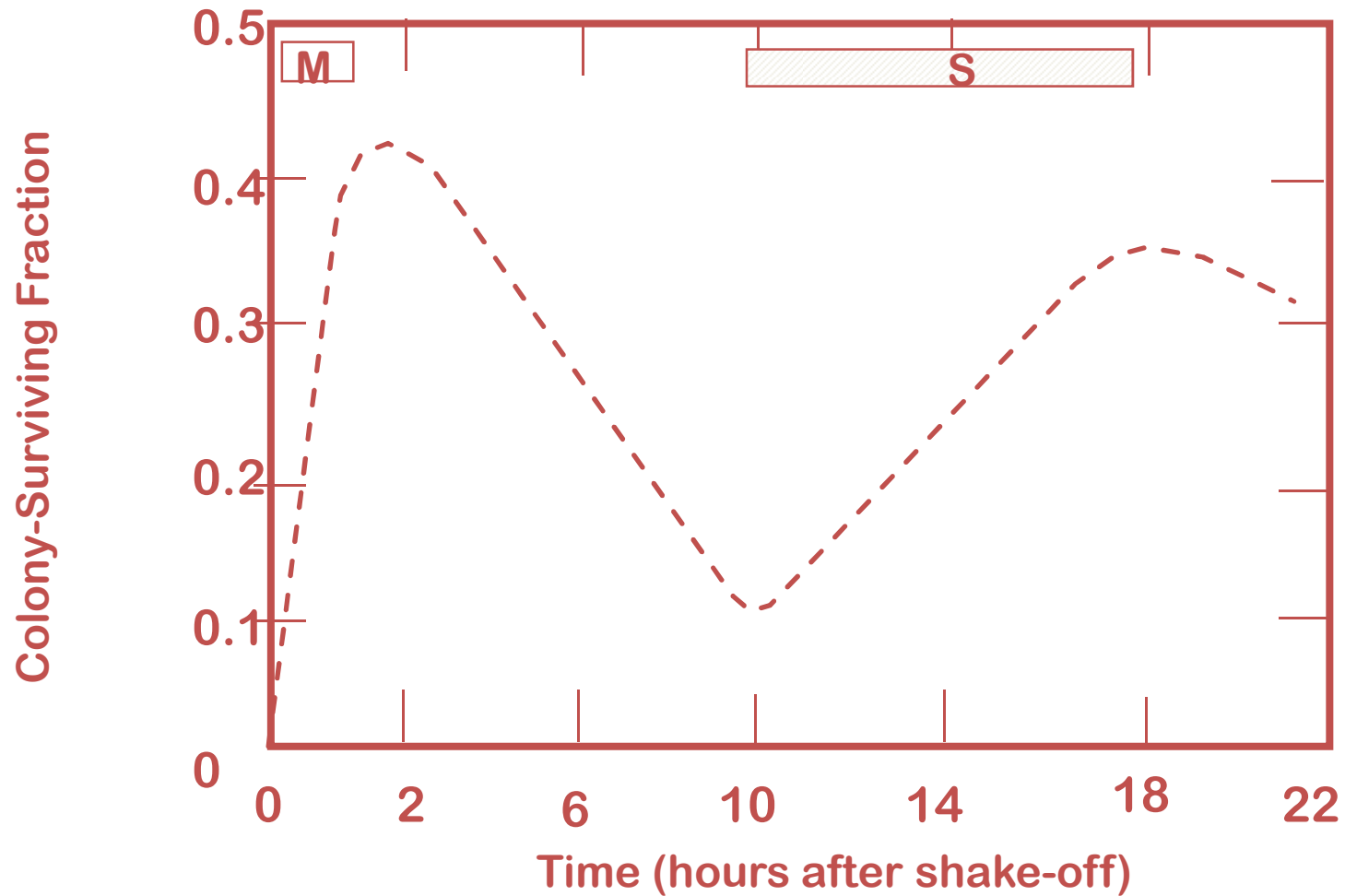
CELL CYCLE AND SENSITIVITY TO RADIATION

- CELLS ARE MOST SENSITIVE AT OR CLOSE TO MITOSIS
- RESISTANCE IS GREATEST IN LATER PART OF S PHASE
- IF G1 PERIOD IS PROLONGED, A RESISTANCE PERIOD IS EVIDENT AT EARLY IN G1, FOLLOWED BY A SENSITIVE PERIOD TOWARDS THE END OF G1.
- G2 PHASE IS USUALLY SENSITIVE, PERHAPS AS SENSITIVE AS M PHASE

Synchronously Dividing Chinese Hamster Cell



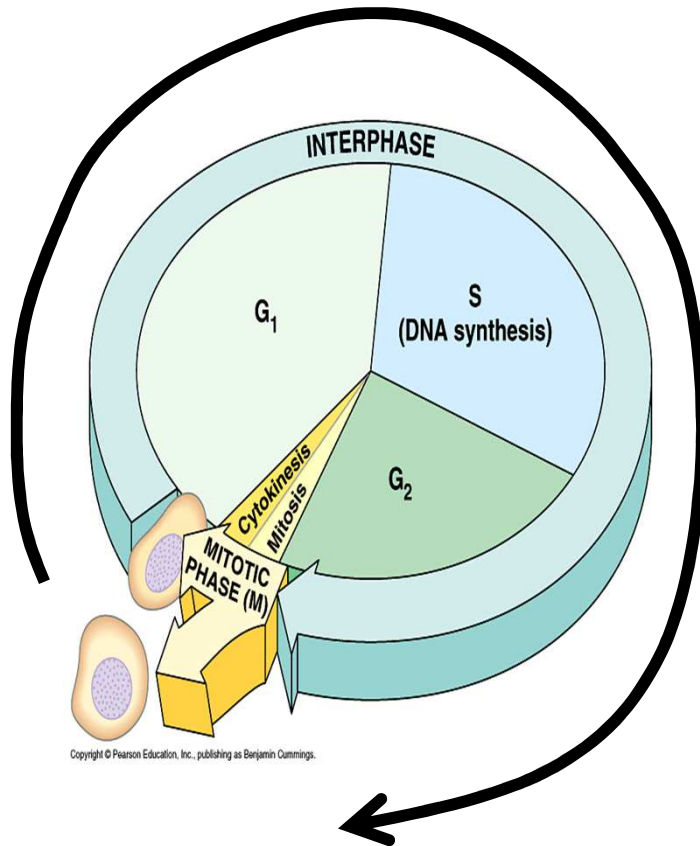
Surviving Fraction of HeLa Cells



WHY THE CHANGE IN SENSITIVITY

- CHANGE IN AMOUNT OR FORM OF DNA RESULT IN VARIATION OF SENSITIVITY. IN S PHASE DNA CONTENT IS DOUBLED AND CHROMOSOME MATERIAL CONDENSES INTO DISCRETE ENTITIES.
- CHANGING LEVEL OF NATURALLY OCCURRING SH GROUP
- NHEJ (Non homologous end joining) is primarily found in G1 PHASE OF CELL CYCLE WHERE THERE IS NO SISTER CHROMATID
- IN LATE S/G2, UNDAMAGED CHROMATID ACTS AS A TEMPLATE FOR REPAIR i.e. HOMOLOGOUS RECOMBINATION REPAIR TO REPAIR DOUBLE STRAND BREAK.
- SO G1 CELLS ARE MORE SENSITIVE DUE TO NHEJ AN ERROR PRONE REPAIR AND S PHASE CELLS ARE RADIORESISTANT DUE TO ERROR FREE HRR PROCESS.
- ALSO DEPENDS ON EFFICIENCY OF REPAIR PROCESS

Redistribution or Reassortment

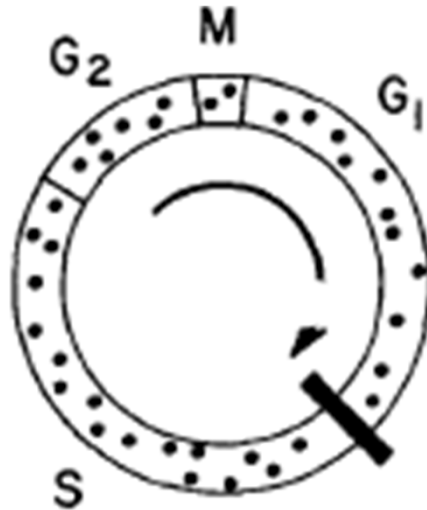


During fractionation of RT, cells in sensitive phase are killed and before next fraction, cells progress through cell cycle and again come to sensitive phase. This process is known as

**REDISTRIBUTION/
REASSORTMENT.**

Redistribution or Reassortment

- Asynchronization:-
 - The dividing cells are distributed throughout all phases of cell cycle known as asynchronization.



Redistribution or Reassortment

- Synchronization:-

When If all the dividing cells occupy the same phase of the cell cycle and then all cells progress through various phases of cell cycle simultaneously.



Hydroxyurea kills all the cells in S-phase and blocks the cells at the end of G₁-phase.

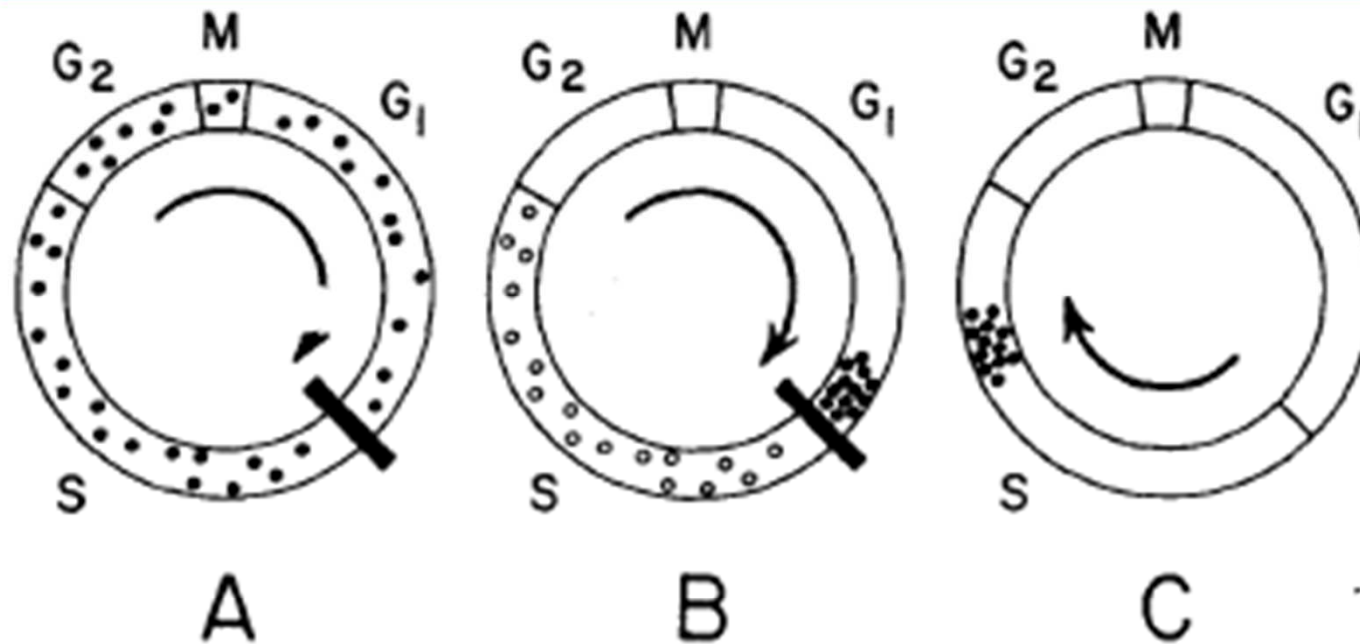


Figure 5-4. Mode of action of hydroxyurea as an agent to induce synchrony. This drug kills cells in *S* and imposes a “block” at the end of *G*₁. Cells in *G*₂, *M*, and *G*₁ when the drug is added accumulate at this block. When the block is removed, the synchronized cohort of cells moves on through the cycle.

Redistribution or Reassortment

- So by making the cells in synchronization and knowing the time when they pass through G2, M phase, which is the most sensitive phase to radiation, we may achieve maximum kill by scheduling fractionation accordingly.

EFFECT OF CELL SYNCHRONY ON RADIOSENSITIVITY

- **Cells are more sensitive to radiation during mitosis and in G2 phase, least sensitivity in S phase.**
- **Thus the concept of synchronizing tumor cells in a phase of the cell cycle that is sensitive to radiation was recognized as a potentially important way to enhance the clinical efficacy of RT**
- **Redistribution – split / # doses of RT may be more efficacious in part, by inducing a transient cell cycle arrest, after which second RT # is administered.**

SYNCHRONISED TUMOR CELLS IN A PHASE OF THE CELL CYCLE THAT IS SENSITIVE TO RADIATION WAS RECOGNISED AS A POTENTIALLY IMPORTANT WAY TO ENHANCE THE CLINICAL EFFICACY OF RADIATION

- **Therapeutic application of synchronization has certain limitations**

- ❖ **Timing of synchronization varies** in different cell lines and that optimal synchronization is, therefore, seldom achieved.
- ❖ Synchrony of cell populations is difficult to maintain and many human tumors display a **kinetic heterogeneity** even after synchronization.
- ❖ Synchronization of cell populations before each RT fraction would be cumbersome and difficult to achieve.

Energy Deposition

- **Low-LET (sparsely ionizing radiation)**
 - x-rays
 - gamma
 - betas (higher energy)
- **High-LET (densely ionizing radiation)**
 - alphas
 - betas (lower energy)
 - protons
 - neutrons

Linear Energy Transfer (LET)

- LET is the average energy locally imparted (deposited) per unit track length (keV/ μm)
- Different than “stopping power” (energy loss)
- Track averaged vs energy averaged

Track Average | o o o o | o o | o o o o | o o | c o o | o o o | o o o |

Energy Average | o o o | o o o o | o o o o | o o o o | o o o | o o o | o o o o | o o o o |

Some typical values

RADIATION	LET (keV/ μm)	
Cobalt-60 γ -rays	0.2	
250-kV x-rays	2.0	
10-MeV protons	4.7	
150-MeV protons	0.5	
	Track Avg.	Energy Avg.
14-MeV neutrons	12	100
2.5-MeV α -particles		166
2-GeV Fe ions		1000

LET Vs CELL CYCLE

- AS LET INCREASES THE VARIATION IN RADIOSENSITIVITY THROUGH CELL CYCLE DECREASES.
- AT VERY HIGH LET THE AGE RESPONSE FUNCTION IS ALMOST FLAT I.e RADIOSENSITIVITY VARIES LITTLE WITH THE PHASE OF CELL CYCLE.

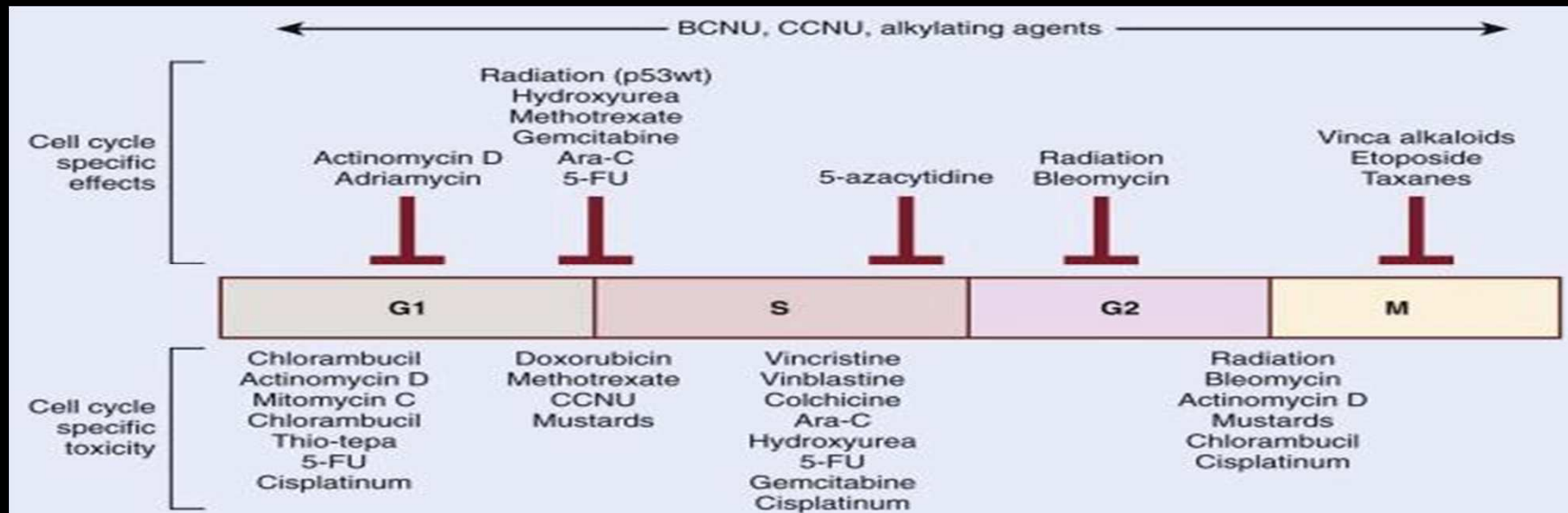
Chemoradiation

Mechanism of Interaction

- Increase in initial radiation damage
- Inhibition of cellular repair
- Cell cycle effects
 - Elimination of radioresistant S phase cells
 - Arrest in radiosensitive G2 or M
- Counteracting radioresistance caused by hypoxic cells
 - Elimination of hypoxic cells
 - Increase in tumor oxygenation through cell loss
- Overcoming accelerated repopulation

KINETICALLY BASED ADMINISTRATION OF CT & RT

- Different types of cytotoxic drugs arrests cells at specific checkpoint
 - Vinca alkaloids arrest cells in S phase
 - Taxol blocks cells in radiosensitive G2M phase
 - Flavopiridol (CDKI) accumalates cells in G1 & G2 phase
 - 5-fu increases RT sensitivity by killing cells in S phase
 - Gemcitabine acts on cells in S phase



CISPLATINUM

- COMMON DRUG USED AS RADIOSENSITIZERS
- Reacts with cellular DNA to form intrastrand and interstrand crosslinks producing its characteristic biologic effect.
- Inhibition of DNA replication and RNA transcription leading to DNA breaks and miscoding.

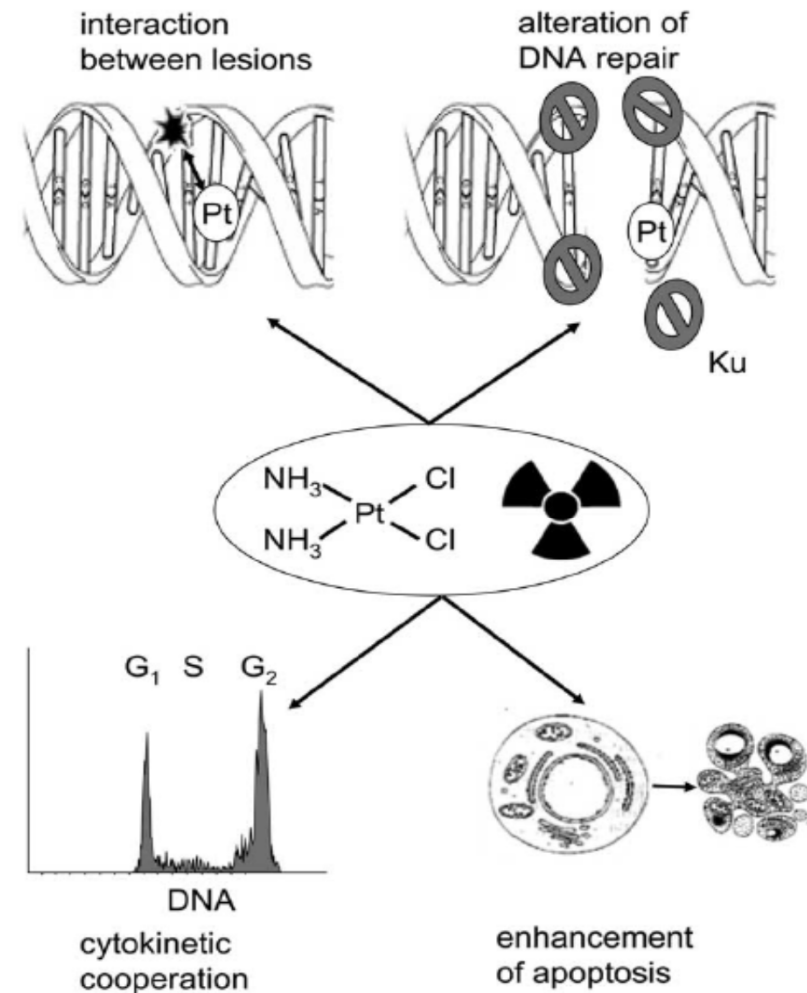
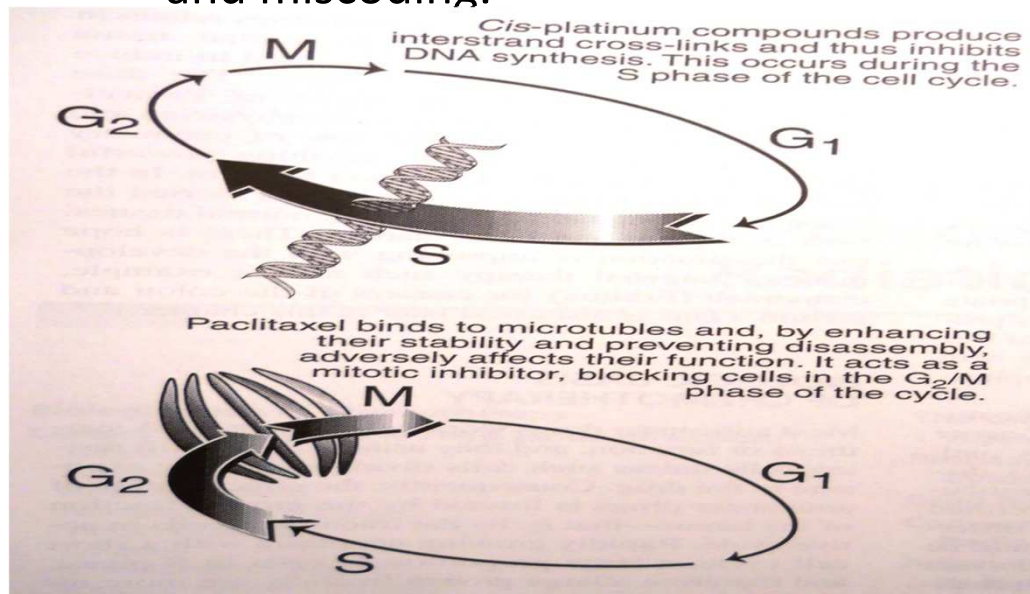
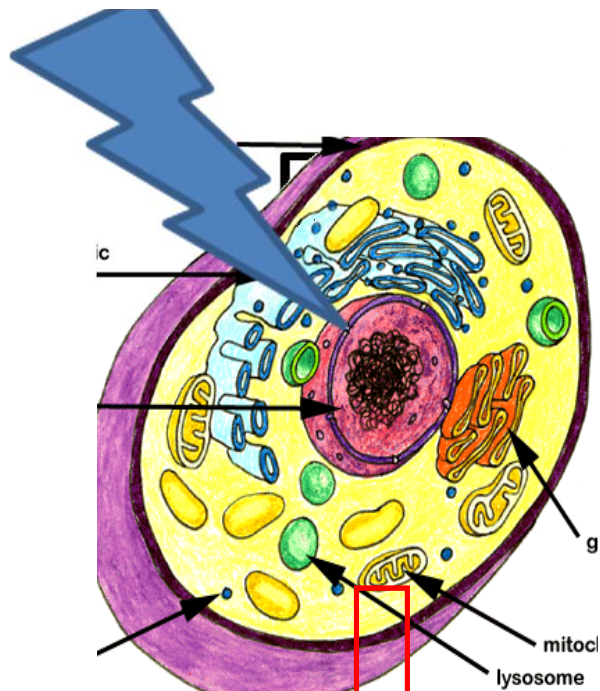


Figure 2 Interactions of cisplatin with radiation.

Molecular Checkpoint Genes

- Cellular progression through cycle is controlled by checkpoint genes
 - to ensure completion of events prior to progression
 - at G₂, cells are halted to inventory & repair damage before mitosis
 - cells where checkpoint gene is inactivated ...
 - move directly to mitosis, even with damaged chromosomes
 - are more sensitive to UV or ionizing radiation (or any DNA damaging agent)

CHEMICAL INHIBITORS OF CHK POINT



UCN-O1
FLAVOPIRIDOL
ROSCOVITINE
CEP-3891

G2-M

KU
55953

G1

CEP 3891

S



Table 1 Evidence for Radiosensitization Using Chemical Inhibitors of Cell-Cycle Checkpoint Control, DNA Repair, and the Proteasome

Agent	Target/Action	Evidence for Radiosensitization
Checkpoint inhibitors UCN-01	CHK1; inhibits G2 checkpoint	In vitro: sensitizes colon, breast, lymphoma, cervix, lung cancer cell lines In vivo: synergistic growth delay in murine fibrosarcoma following fractionated radiotherapy in vivo; clinical trials ongoing
Flavopiridol	Non-specific for CDK; inhibits G2 checkpoint and DNA-dsb repair	In vitro: sensitizes esophageal and colon cancer cell lines In vivo: increased growth delay in murine tumors and colon cancer xenografts; clinical trials ongoing
Roscovitine(CYC-202)	CDK1/CDK2/CDK5; inhibits DNA-dsb repair	In vitro: sensitizes breast cancer cell lines In vivo: increased growth delay in breast cancer xenografts; clinical trials ongoing
CEP-3891 KU55953	CHK1; inhibits S and G2 checkpoint ATM; inhibits G1 and G2 checkpoints and DNA-dsb repair	In vitro: sensitized osteosarcoma cells In vitro: sensitized HeLa cells
AdenoWTp53	p53; inhibits cell cycle arrests and DNA-dsb repair and induces apoptosis	In vitro: sensitizes brain, lung, prostate, and head and neck cancer cell lines In vivo: complete and partial clinical responses in lung cancer; clinical trials ongoing
ONYX-015	p53; targets MTP53-expressing tumors through cell cycle arrest and apoptosis	In vitro: sensitizes colon and thyroid cancer cell lines In vivo: sensitized glioma xenografts in vivo; clinical trials ongoing
DNA repair inhibitors Vanillin, SU1172, IC886, NU7163, NU7026 Imatinib	DNA-PKcs and NHEJ; inhibits DNA-dsb repair c-ABL; inhibits RAD51/HR and DNA-dsb repair	In vitro: sensitizes ovarian, HeLa, glioma, CHO, and fibroblast cells In vitro: sensitizes leukemic and glioma cells
3-AB, ISQ, NU1025, KU0058684 or AG14361	PARP; inhibits DNA-ssb repair and homologous recombination	In vitro: sensitizes prostate, lung, and lymphoma cancer cell lines In vivo: AG14361 sensitized colon cancer xenografts
Proteasome inhibitors PS-341 (bortezomib)	26S proteasome; altered apoptosis, cell cycle arrest and signal transduction	In vitro: sensitizes melanoma, lymphoma, colon cancer cell lines In vivo: sensitized colon cancer xenografts; clinical trials ongoing
Ritonavir, saquinavir	26 proteasome; HIV protease	In vitro: sensitizes glioma and prostate cancer cell lines

Abbreviations: NHEJ, nonhomologous end-joining; HR, homologous recombination; PARP, poly(ADP-ribose) polymerase-1; HIV, human immunodeficiency virus; DNA-dsb, DNA double-strand break; MTP53, mutant p53. Data from the following references: 1,2,7,8,10,11,13,14,16,18,28,31,32,37,41,44,49

Take home message:-1

- Cell death occurs only after cell attempt to divide.
- Less differentiated cell having greater proliferative capacity → More radiosensitive.
- According to Casaretts classification, 4 types of cells depends on position of cells in cell cycle and sensitivity accordingly.
- In eukaryocyte, there is resting phase, Interphase and Mitotic phase.
- Interphase consists of G_1 , S, G_2 .
Mitotic phase – Karyokinesis and cytokinesis.

Take home message :- 2

- Time between successive division of cells is known as Mitotic cycle time.
- Difference in cell cycle time is mostly due to variation in length of G_1 period.
- DNA break may be single stranded/double stranded.
- NHEJ mostly occurs at G_1 and HRR occurs in S and early G_2 phase. NHEJ is error prone.
- Radiation induced cell death can be either necrotic death/ Apoptotic cell death.
- 3 check points- G_1 -S, S , G_2 M.

Take home message:-3

- Cyclin+ CDK is the key of checkpoint.
- G₁S checkpoint prevent replication of DNA and G₂M check point prevent segregation of aberrant chromosome during M phase.
- G₁S checkpoint depends on Rb gene and G₂M on CHK2. p53-p21 needed for sustaining G₂M arrest.
- Phosphorylation of Rb – progression from G₁-S.
- Changing radiosensitivity during the cell cycle is called age response.
- Cells are more sensitive at S1 close to mitosis and resistance in later part of S phase.
- Making cells synchronise and knowing G₂M phase, we may achieve maximum cell kill.
- As LET increases, the age effect is lost.
- Kinetically based administration CT and RT and prevention of check points are various option.

THANK YOU

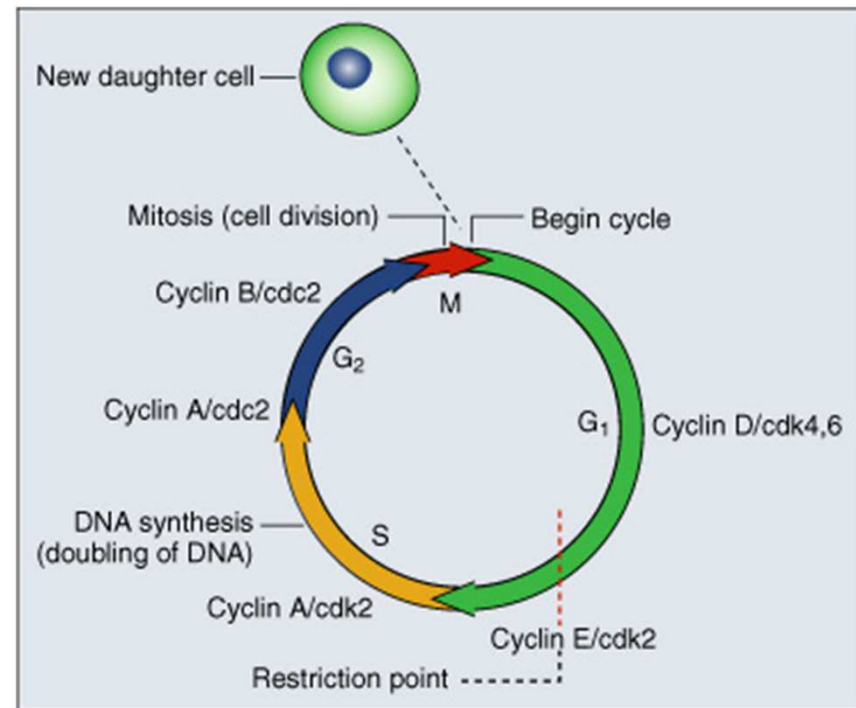
PHASE OF CELL CYCLE	CYCLIN	Cdk	GENE	
G1	D,E,A	Cdk4,Cdk6		D-GROWTH FACTOR SENSOR
G1/S TRANSITION	E	Cdk2,	Rb:-DECREASE GO TO S P53,p21:-DECREASE GO TO S	ARREST AT G1/S JUNCTION AVOID REPLICATION OF DAMAGED DNA
S	A	Cdc 25A		AVOID REPLICATION OF DAMAGED DNA REMOVE REPLACE MISMATCH REPAIR
G2/M	B,A	Cdk1	INCREASE CYCLIN A - ARREST	ARRESTED IN G2 TO ALLOW DNA REPAIR CELLS LACKING G2 CHECK POINT ARE RADIOSENSITIVE AS THEY CAN NOT REPAIR DAMAGED

Effects of Oxygenation

- Oxygen enhancement ratio (OER)
 - aerated cells are more radiosensitive (due to “fixing”)
 - oxygen reacts with free radicals to produce peroxide, which constitutes non-repairable damage
 - typical values: 2.5 - 3 for γ and x-rays
- OER OF G_1 : ~ 2.3 TO 2.9
- S: ~ 2.8
- G_2 : 2.3-2.4
- Provides implications for radiation therapy modes

5-FU and Radiation

- Synergistic effect
- Perturbing cell cycle regulation and abrogating radiation induced G_2 arrest
- Reducing time for cell repair.
- Imbalance in deoxynucleoside triphosphate – altered DNA repair.



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- **CLINICAL IMPLICATIONS**

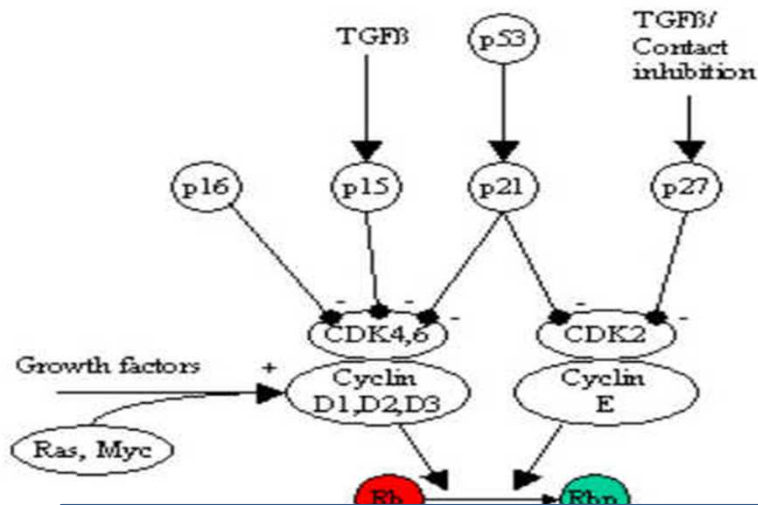
- ➡ **Cells defective in G2 checkpoint are more sensitive to RT and abrogation of G2 checkpoint by caffeine make cells more sensitive to RT.**
- ➡ **Telomerase provides another cell cycle related, tumor specific target. Inhibition of its activity would theoretically lead to eventual cessation of cellular replication**

Cont..

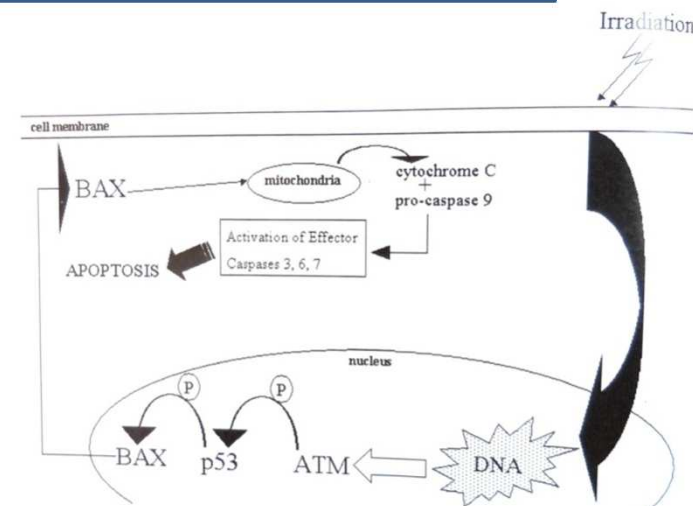
- **Semin Radiat Oncol 2002**
 - The molecular basis of radiosensitivity&chemosensitivity in treatment of cancer breast
 - Powell SN
- **BRCA 1 & 2 deficient tumour shows marked sensitivity to radiation & drug that produces ds breaks.**
- **Overexpression of cyclin D1 is associated with mild radioresistance**
- **P53 & ATM gene also place a significant role in determining response to therapy**

p53

MEDIATES PROGRESSION
THROUGH CELL CYCLE



INDUCE APOPTOSIS
(ACTIVATOR OF
APOPTOSIS)



IN GENERAL LOSS OF p53 IS ASSOCIATED WITH RADIORESISTANCE PHENOTYPE.
P53 MEDIATED RESISTANCE IS MORE IMPORTANT IN CELL THAT DEPEND ON APOPTOSIS
P53,p21 REQUIRED FOR SUSTAINING G2/M ARREST AFTER DNA DAMAGE
DISRUPTION OR ABROGATION OF G2/M CHECK POINT LEADS TO RADIOSENSITIZATION
OF p53 MUTATED CELLS
Pp21 MUTATION SENSITIZE THE TUMOR TO RADIATION
DISRUPTION OF G2 CHECK POINT BY CAFINE /PENTOXYPHYLLINE SENSITIZES THE CELL
TO RT.

