



# Toward Systems Cancer Chronotherapeutics and its integration into home care.

Francis Lévi, MD, PhD



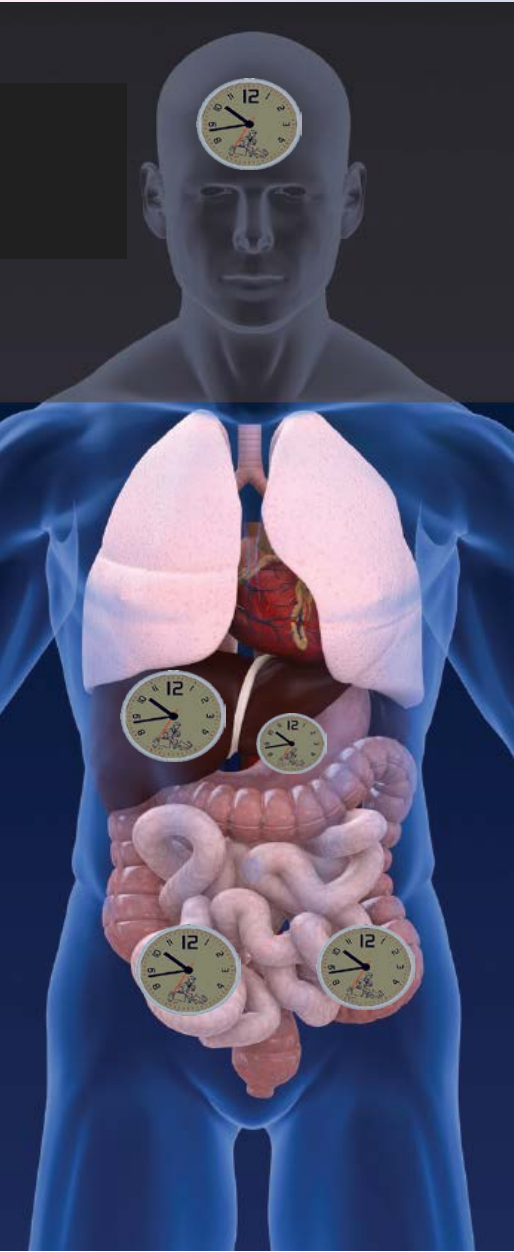
**Warwick**  
Medical School

Cancer Chronotherapy Unit  
Cancer Research Unit

*Rythmes Biologiques et Cancers*

UMR S776

Paul Brousse hospital, Villejuif (France)



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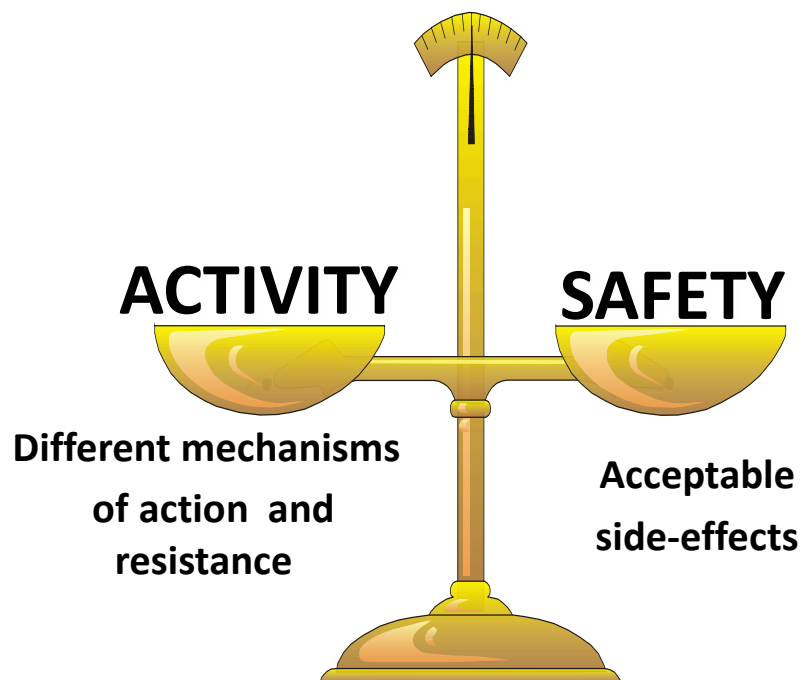
*Rythmes Biologiques et Cancers*

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# Cancer treatments

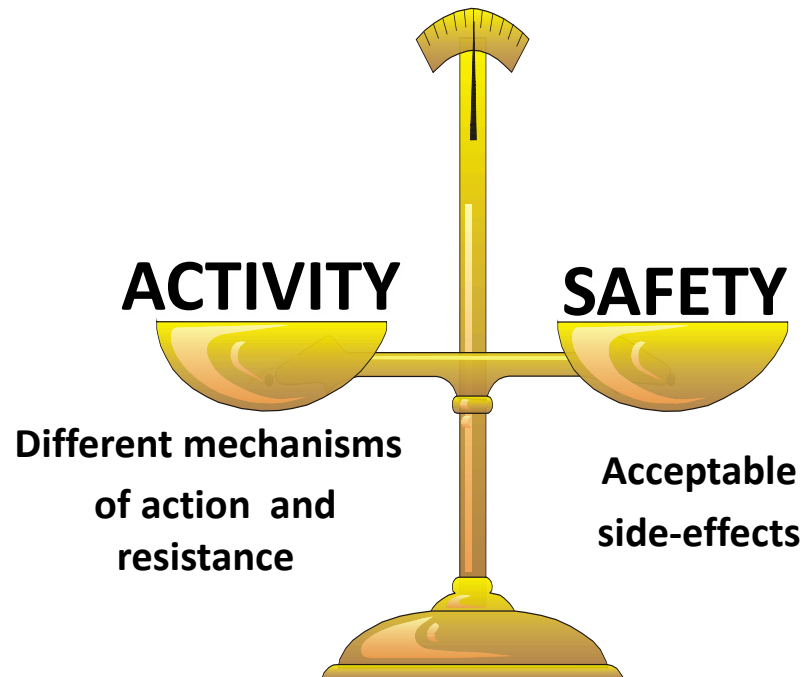
## finding the right balance between safety and efficacy



- Dose
- Schedule
- Combinations
- Route

# Cancer treatments

## finding the right balance between safety and efficacy

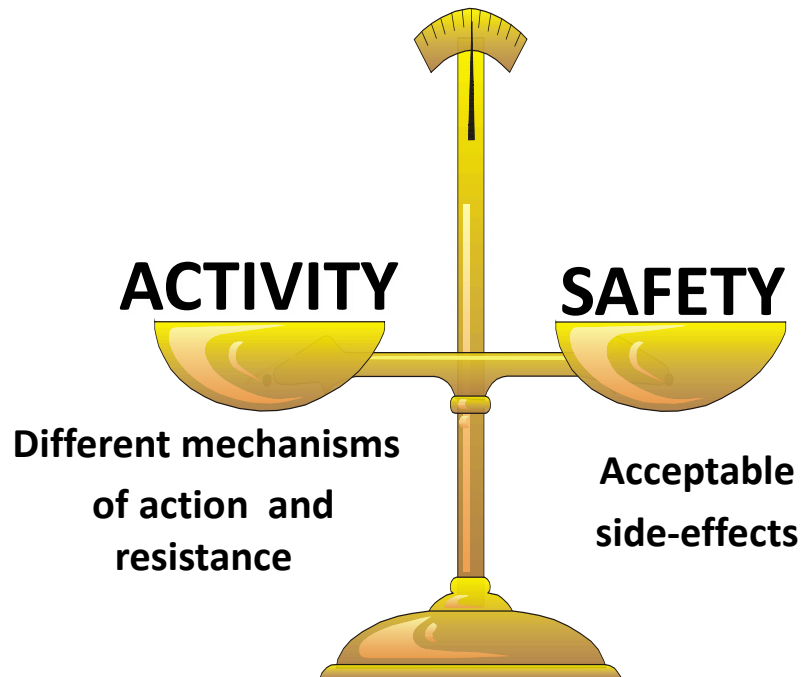


- Dose
- Schedule
- Combinations
- Route

**Relevance of  
biological timing systems?**

# Cancer treatments

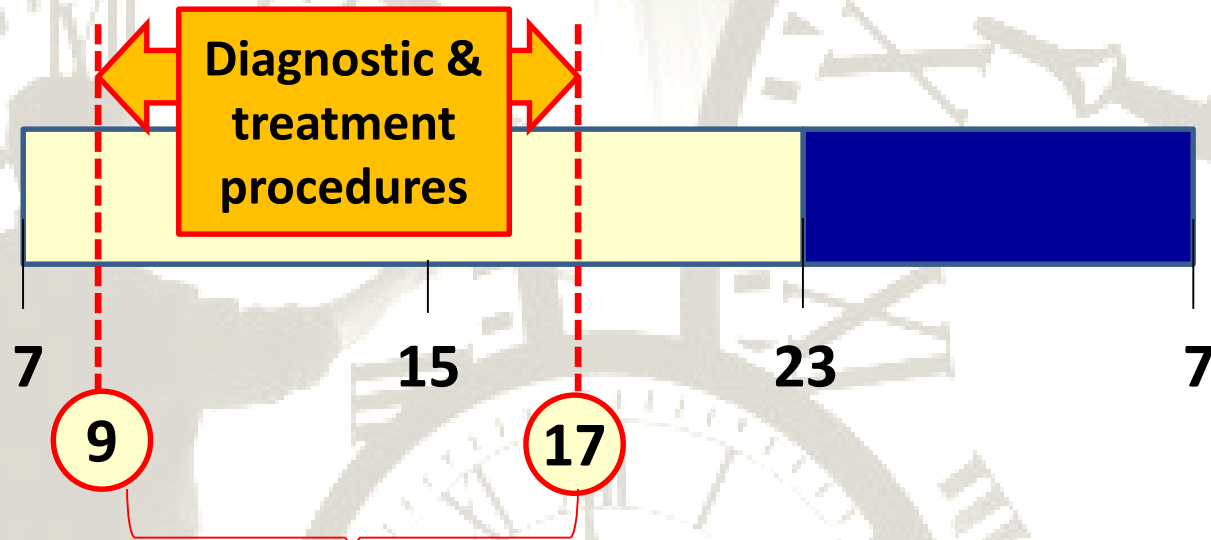
## finding the right balance between safety and efficacy



**Relevance of  
biological timing systems?**



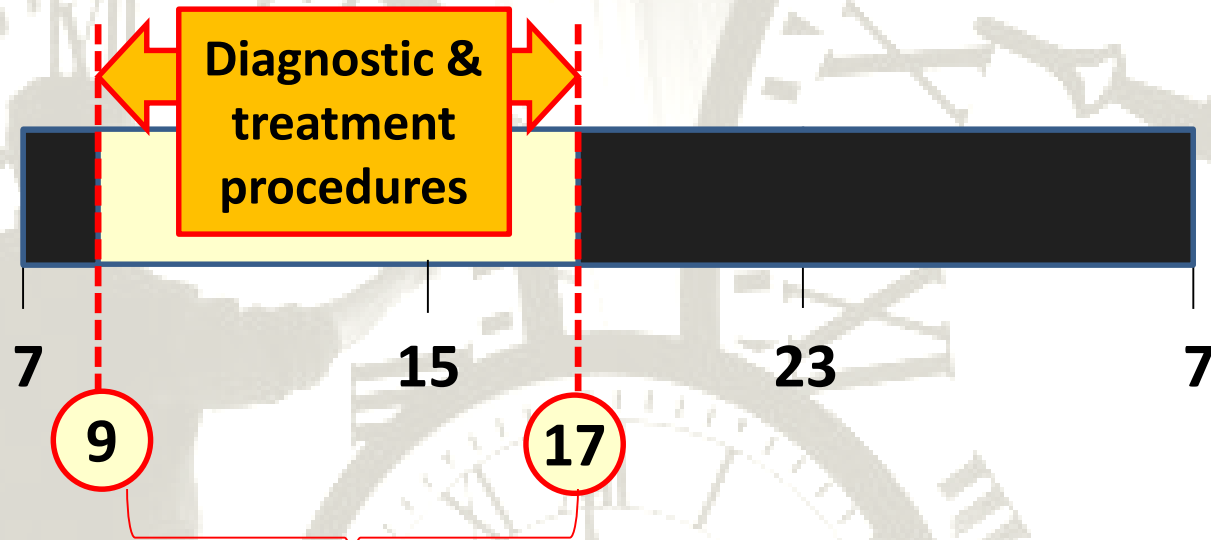
# Usual timing of cancer treatments



**Medical consultations**  
**Medical or surgical procedures**  
**New drug development**  
**Adverse events & efficacy**

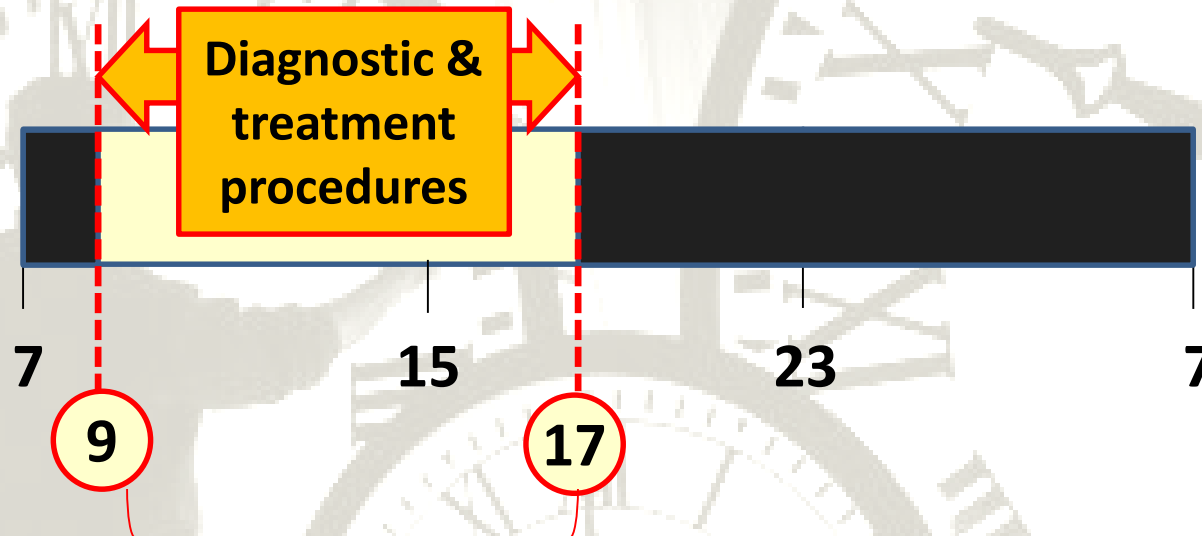


# Usual timing of cancer treatments



- Medical consultations**
- Medical or surgical procedures**
- New drug development**
- Adverse events & efficacy**

## Usual timing of cancer treatments



**Medical consultations**  
**Medical or surgical procedures**  
**New drug development**  
**Adverse events & efficacy**

**Hypothesis:**  
**Biological functions operate at constant or random pace**

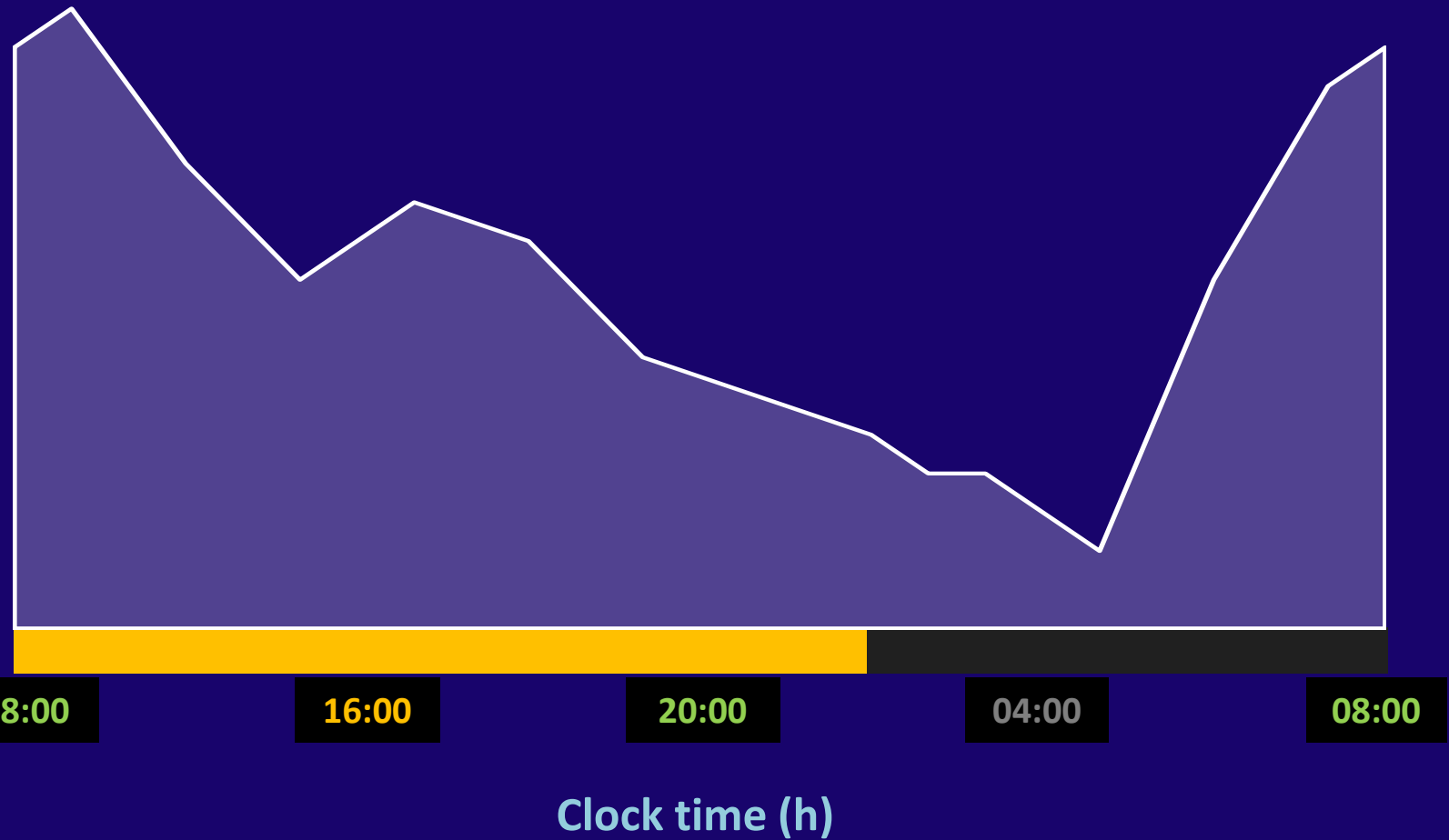




Clock time (h)

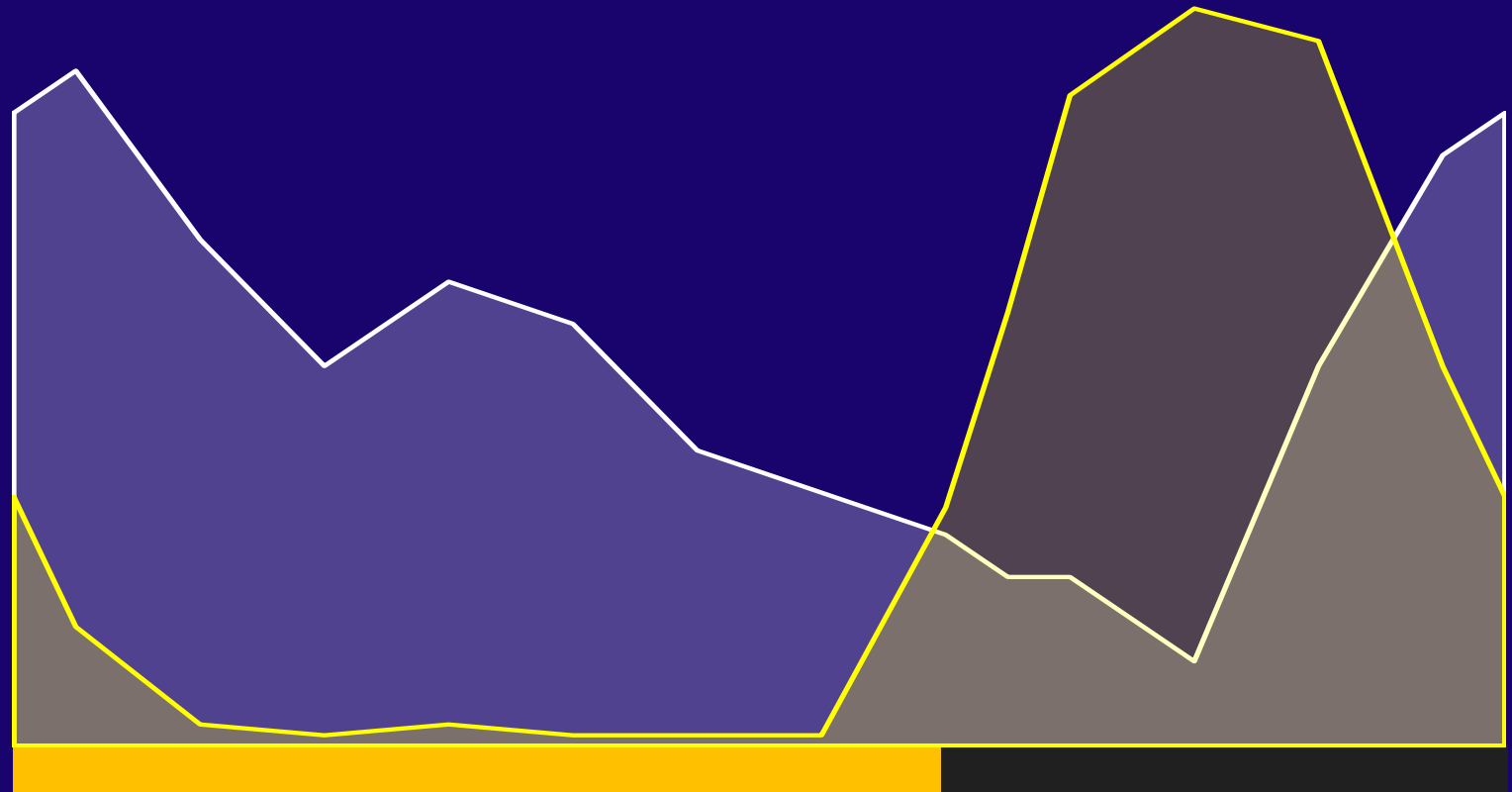


— Serum cortisol (0-16  $\mu\text{g}/\text{ml}$ )





— Serum cortisol (0-16  $\mu\text{g/ml}$ )  
— Serum melatonin (0-70  $\text{pg/ml}$ )

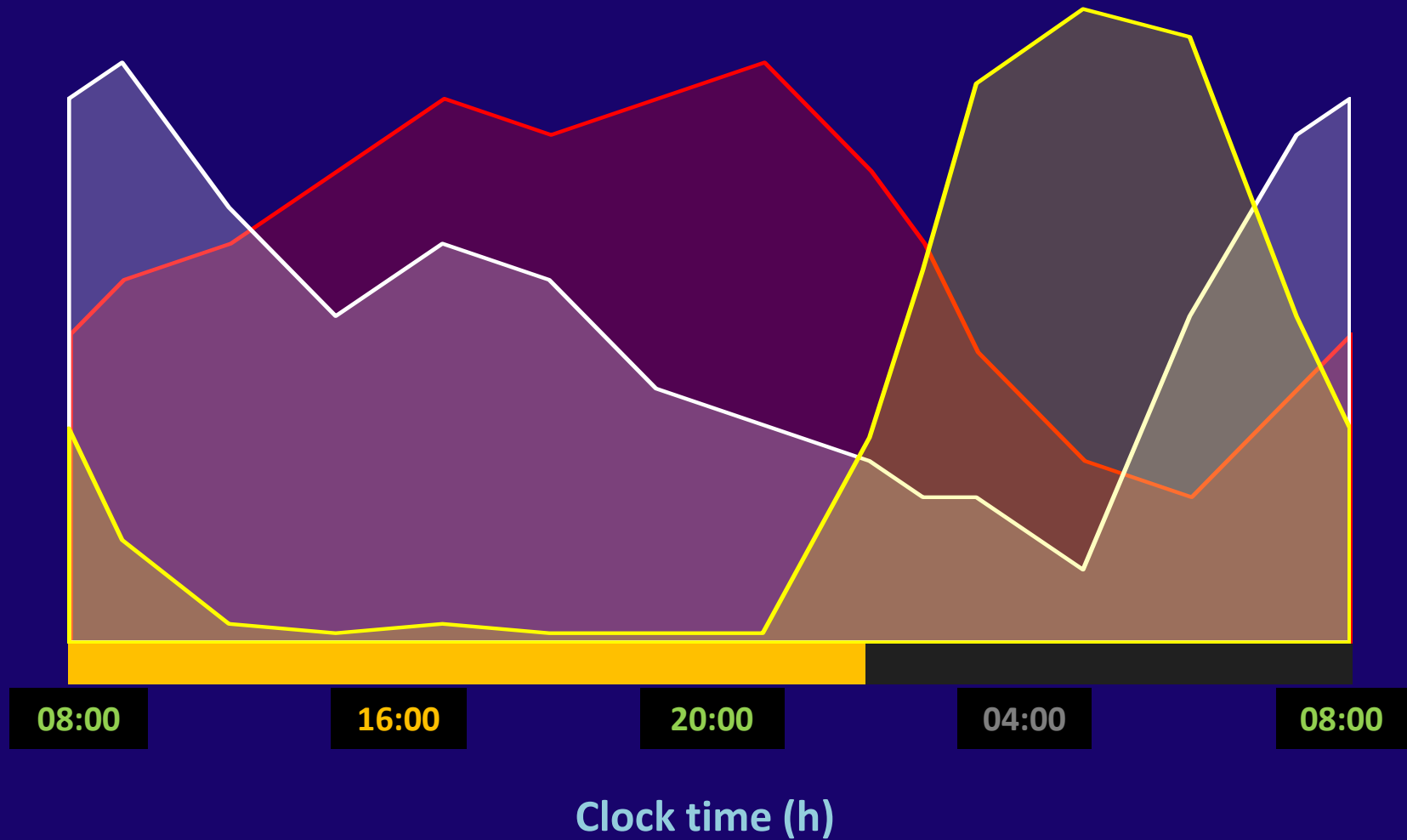


08:00      16:00      20:00      04:00      08:00

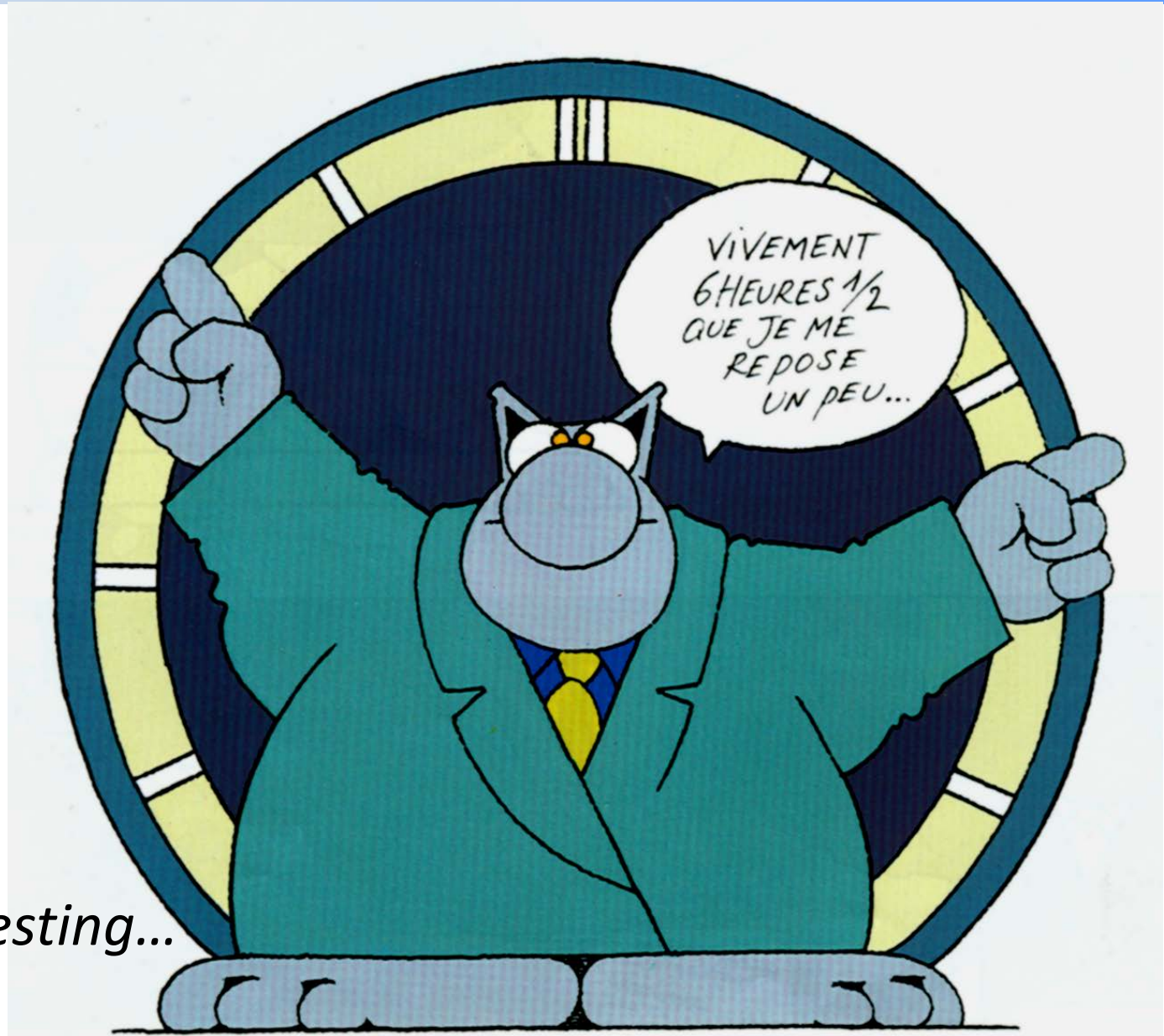
Clock time (h)



- Serum cortisol (0-16  $\mu\text{g/ml}$ )
- Serum melatonin (0-70  $\text{pg/ml}$ )
- Core body temperature (35,7–37,5  $^{\circ}\text{C}$ )

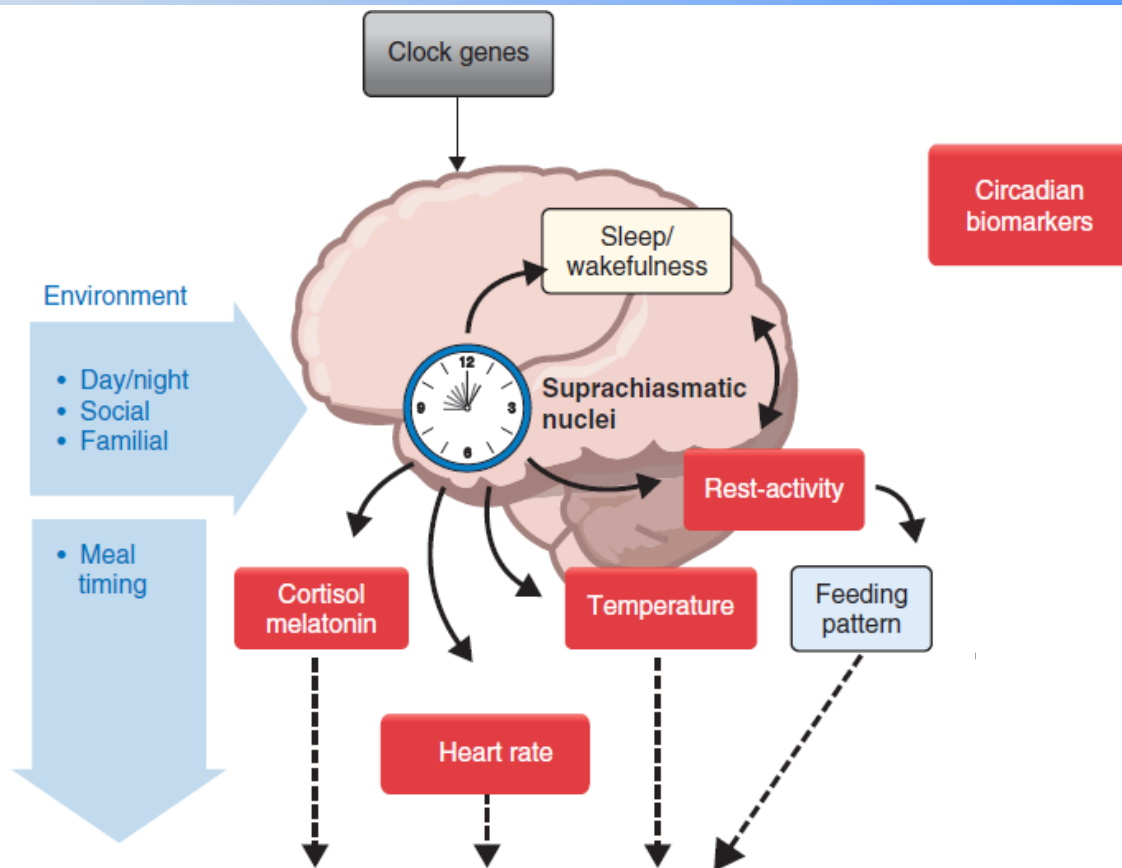


Clock on symptoms

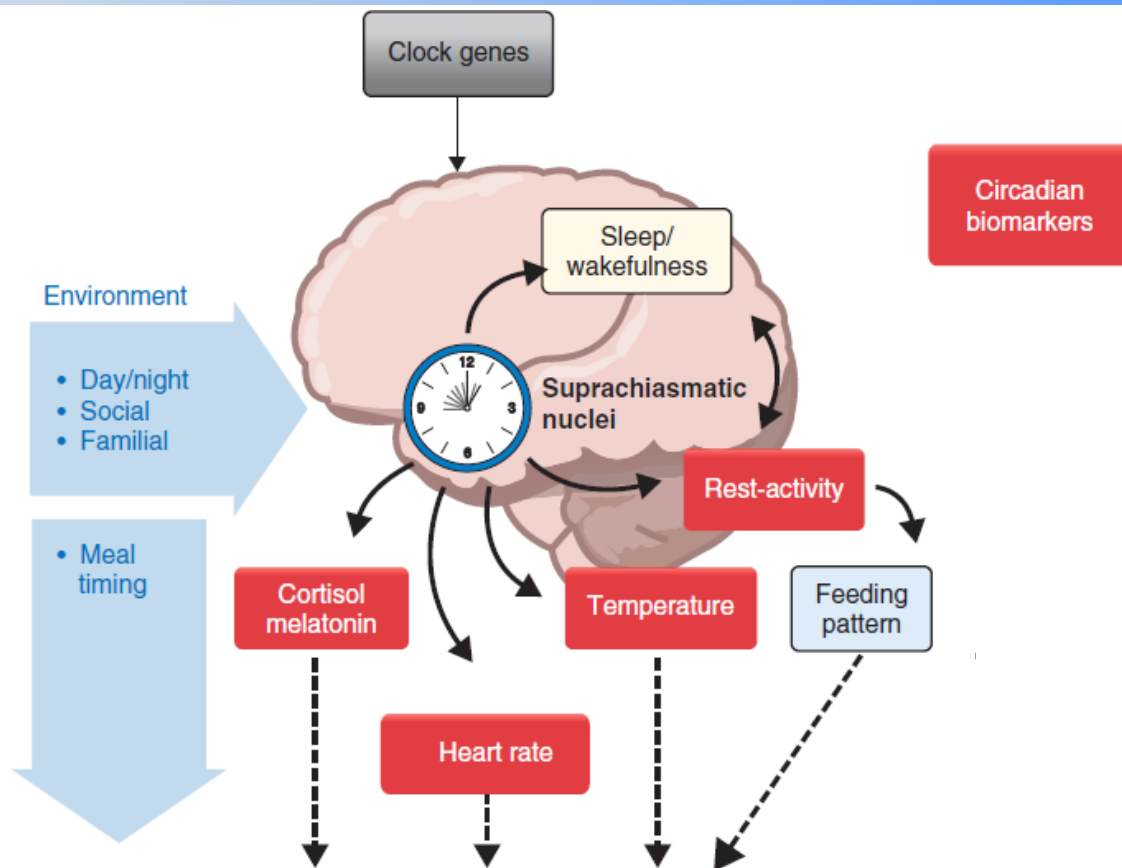


*Awaiting 6:30 for resting...*

## The Circadian Timing System

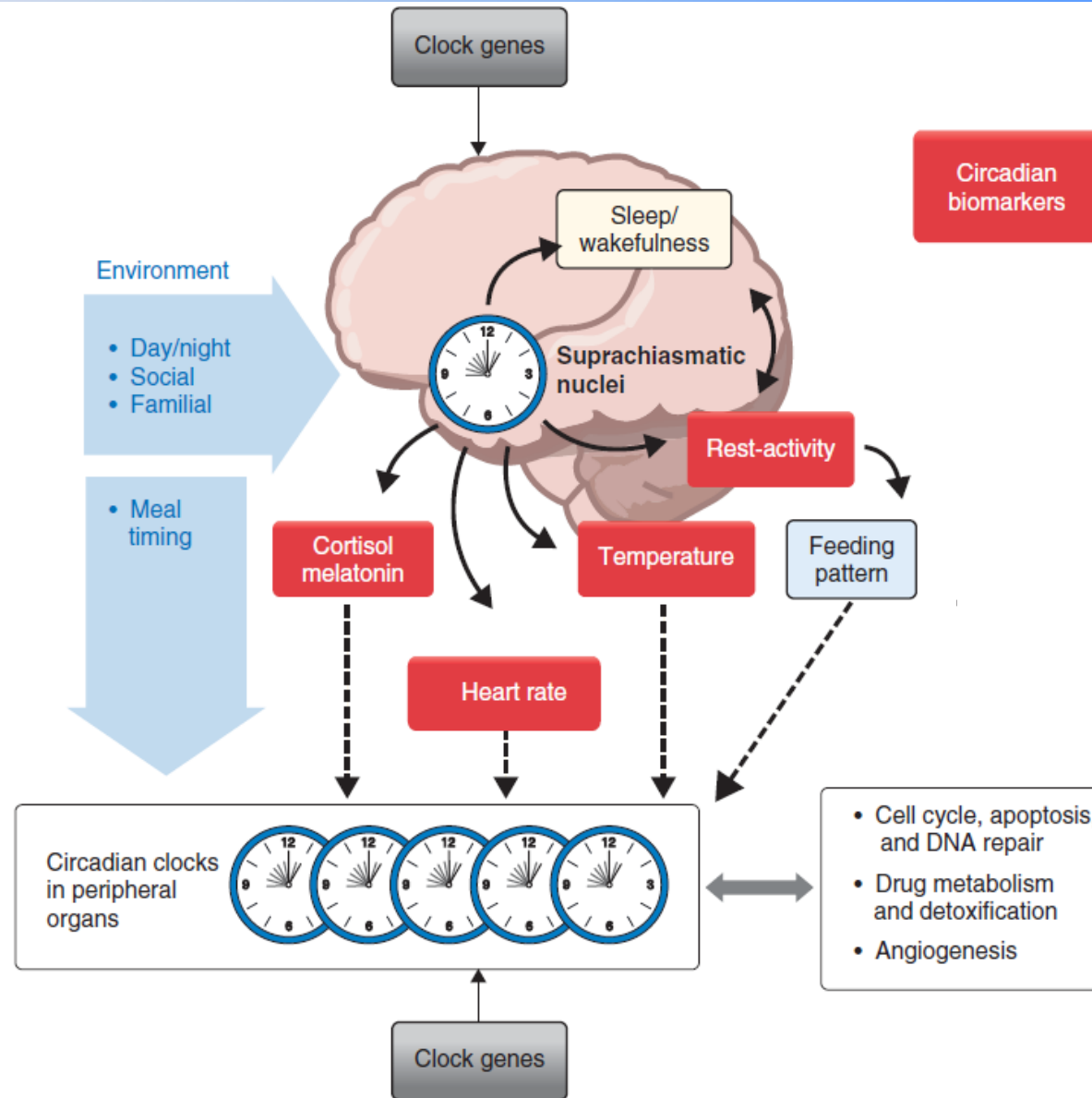


## The Circadian Timing System

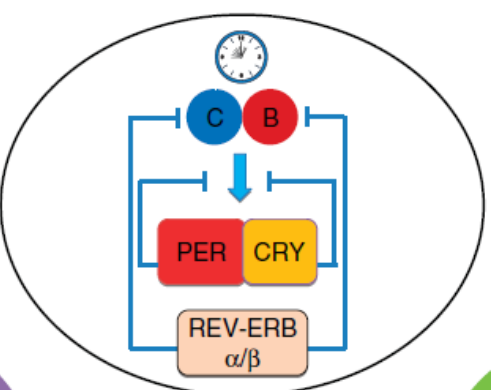
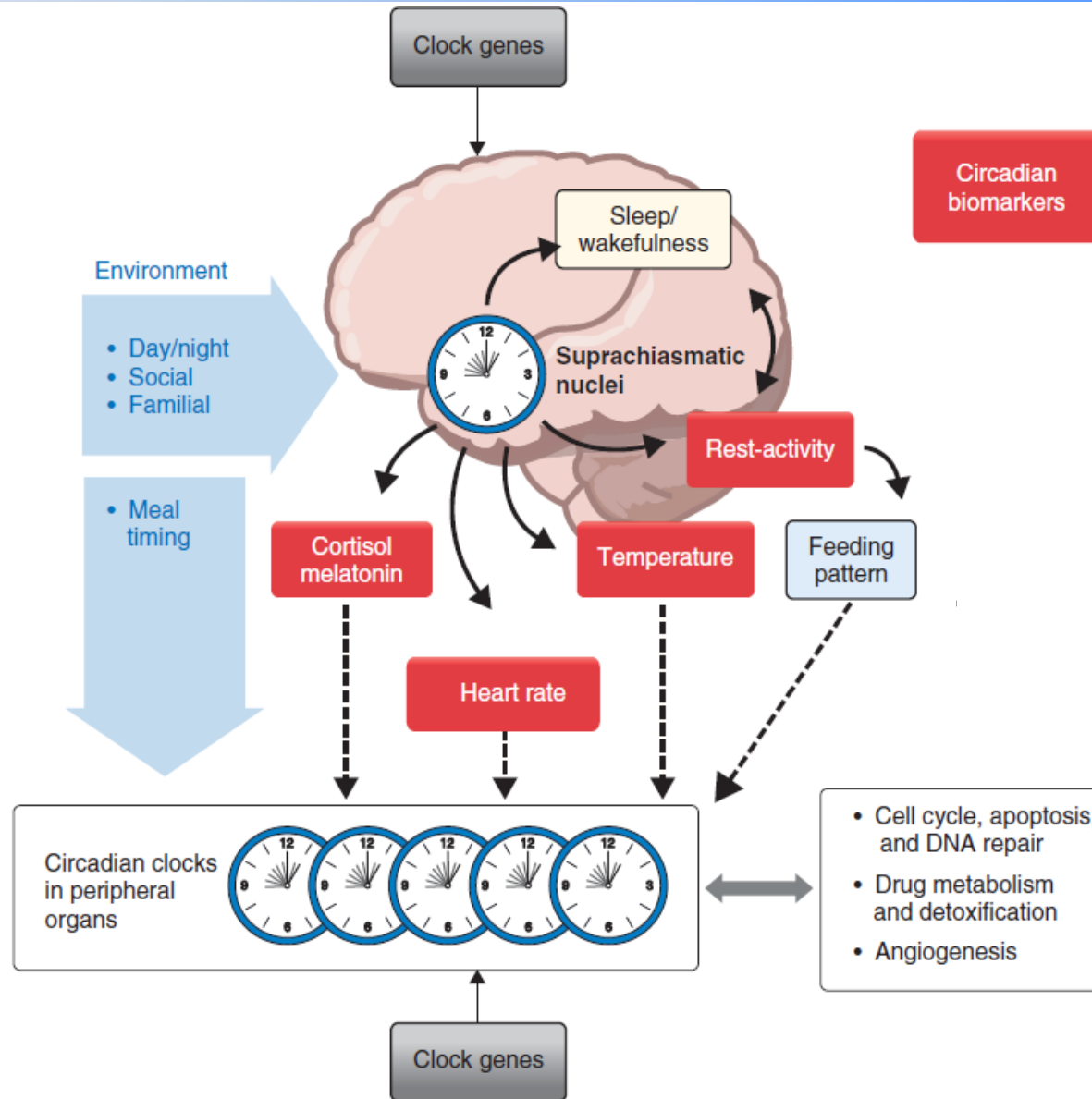




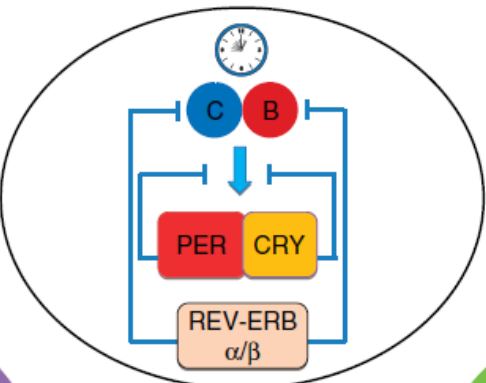
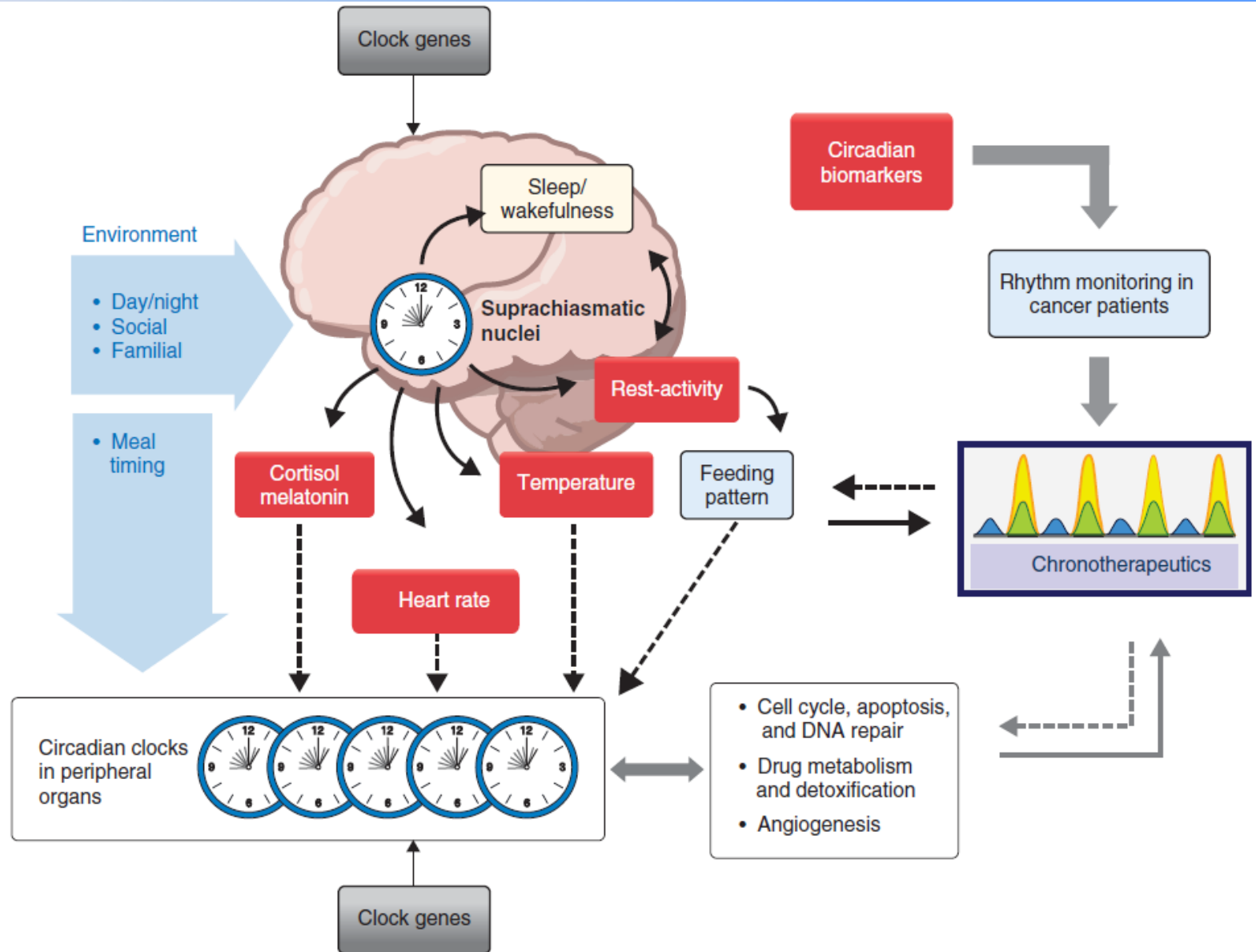
## The Circadian Timing System



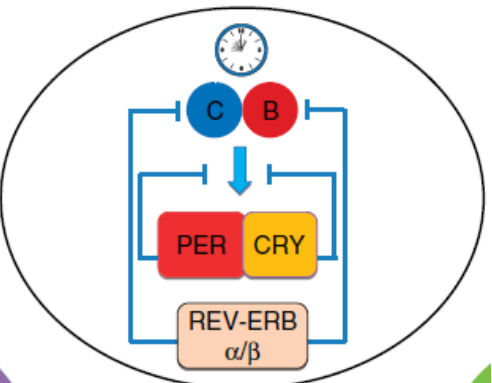
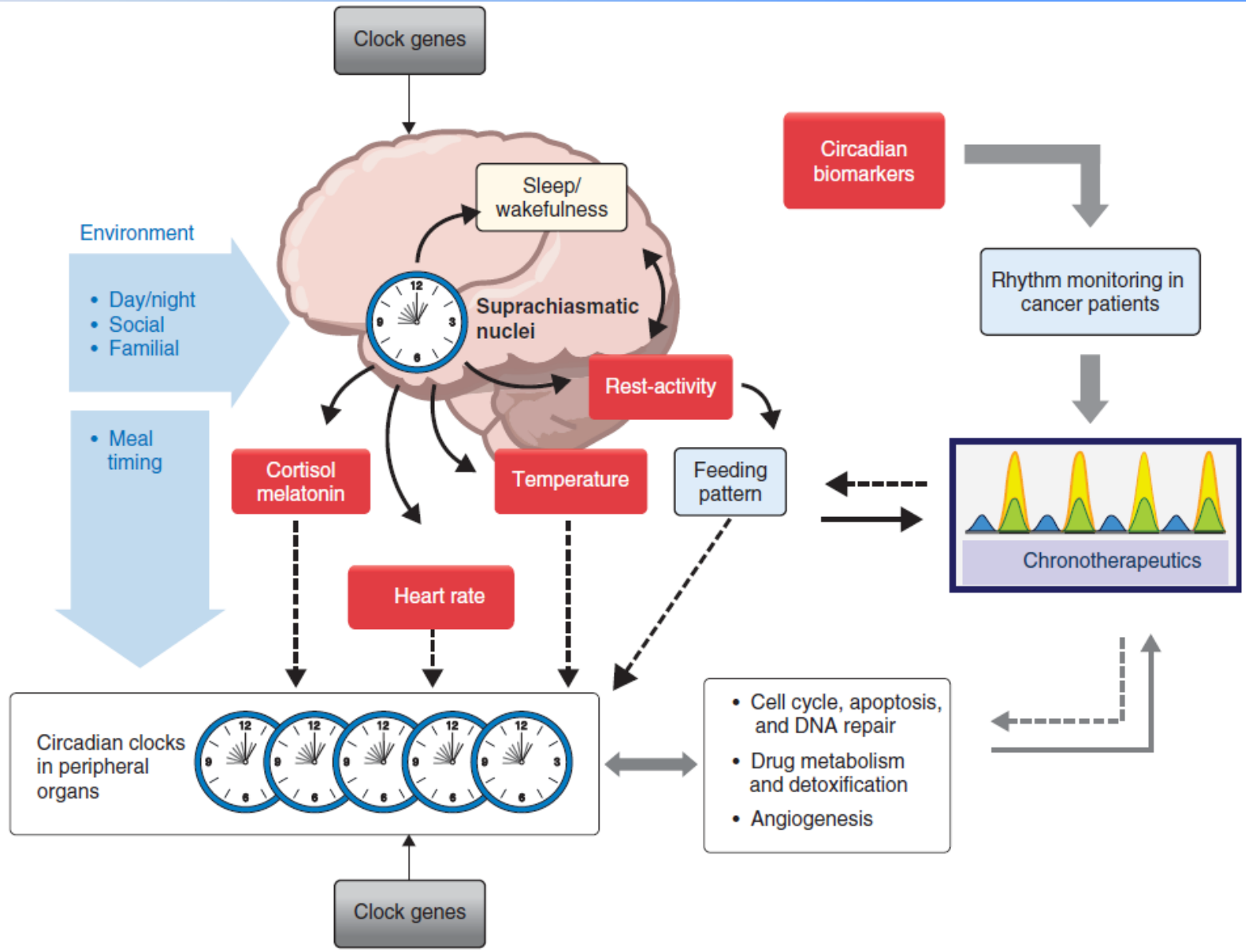
## The Circadian Timing System




## The Circadian Timing System



## The Circadian Timing System



- 
- A large, solid red arrow pointing to the right, positioned to the left of the first list item.
- Clock- Cell cycle coupling at single cell level
  - Clock- Chronopharmacology at cell population level
  - Cancer Chronopharmacology in mice
  - Cancer Chronotherapy in patients
  - Integration into home care



- Clock- Cell cycle coupling at single cell level
- Clock- Chronopharmacology at cell population level
- Cancer Chronopharmacology in mice
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- Clock- Cell cycle coupling at single cell level

A red arrow pointing to the right, highlighting the following section header.

## **Clock- Chronopharmacology at cell population level**

- Cancer Chronopharmacology in mice
- Cancer Chronotherapy in patients
- Integration into home care





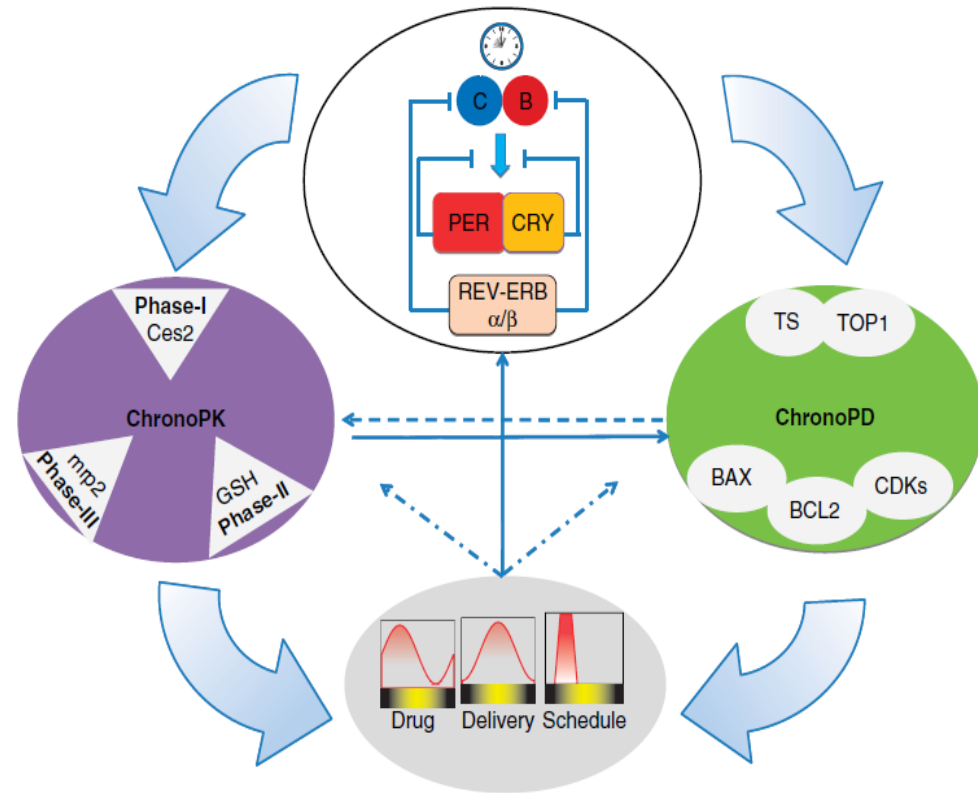
- Clock- Cell cycle coupling at single cell level
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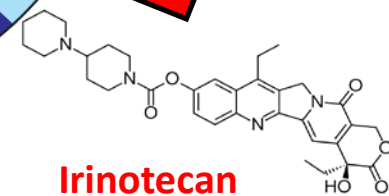
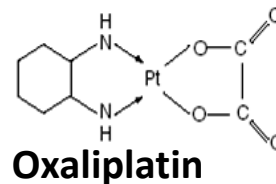
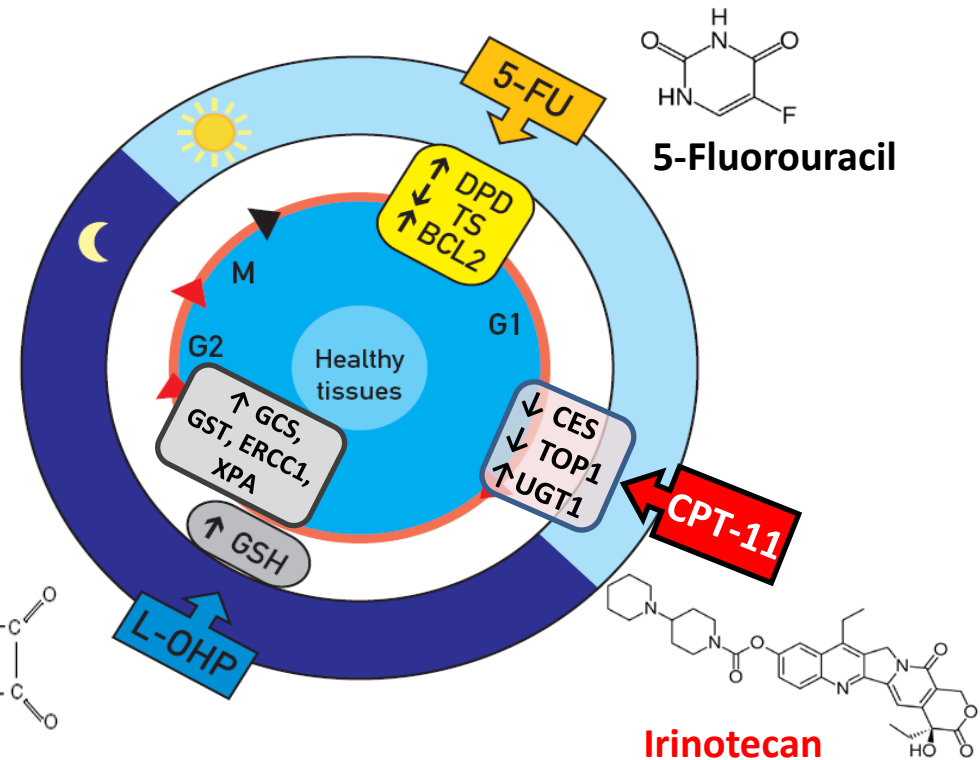
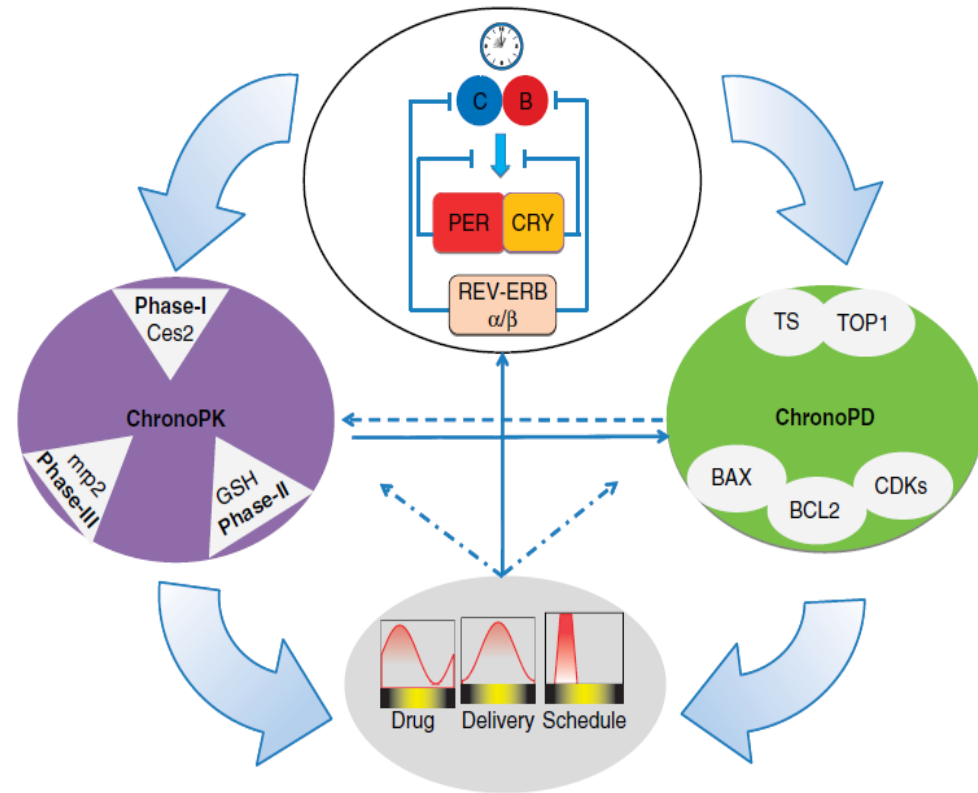
- Clock- Cell cycle coupling at single cell level
- Clock- Chronopharmacology at cell population level

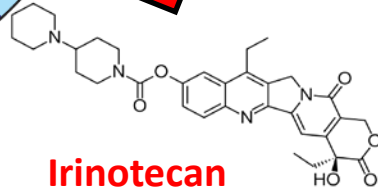
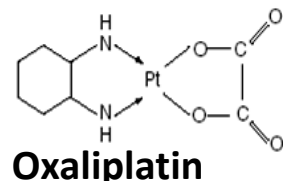
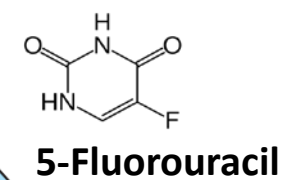
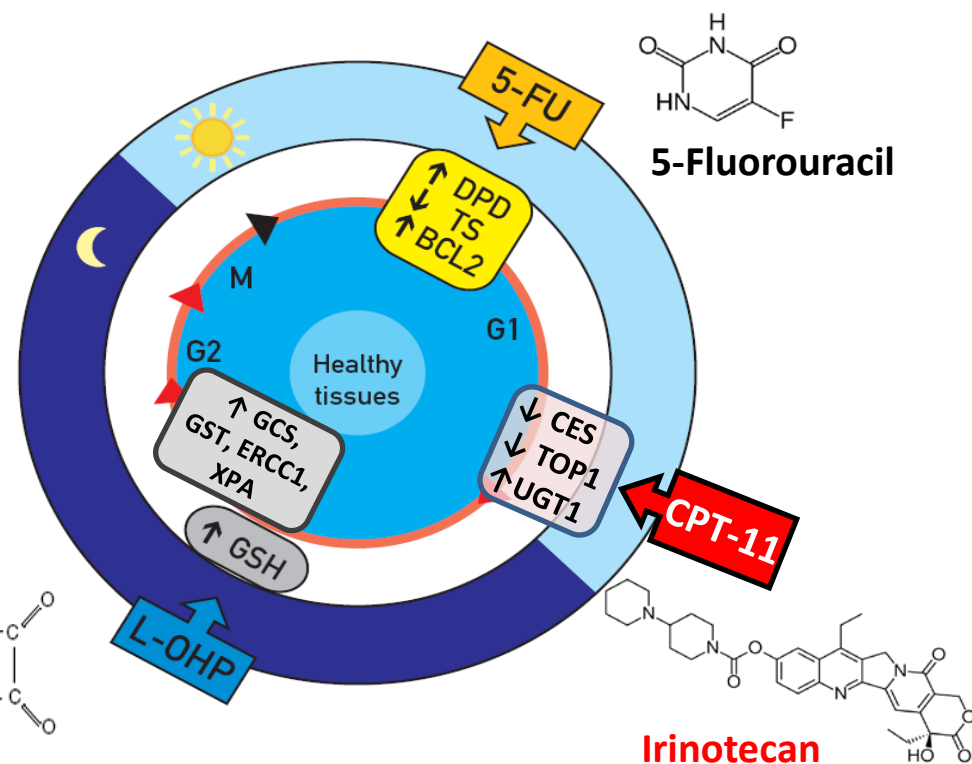
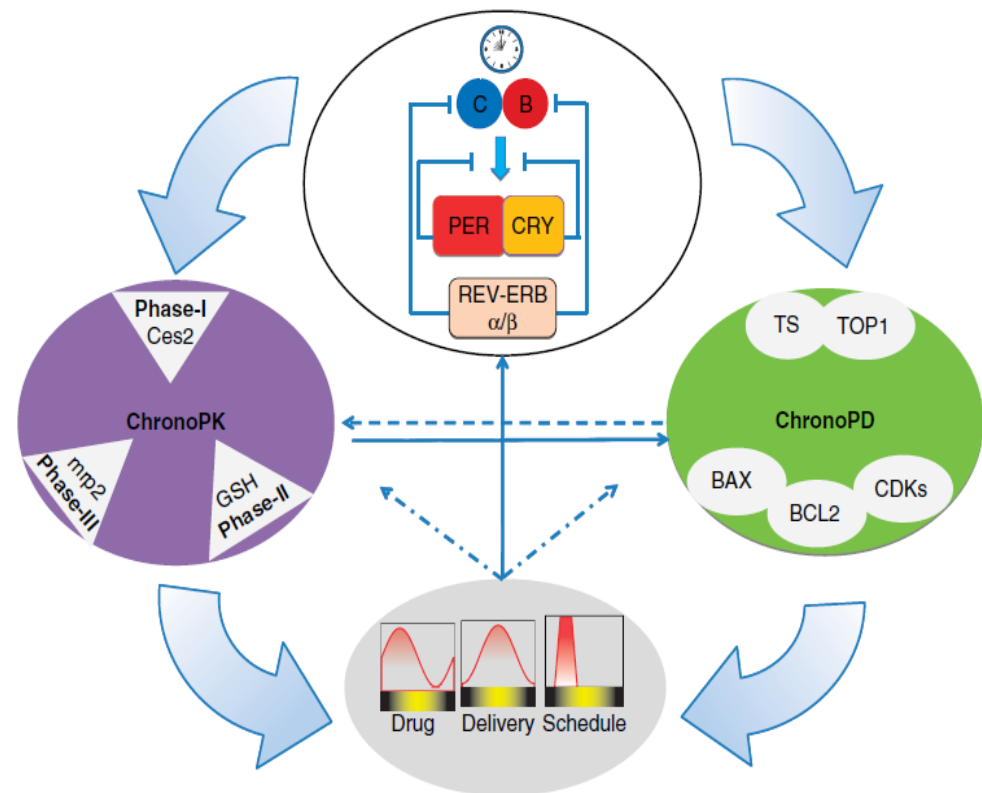


## Cancer Chronopharmacology in mice

- Cancer Chronotherapy in patients
- Integration into home care



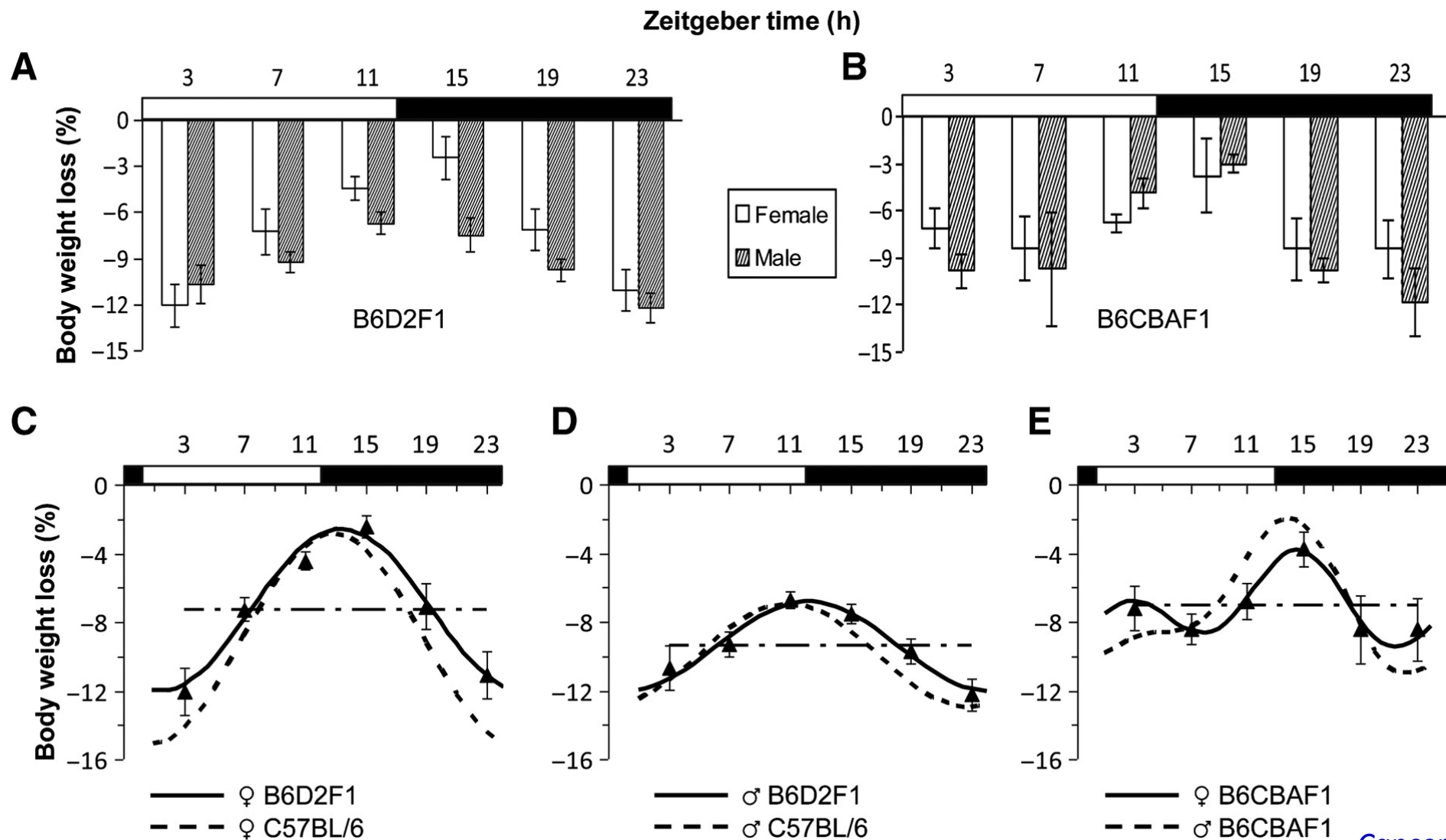




**Chronotolerance**  
40 anticancer drugs

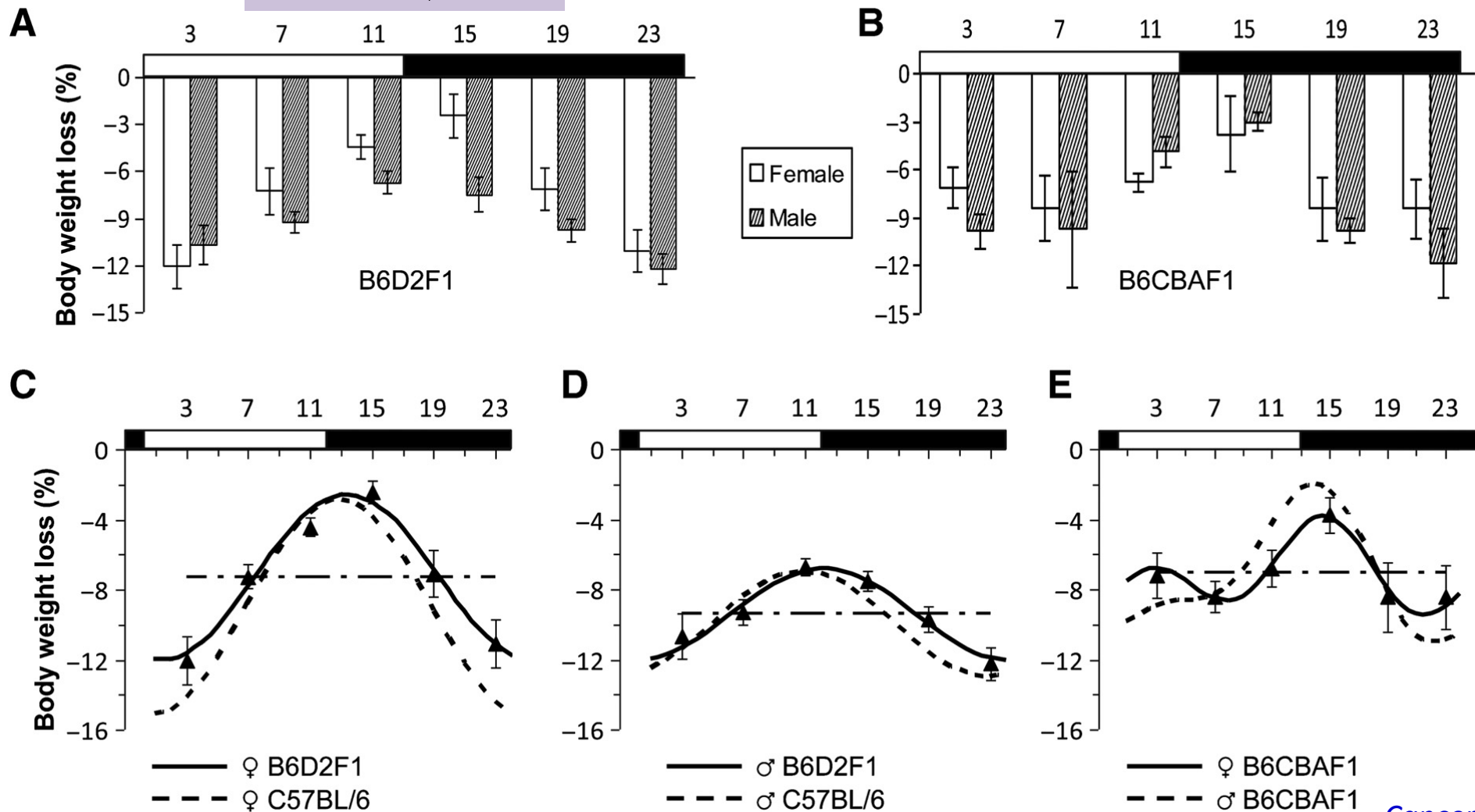
**Chronoefficacy**  
28 anticancer drugs

## Sex and genetic differences in irinotecan chronotolerance in mice : 3 classes



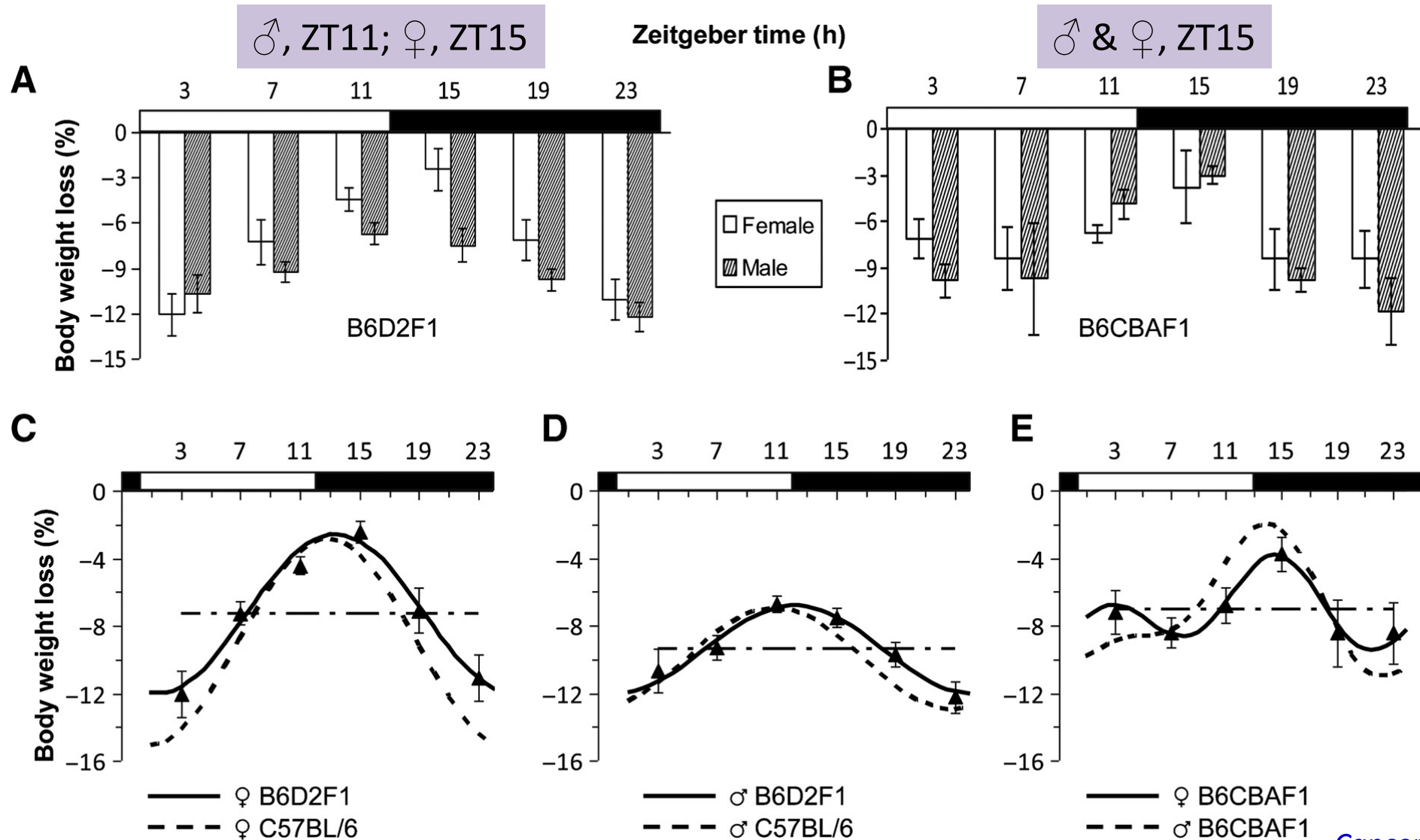
## Sex and genetic differences in irinotecan chronotolerance in mice : 3 classes

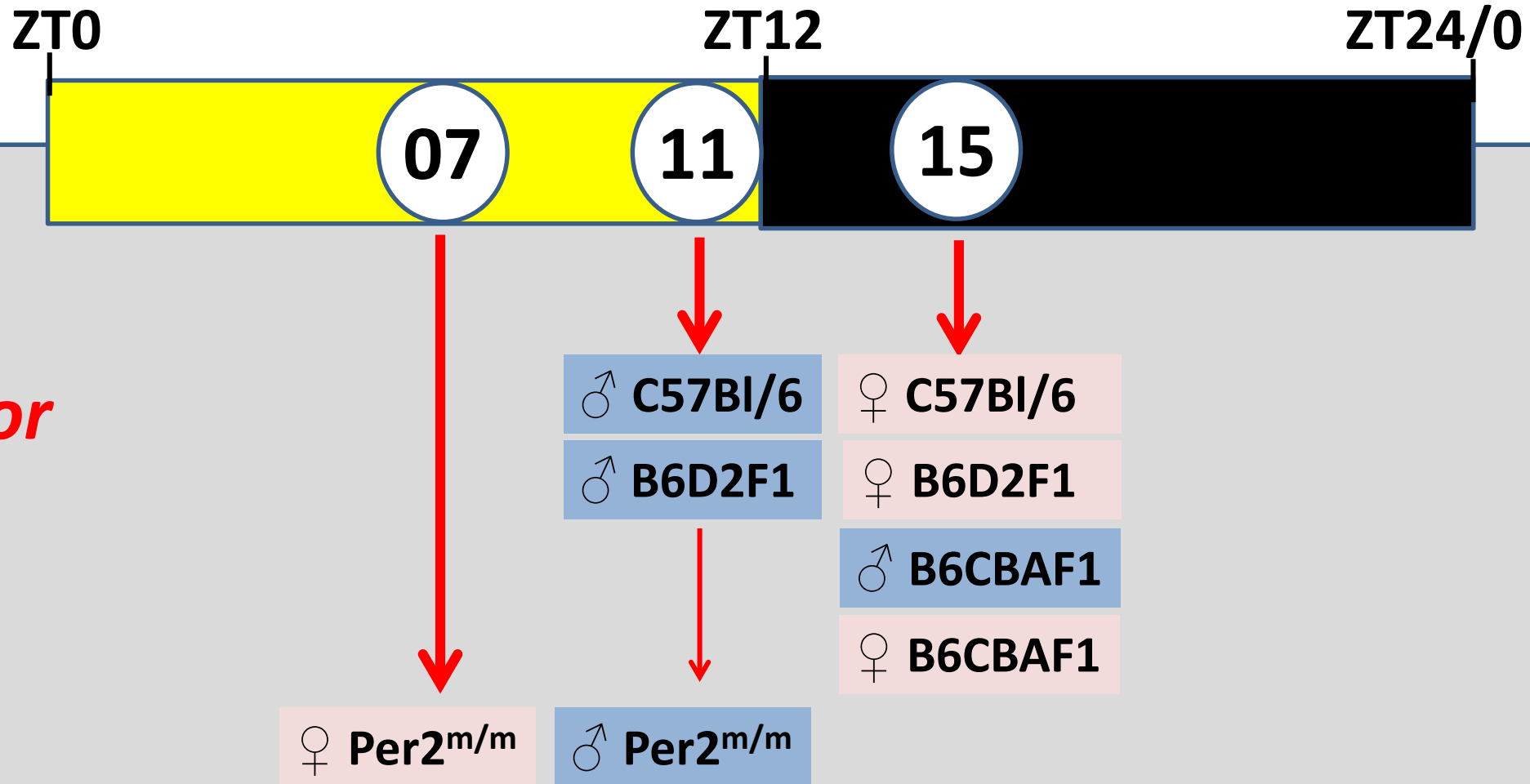
♂, ZT11; ♀, ZT15  
Zeitgeber time (h)





## Sex and genetic differences in irinotecan chronotolerance in mice : 3 classes

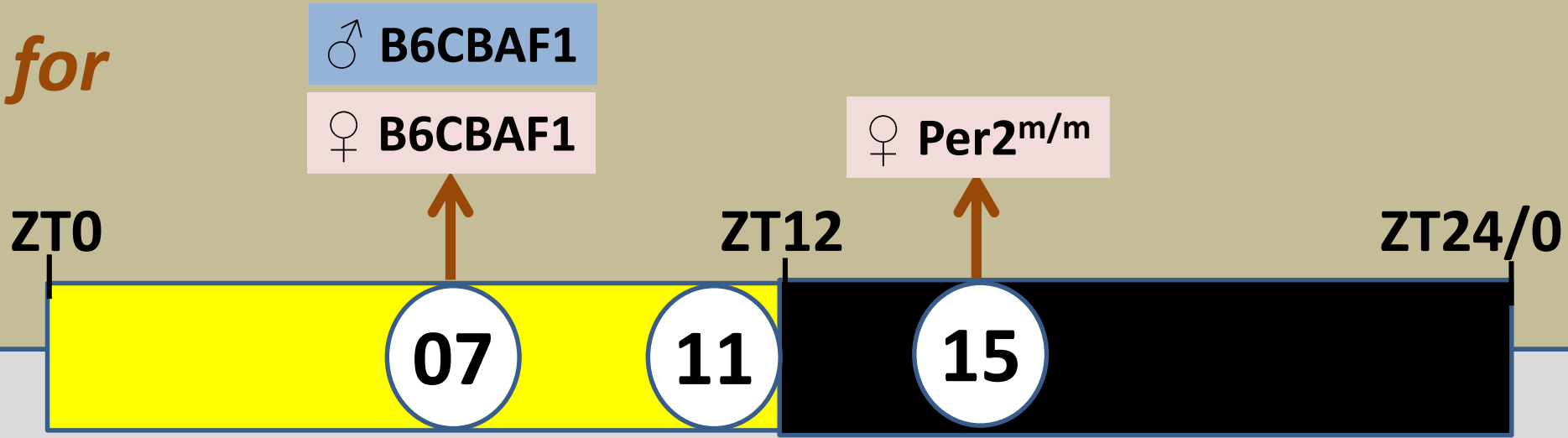




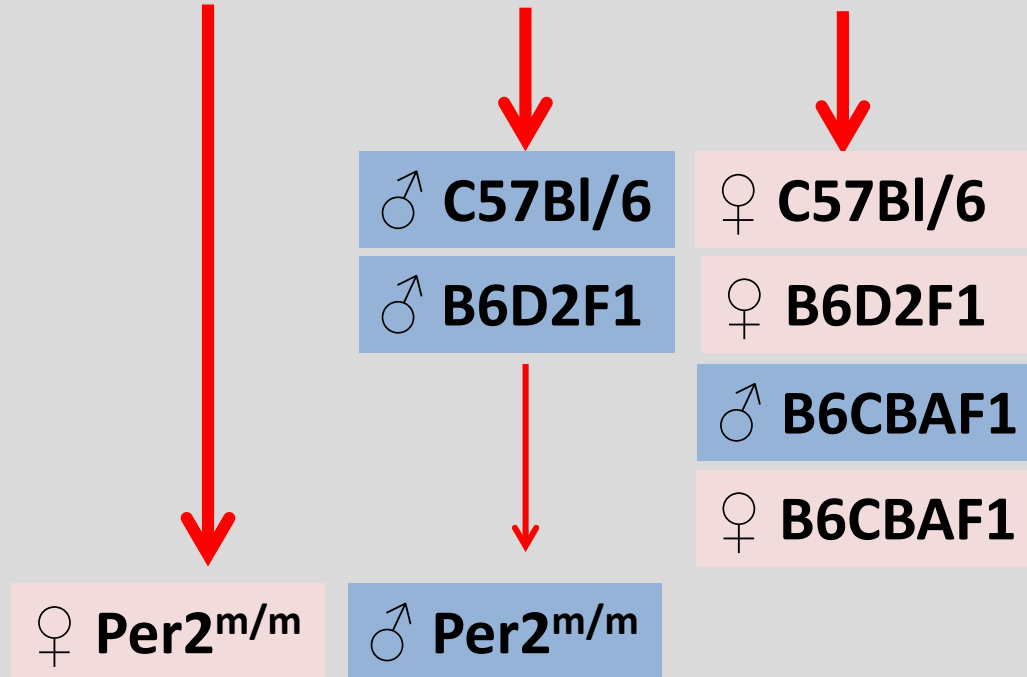


# Systems Cancer Chronotherapeutics

*Worst for*



*Best for*





*Worst for*

ZT0

♂ B6CBAF1

♀ B6CBAF1



ZT12

♀ Per2<sup>m/m</sup>



ZT24/0

**8 h-range for optimal irinotecan timing (tolerability)  
according to sex & genotype in mice**

*Best for*



♂ C57Bl/6

♂ B6D2F1

♂ Per2<sup>m/m</sup>

♀ C57Bl/6

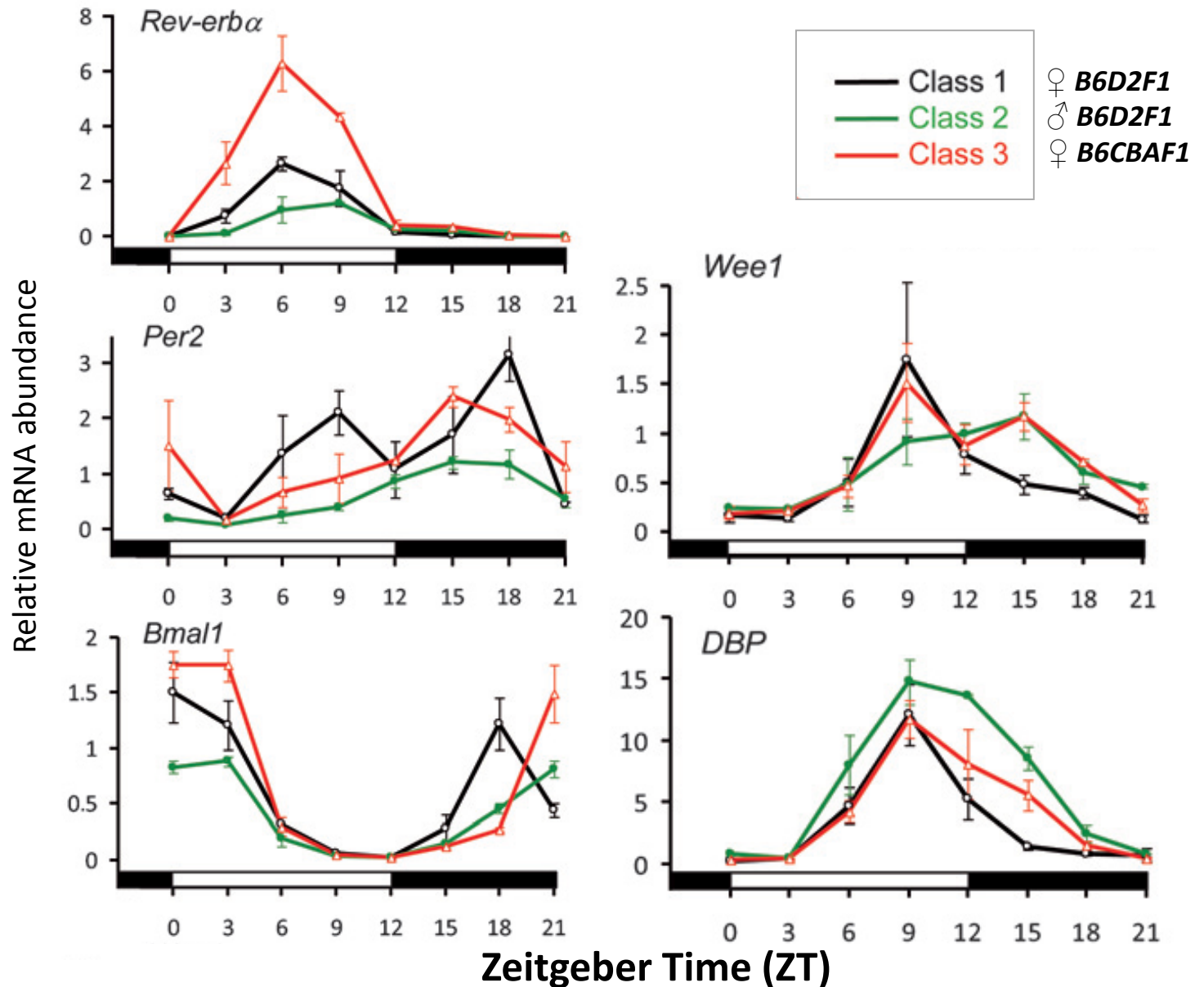
♀ B6D2F1

♂ B6CBAF1

♀ B6CBAF1

♀ Per2<sup>m/m</sup>

**Sex and genetic differences in circadian clock & clock-controlled gene transcription in mouse liver**





**8 h-range for optimal irinotecan timing (tolerability)  
according to sex & genotype in mice**



**Which of 27 liver or colon circadian gene transcription  
patterns predict for optimal timing if any?**



8 h-range for optimal irinotecan timing (tolerability) according to sex & genotype in mice



Which of 27 liver or colon circadian gene transcription patterns predict for optimal timing if any?



Elisabeth Filipski



Xiao Mei Li



V Hossard



M Dumitru





8 h-range for optimal irinotecan timing (tolerability) according to sex & genotype in mice



Elisabeth Filipski

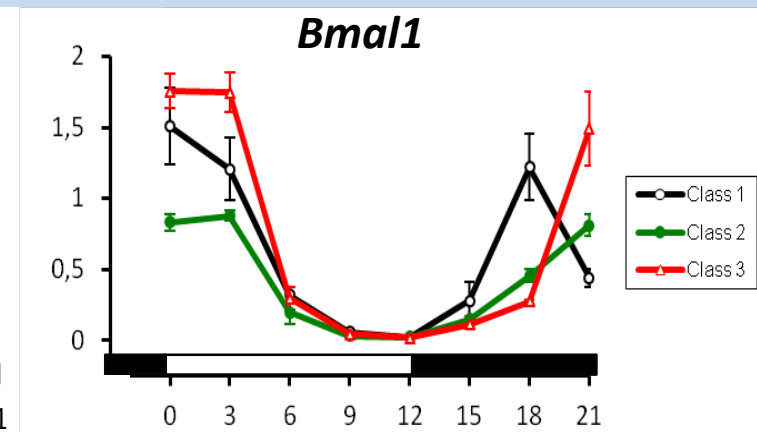
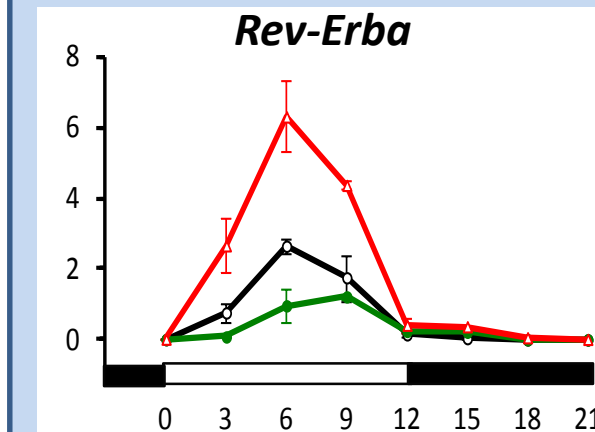


Which of 27 liver or colon circadian gene transcription patterns predict for optimal timing if any?

*Bmal1*



*Rev-erba*



Xiao Mei Li



V Hossard



M Dumitru





8 h-range for optimal irinotecan timing (tolerability) according to sex & genotype in mice



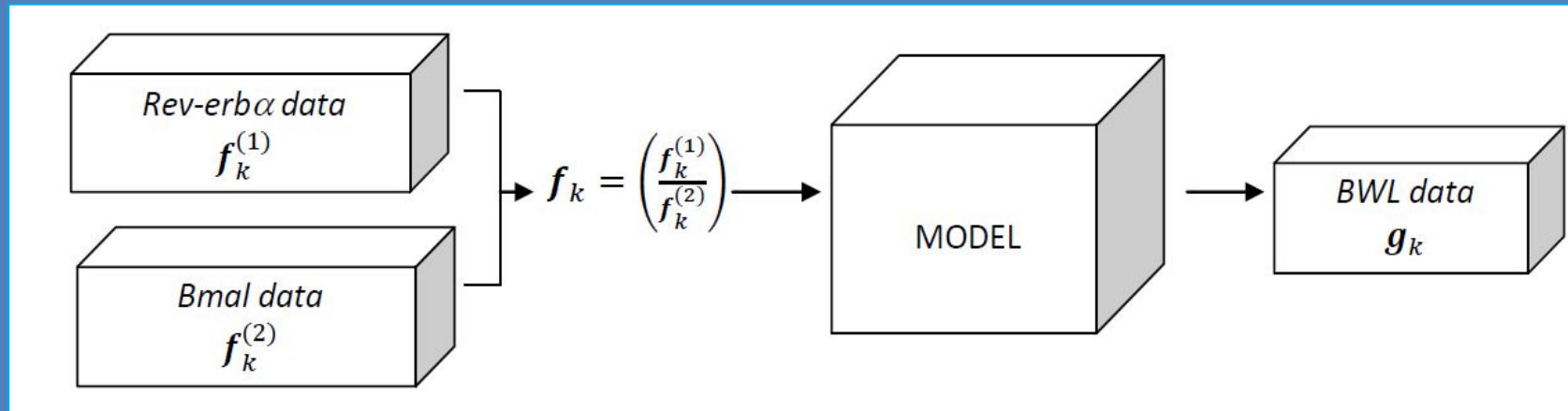
Elisabeth Filipski



Xiao Mei Li



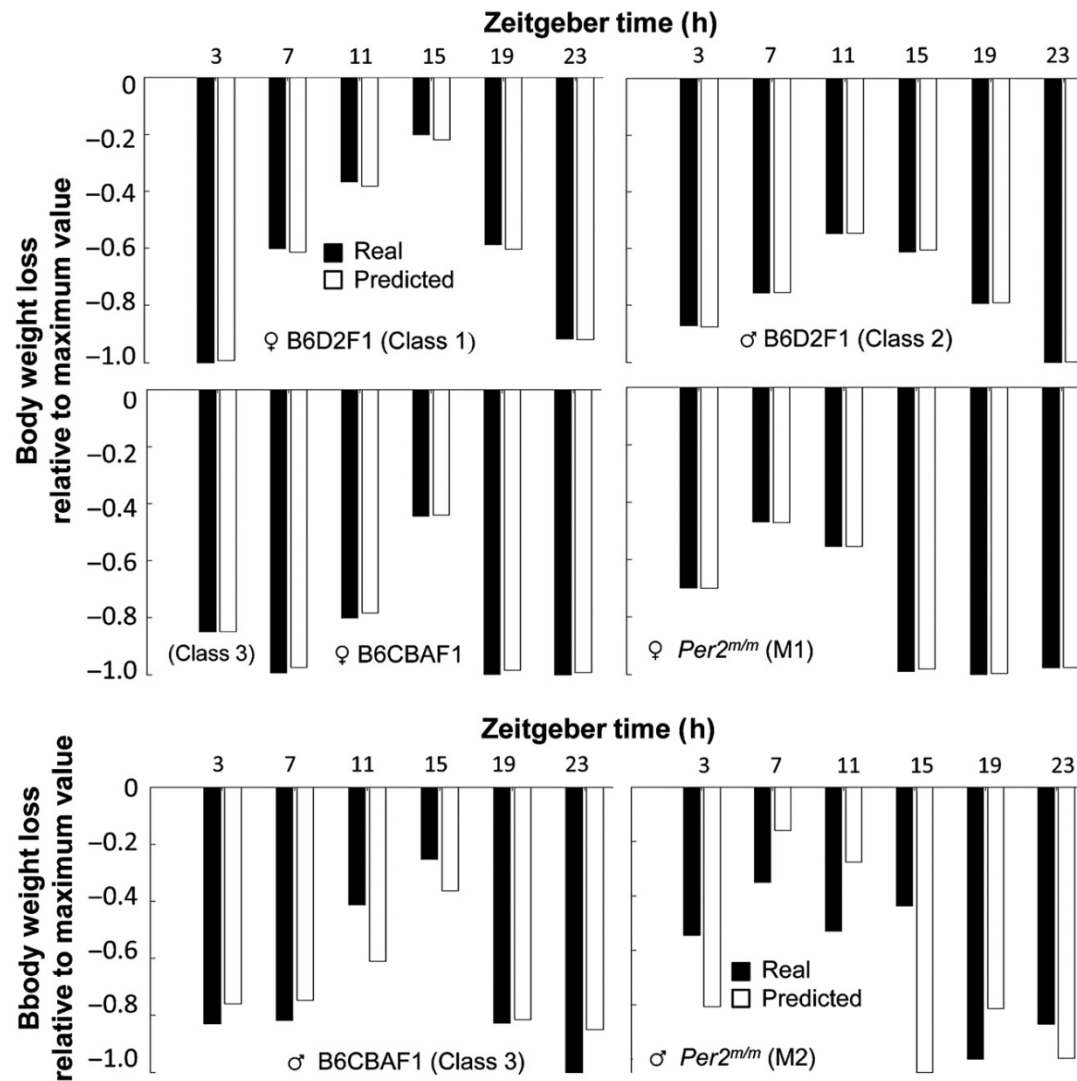
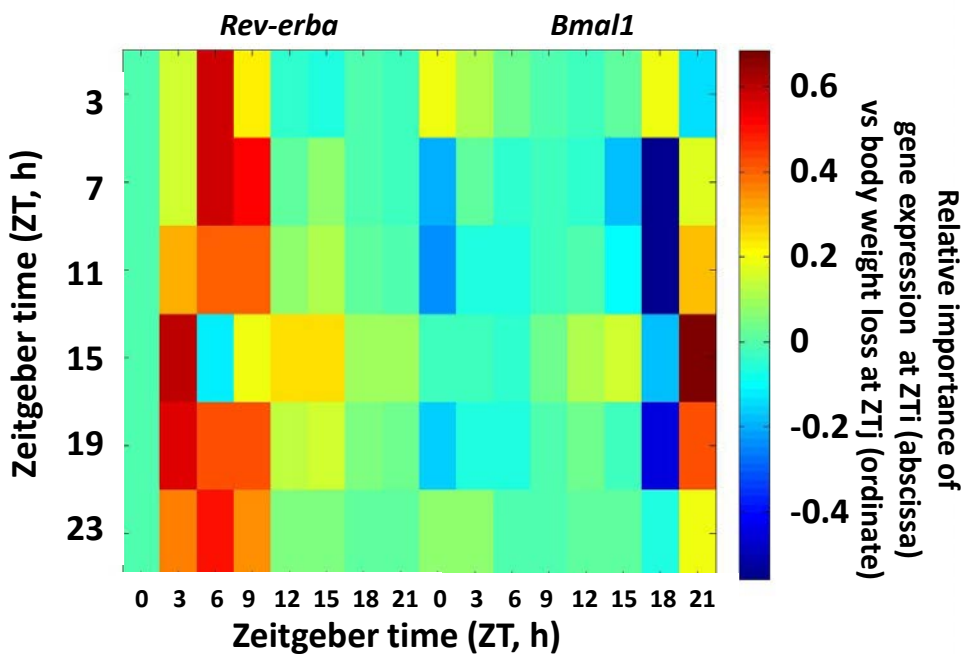
Ali Mohammad-Djafari (CNRS, SUPELEC, Paris Sud Univ)

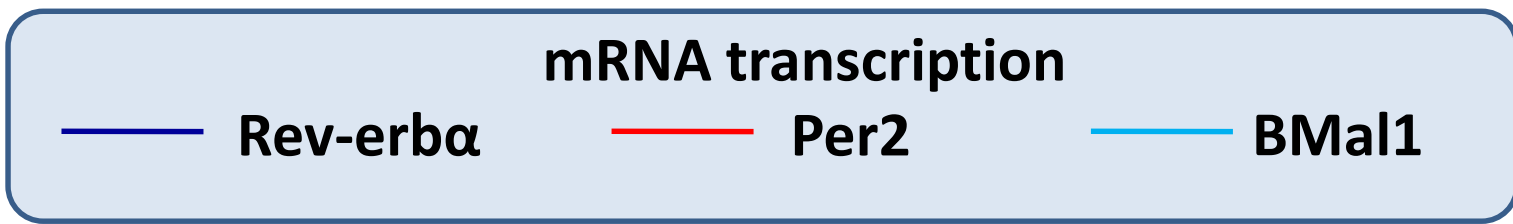
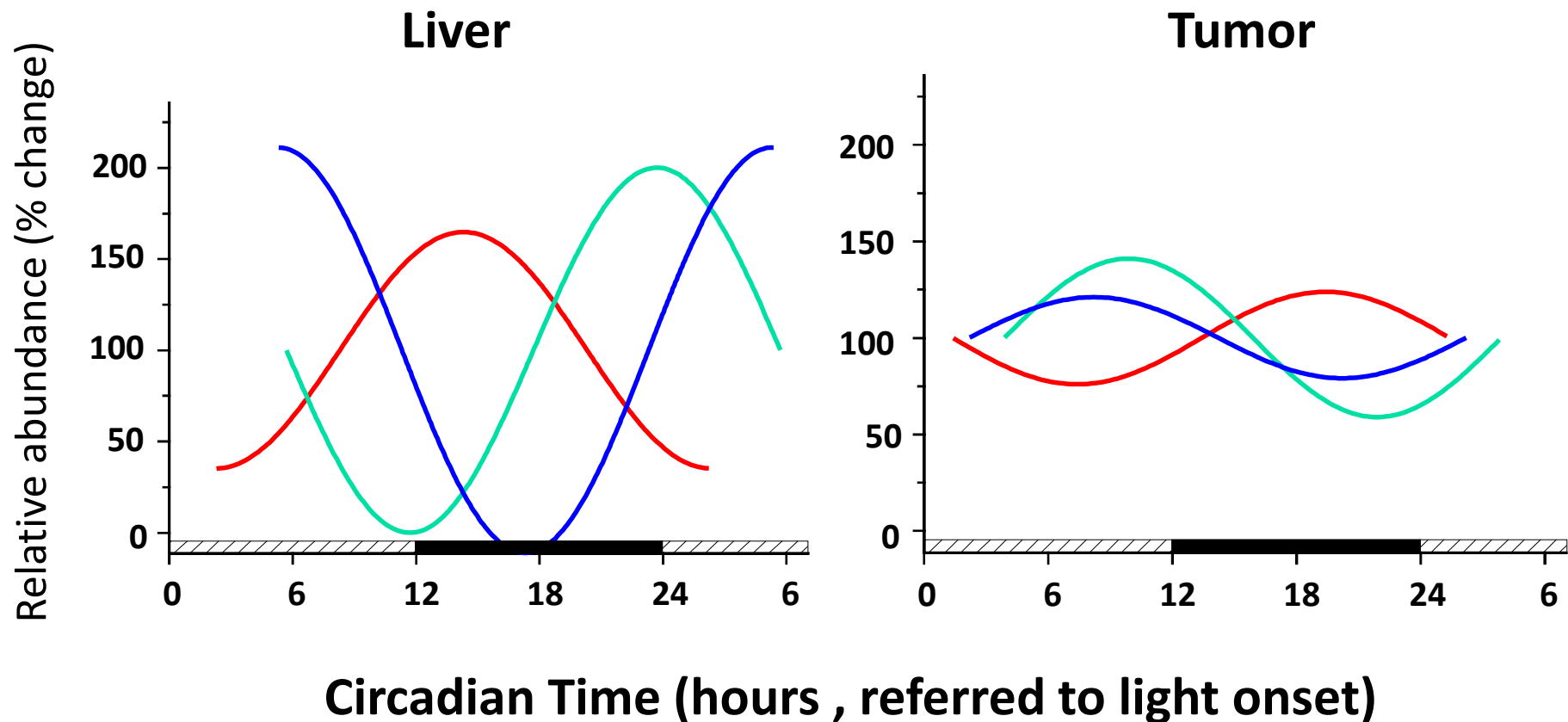


**A circadian clock transcription model for the personalization of cancer chronotherapy timing**

*Li et al. Cancer Res 2013*

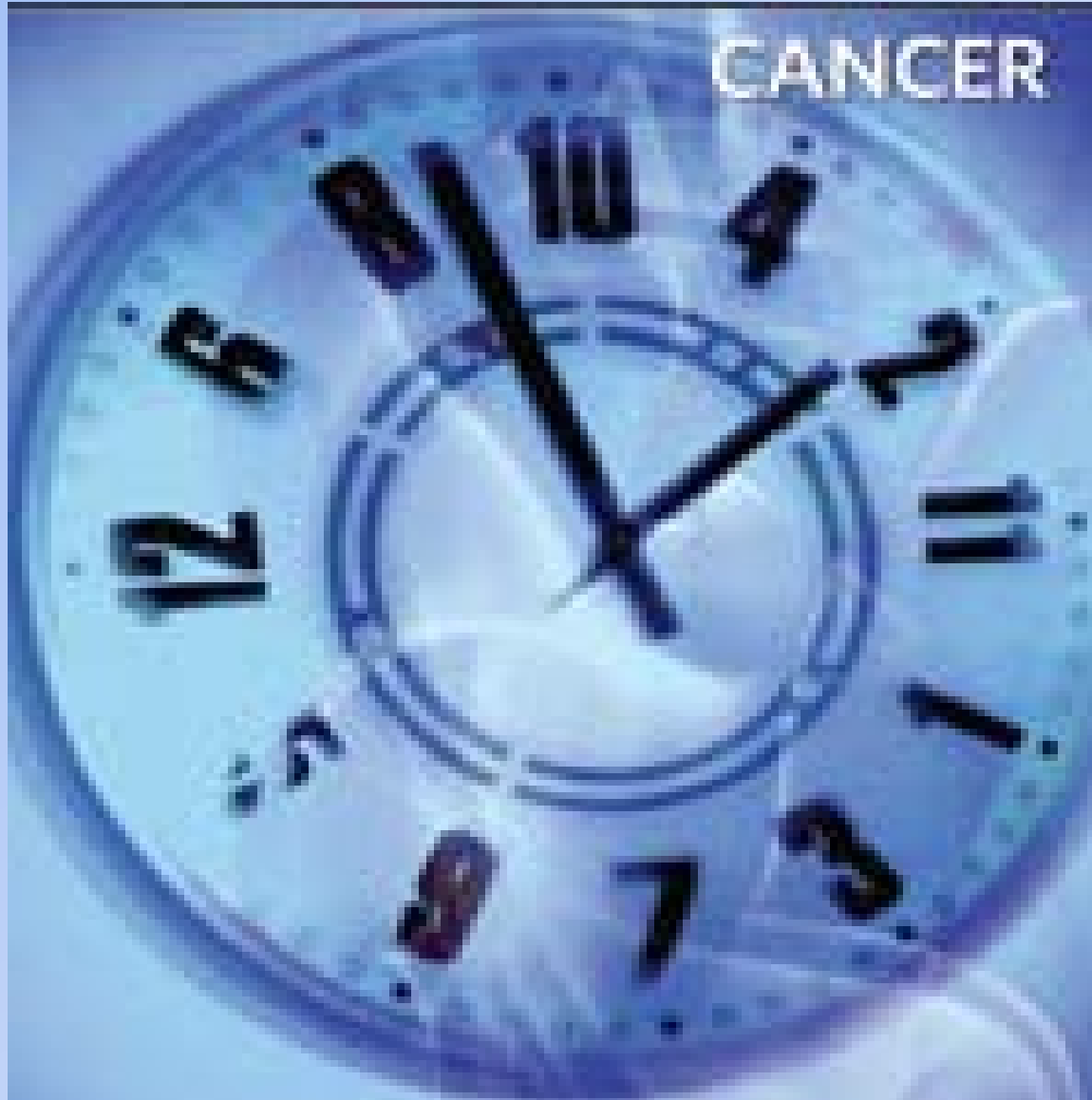
## A circadian clock transcription model for the personalization of cancer chronotherapy



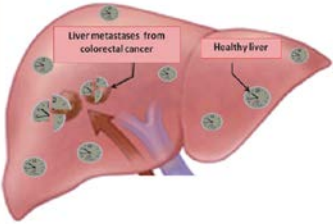




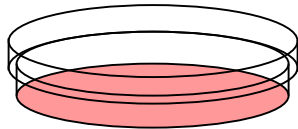
# Systems Cancer Chronotherapeutics



- Systematic exploration of role of clock genes in liver and cancers for cell cycle, drug metabolism and chronotherapeutic effects
- Continuous physiology monitoring & dynamic molecular imaging



Per2::luc/Bmal1::luc  
± si/shRNA  
Rev-Erb $\alpha$ -FUCCI



Lumicycle



Per2::luc  
Abcb1a::luc

Clock mutant  
Cancer prone



RT-Bio



IVIS Spectrum



- Clock- Cell cycle coupling at single cell level
- Clock- Chronopharmacology at cell population level
- Cancer Chronopharmacology in mice

 Cancer Chronotherapy in patients

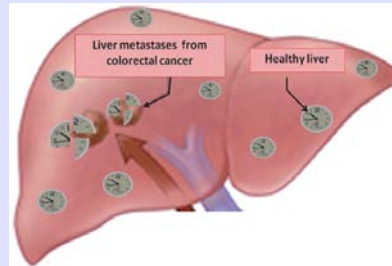
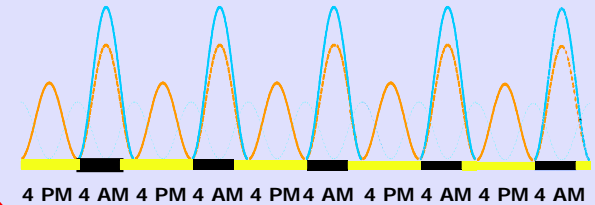
- Integration into home care

## Curative intent onco-surgery strategy in patients with metastatic colorectal cancer



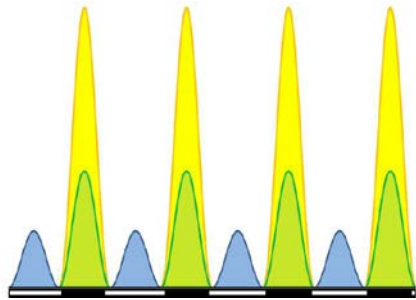
1986-2013

**Chronotherapy**



**Liver resection & transplantation**

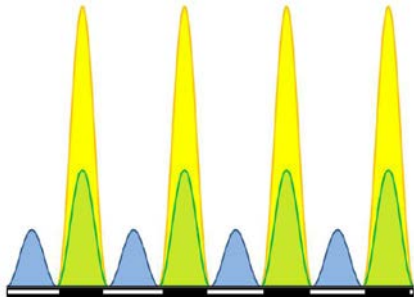
**Oxaliplatin**



**Research &  
Development**

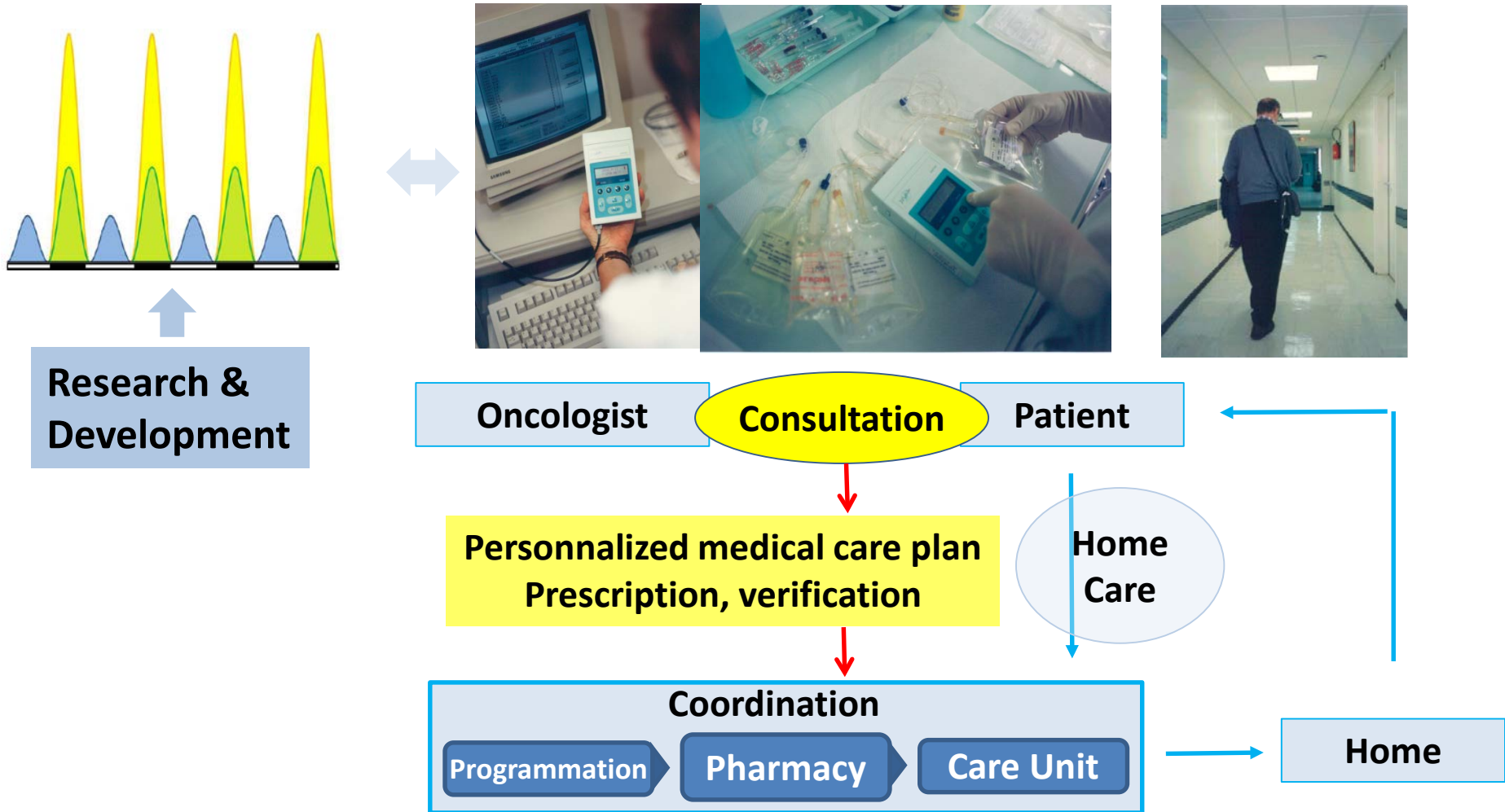
***Chronotherapy Unit, Hôpital Paul Brousse, Villejuif  
1990-2014: ~ 3 000 patients***



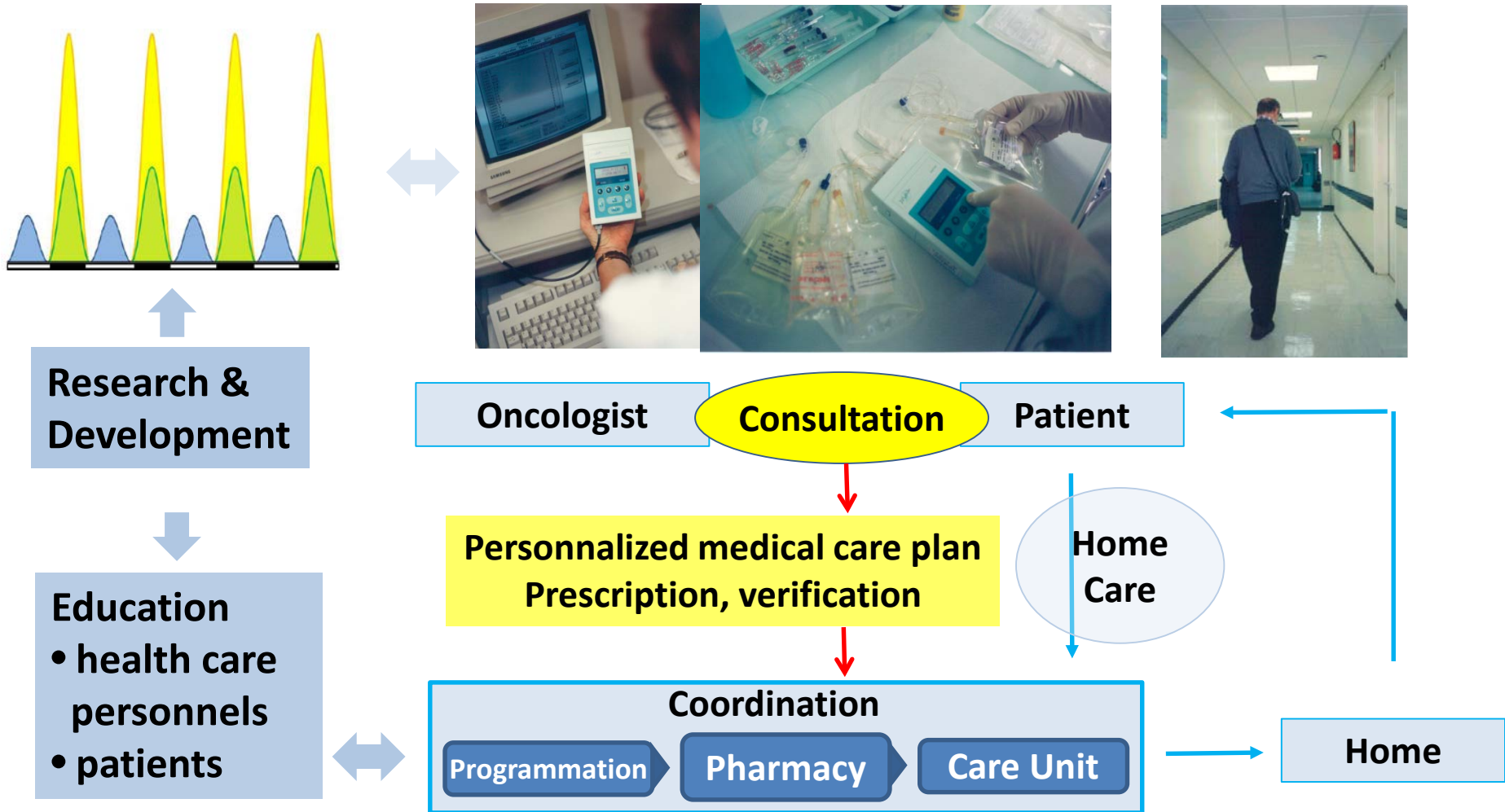


**Research &  
Development**

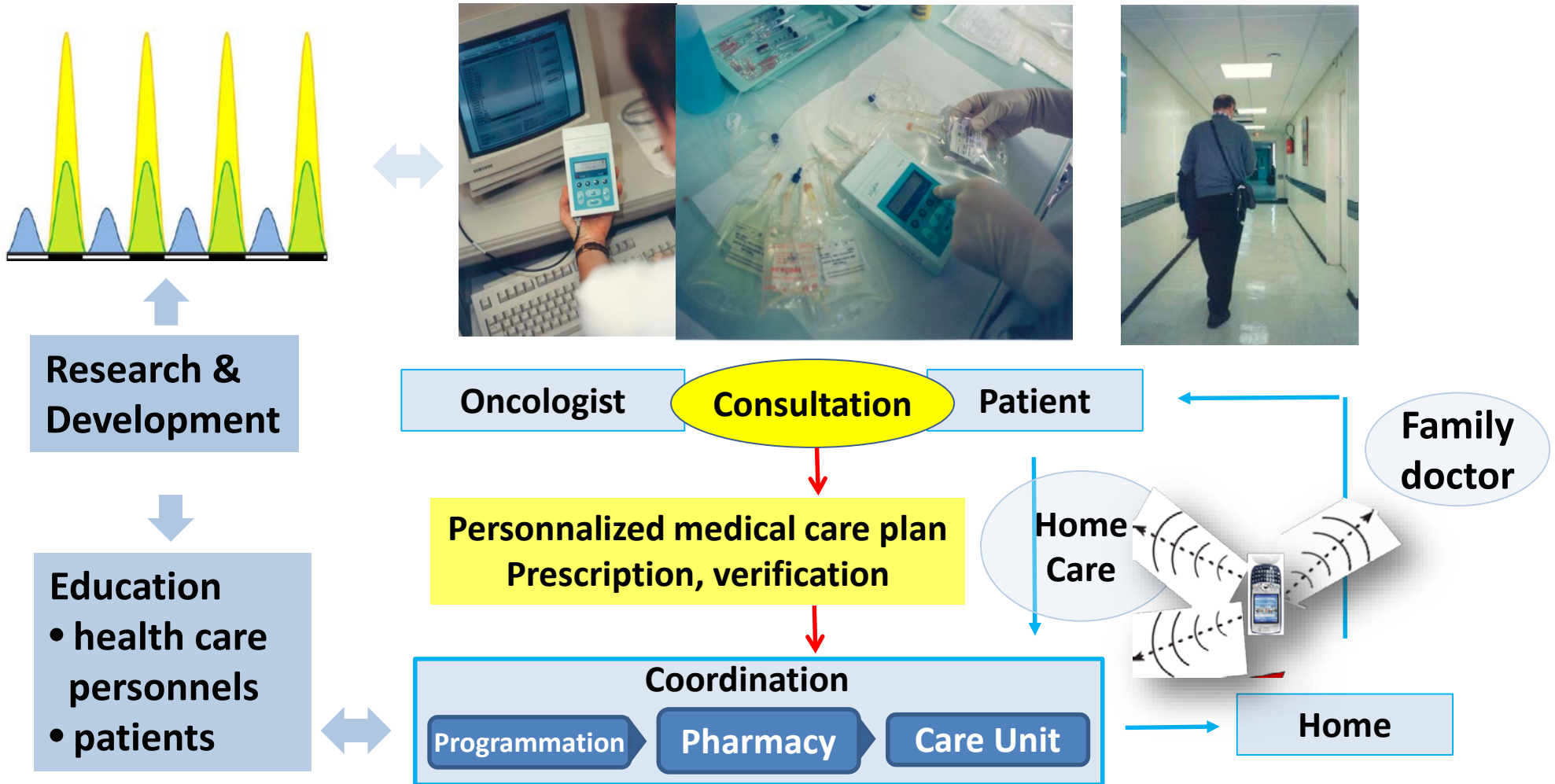
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1990-2014: ~ 3 000 patients*



*Chronotherapy Unit, Hôpital Paul Brousse, Villejuif  
1990-2014: ~ 3 000 patients*



### Chronotherapeutic trials with 5-FU-LV-oxaliplatin (1988-2006)

Trial	Schedule	Gr 3-4 toxicity (% pts)	Objective responses (%)
Phase III 278 pts, 1st line	Chrono-std	14%	51%
	Constant	$P < 0.001$ 76%	$P = 0.003$ 30%
Phase I-II staggered 114 pts 2-3rd line	Chrono-std	16%	30%
	Chrono-std $\pm 12h$	80%	12%



### Chronotherapeutic trials with 5-FU-LV-oxaliplatin (1988-2006)

Trial	Schedule	Gr 3-4 toxicity (% pts)	Objective responses (%)
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	Constant	$P < 0.001$ 76%	$P = 0.003$ 30%
Phase I-II staggered 114 pts 2-3rd line	<b>Chrono-std: best tolerability consistent in men, not in women</b>		



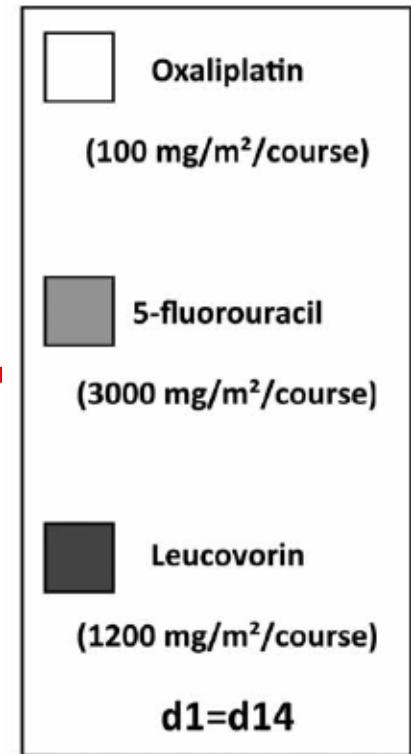
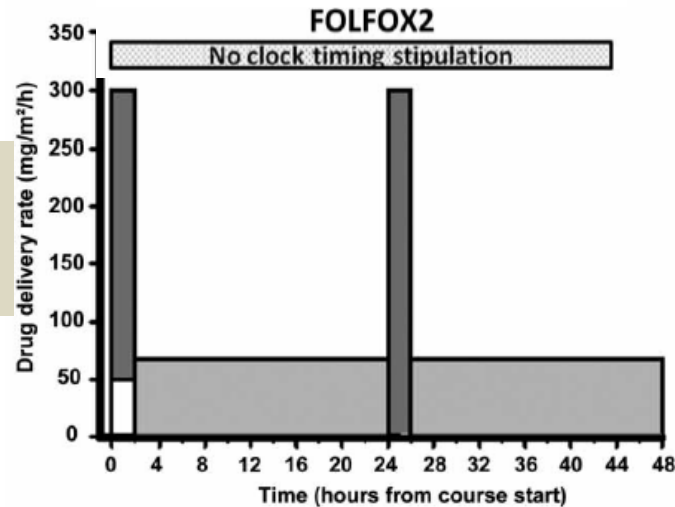
**Survival improvement in men on chronoFLO for metastatic colo-rectal cancer  
(meta-analysis of 3 randomized international trials in 842 patients)**

<b>Sex (N patients)</b>	<b>Drug delivery schedule</b>	<b>Median survival, months [95% CL]</b>	<b>% alive at 5 years</b>	<b>P (Logrank)</b>
Women (N = 345)	Chrono	16.6 [13.9-19.0]	8	0.012
	Conventional	18.4 [16.6-20.2]	21	
<b>Men (N=497)</b>	Conventional	17.5 [16.1-18.8]	18	0.009
	<b>Chrono</b>	<b>20.8 [18.7-22.9]</b>	<b>29</b>	

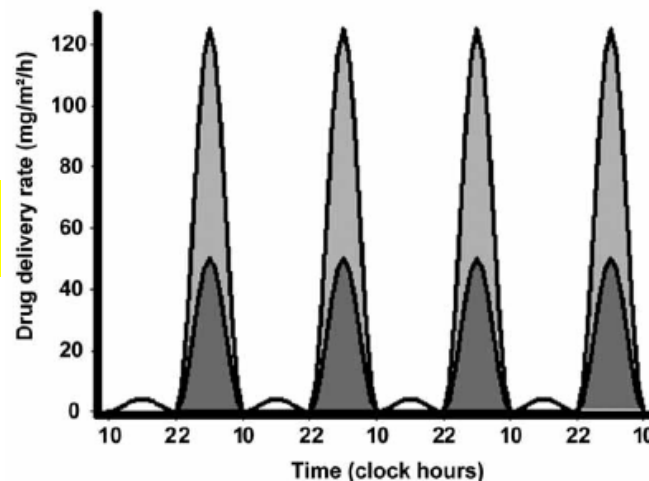
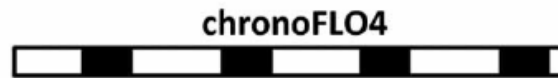


## Conventional chemotherapy

564 patients  
first line treatment for  
metastatic colorectal cancer  
36 centers, 10 countries



## Chronotherapy



*Giacchetti et al. J Clin Oncol 2006;*  
*Ann Oncol 2012*

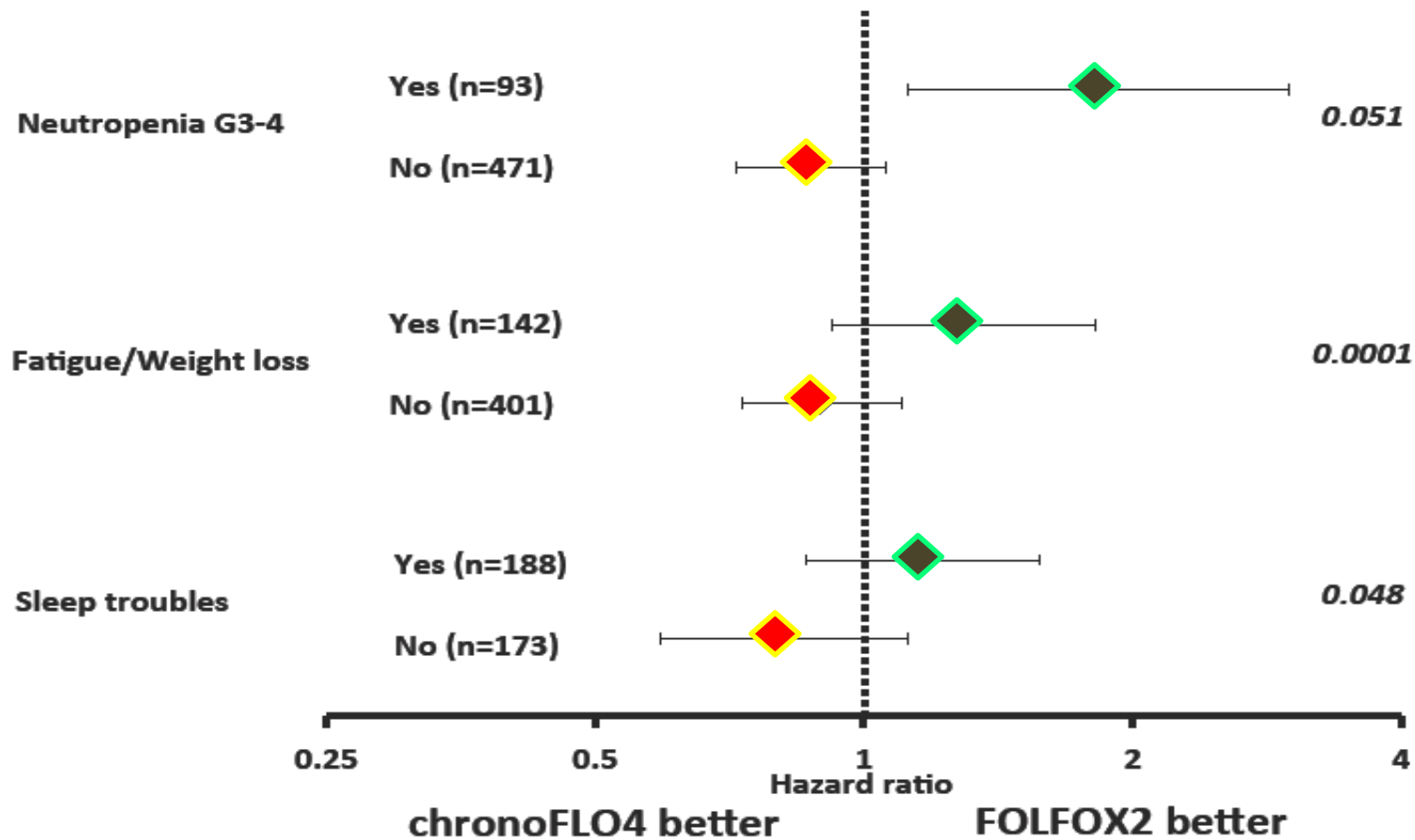
*Innominato et al. Chronobiology Int 2011*  
*Int J Cancer 2012; Cancer 2013*





# Systems Cancer Chronotherapeutics

## Chemotherapy-induced toxicity:

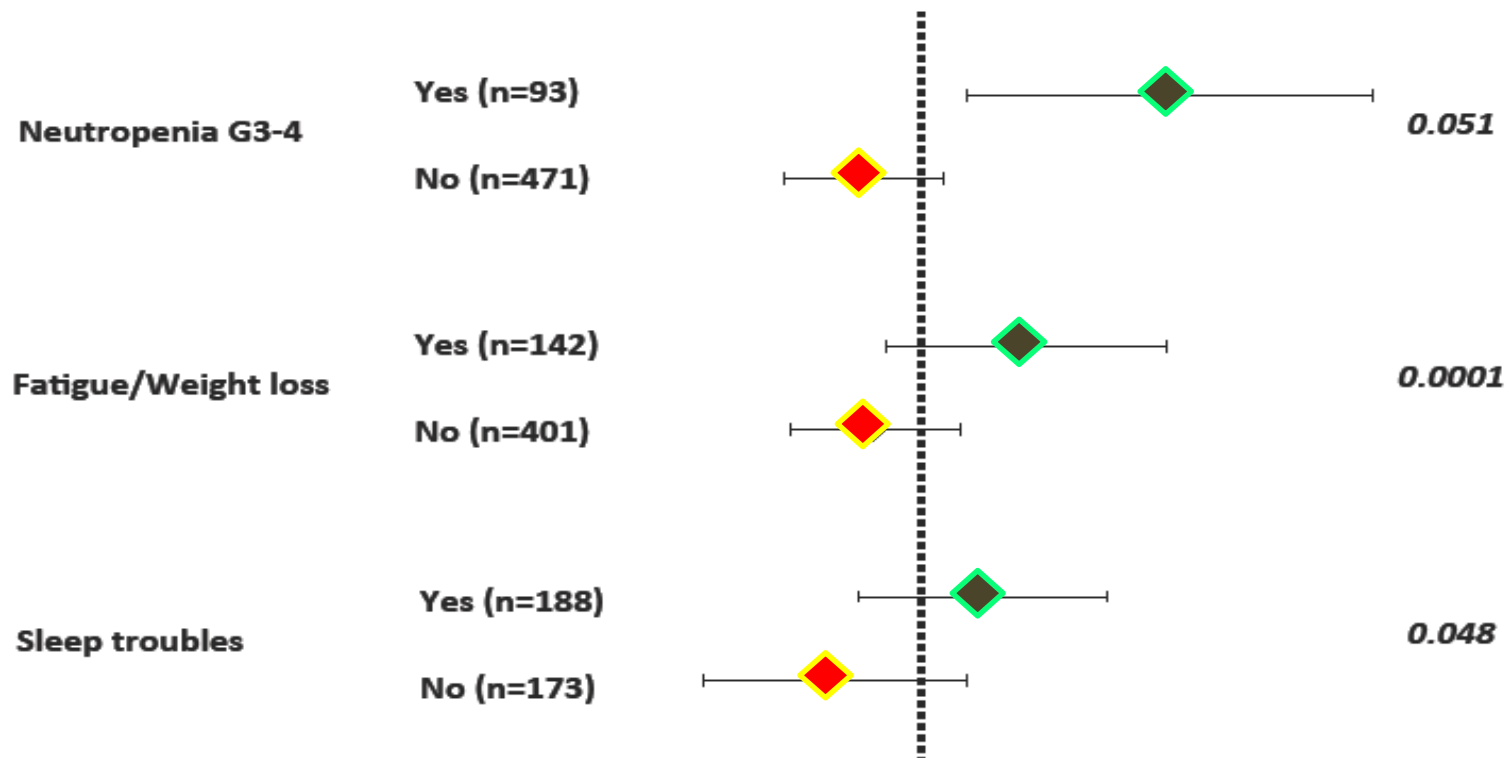


*Innominato et al. Chronobiology Int 2011  
Int J Cancer 2012; Cancer 2013; Ann Med 2014, in press*



# Systems Cancer Chronotherapeutics

## Chemotherapy-induced toxicity:



**Improved tolerability associated with improved survival  
on chronotherapy not on conventional FOLFOX**

*Innominato et al. Chronobiology Int 2011  
Int J Cancer 2012; Cancer 2013; Ann Med 2014, in press*

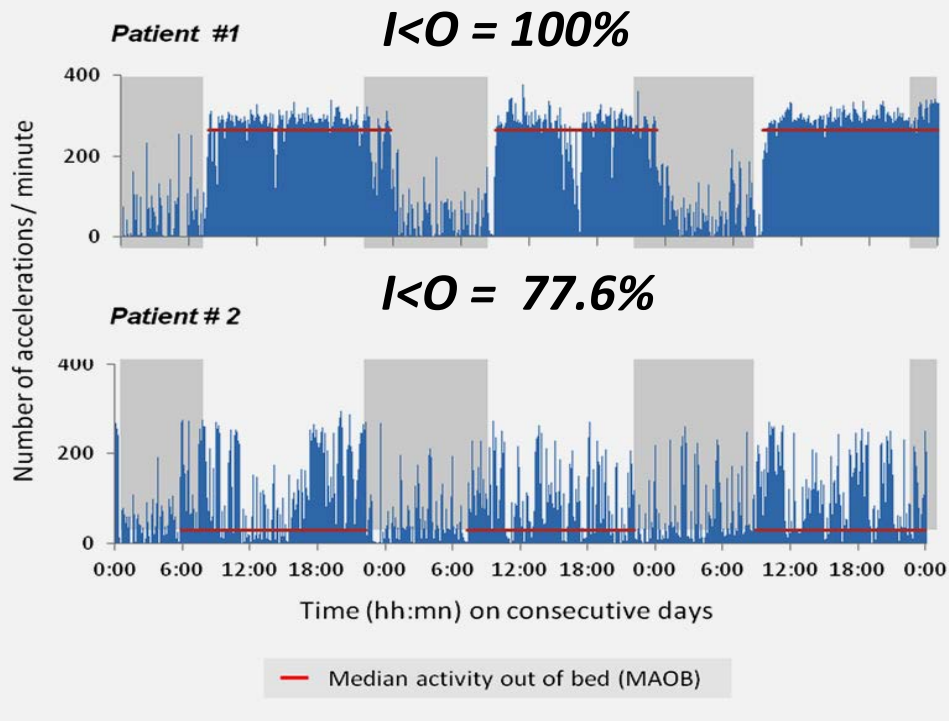


## Clinical relevance of rest-activity rhythm

436 patients with metastatic colorectal cancer

### Rest-activity monitoring

Computation of  $I < O$



**Circadian disruption:  $I < O$  less than 97.5%**

# Clinical relevance of rest-activity rhythm

436 patients with metastatic colorectal cancer

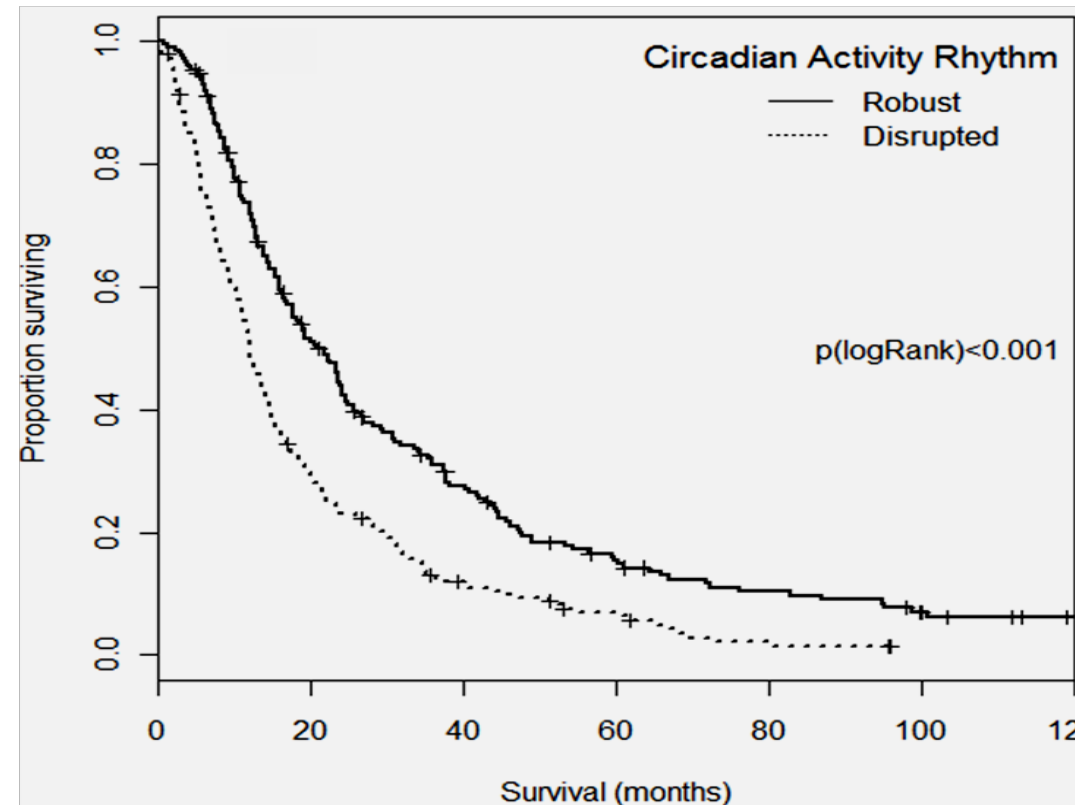
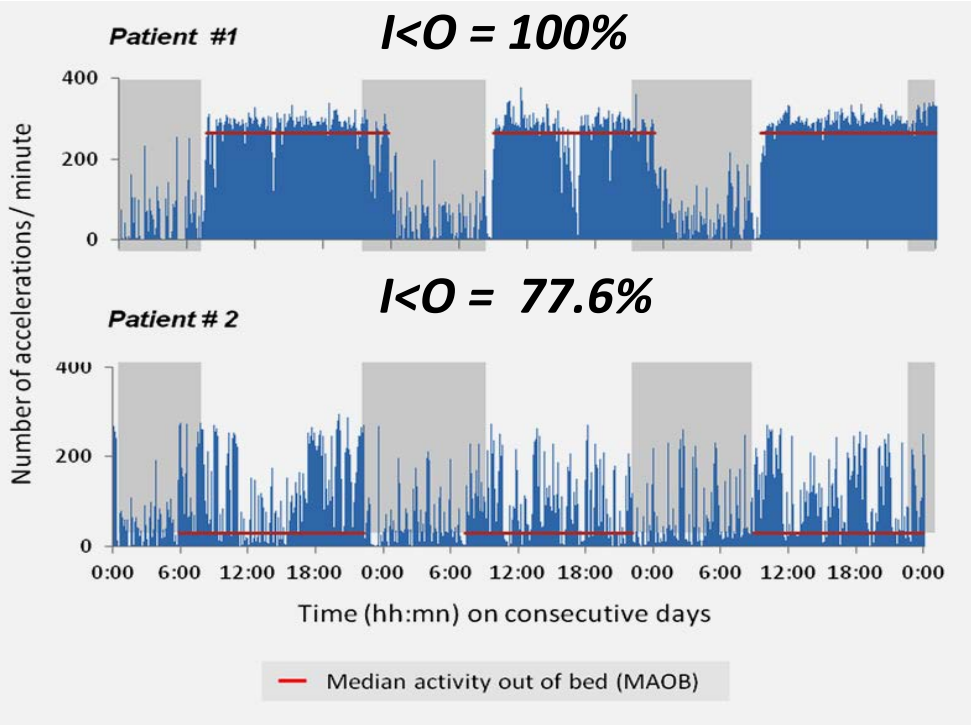


**Rest-activity monitoring**

Computation of I<O

**I<O prediction of overall survival**

in 436 patients



**Circadian disruption: I<O less than 97.5%**



## **Circadian disruption on chemotherapy**

**Circadian disruption  
induced by  
12 anticancer drugs  
according to  
dose & timing in mice**

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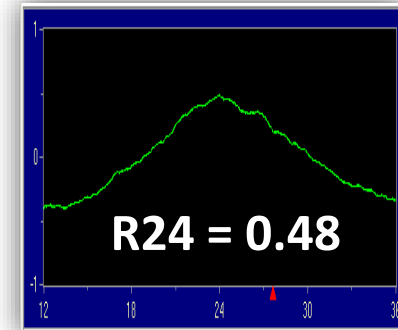
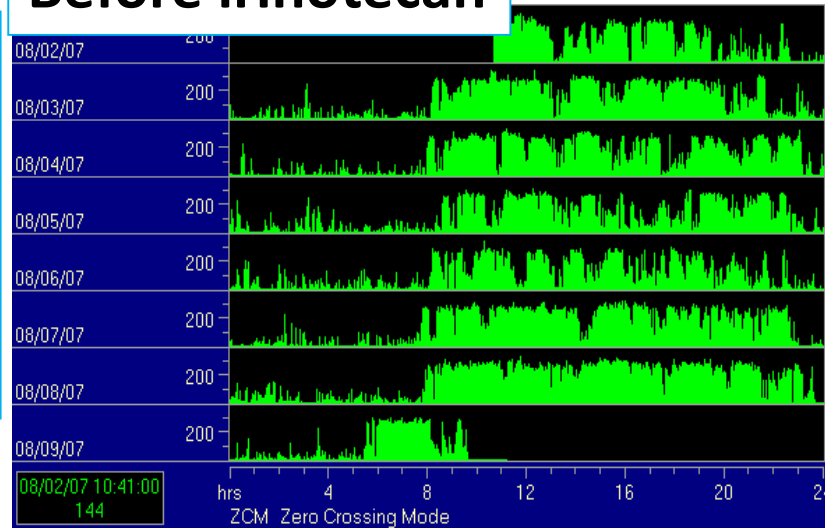


**Motionlogger® Watch**

## Circadian disruption on chemotherapy

Circadian disruption induced by 12 anticancer drugs according to dose & timing in mice

Before irinotecan



PS = 0



Motionlogger® Watch

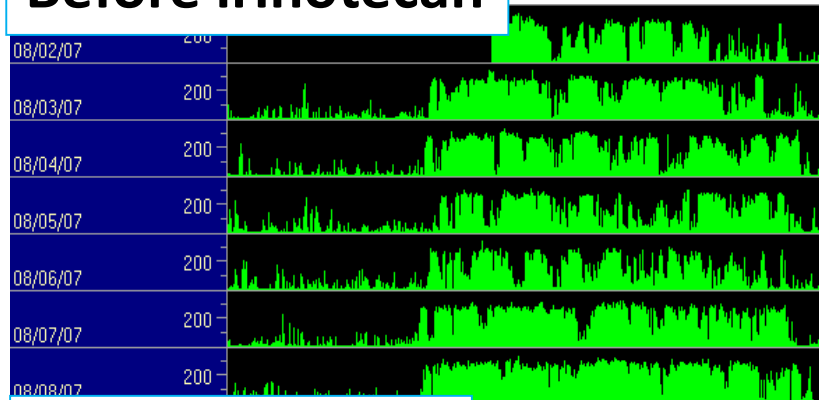
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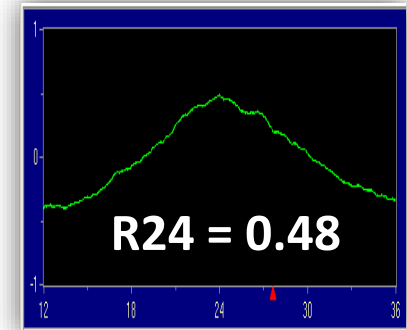
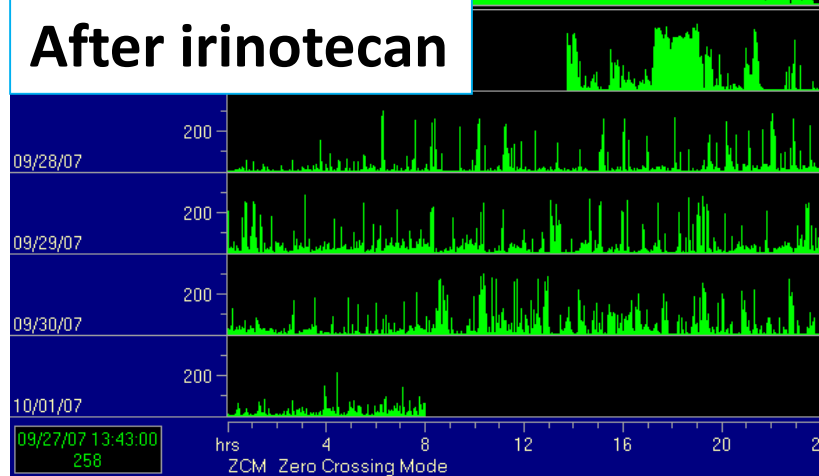


Motionlogger® Watch

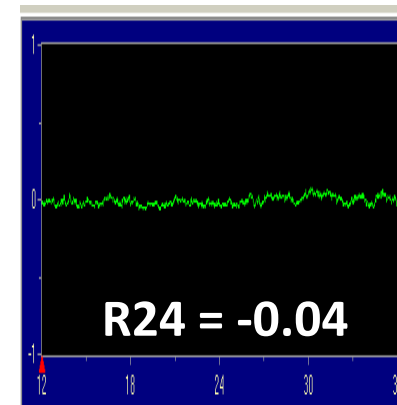
Before irinotecan



After irinotecan



PS = 0

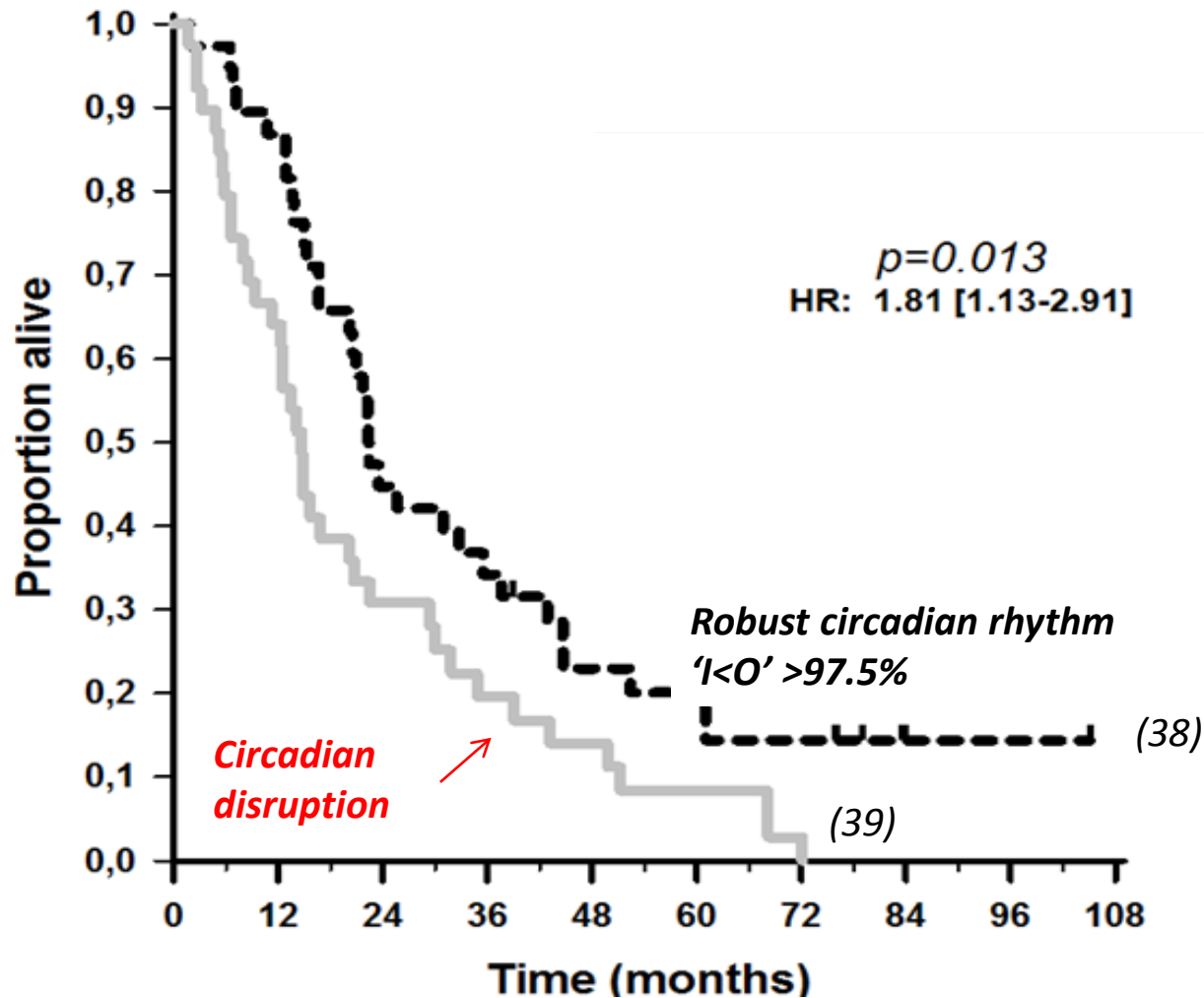


PS = 4

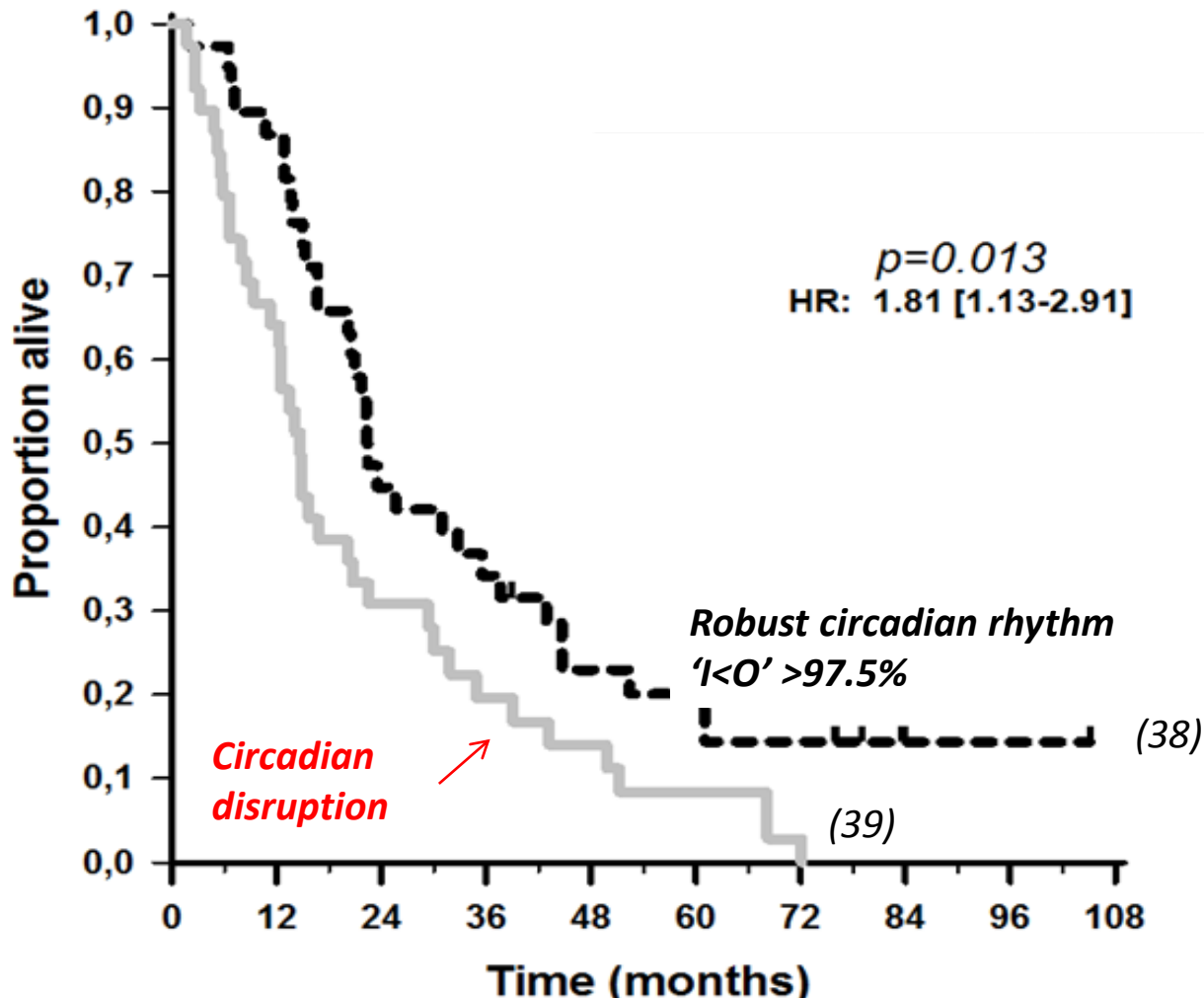
Asthenia grade 3  
Anorexia, grade 3



## Circadian disruption of rest-activity in patients **on** chemotherapy a significant predictor of poor survival



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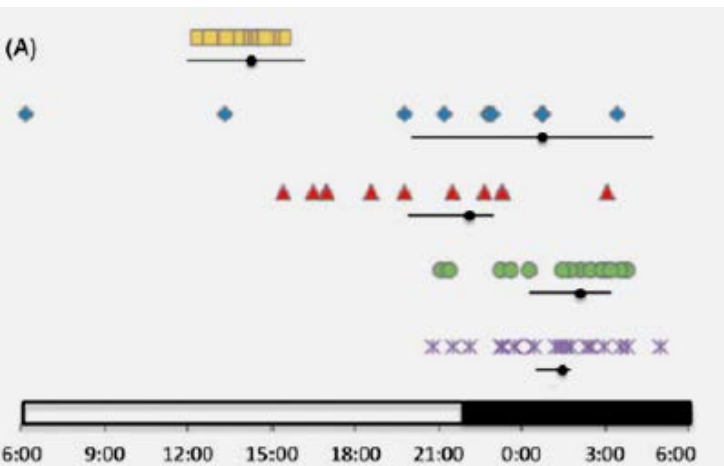


P. Innominato

## Timing of circadian maximum (acrophase) in rest-activity and skin surface temperature rhythms

10 individual patients before, during and after a 4-day course of chronotherapy

*Before*



Time (clock hours)

Rest-activity

Temperature patch #1

#2

#3

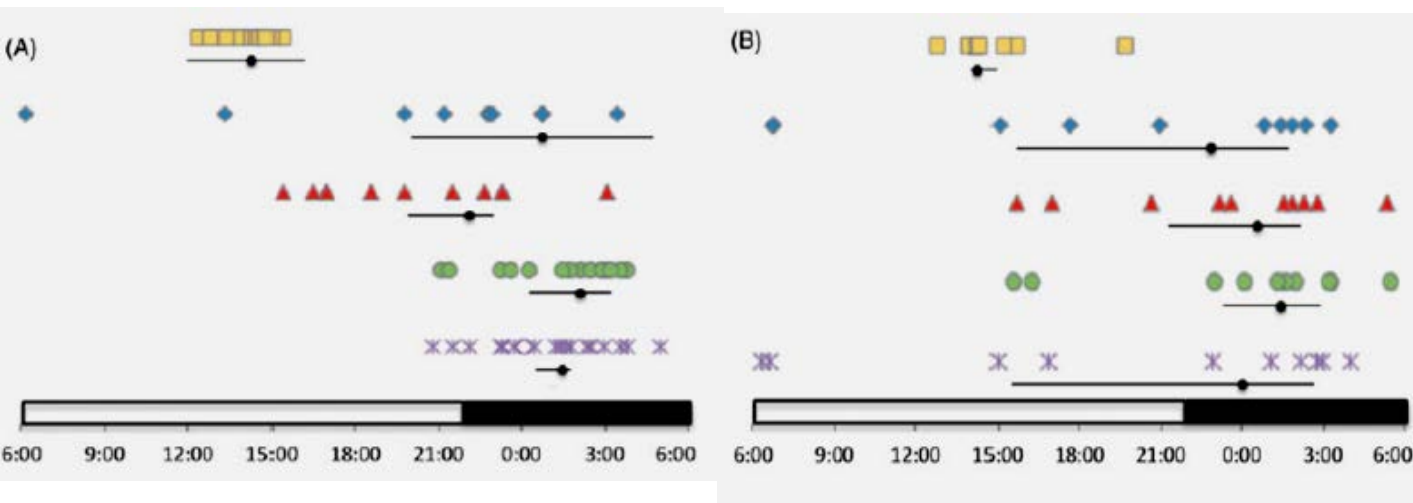
#4

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*During*



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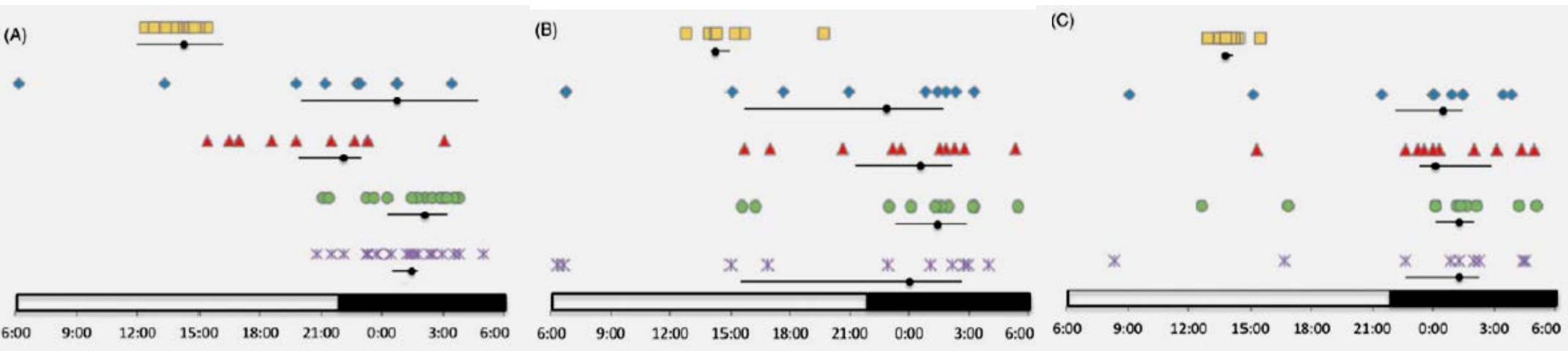
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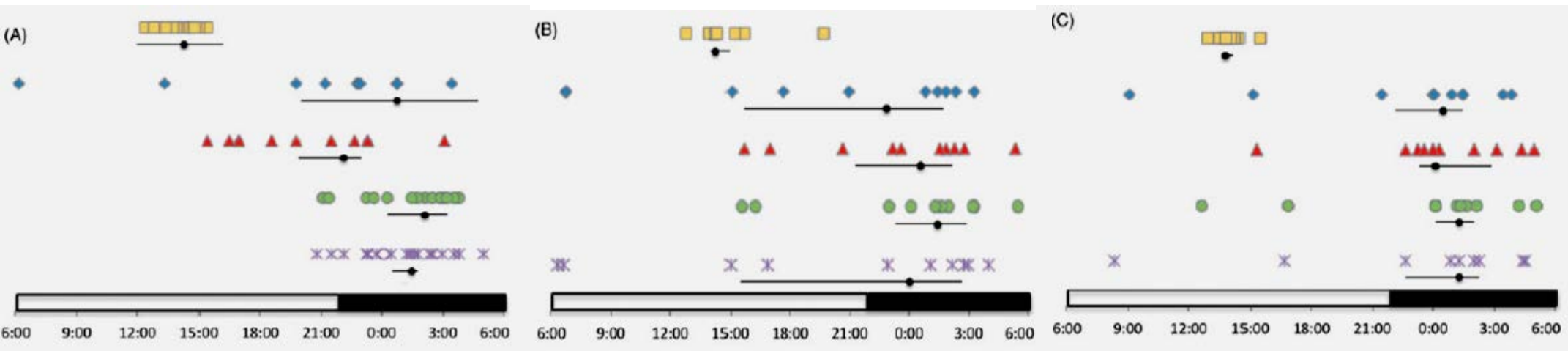
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Time (clock hours)

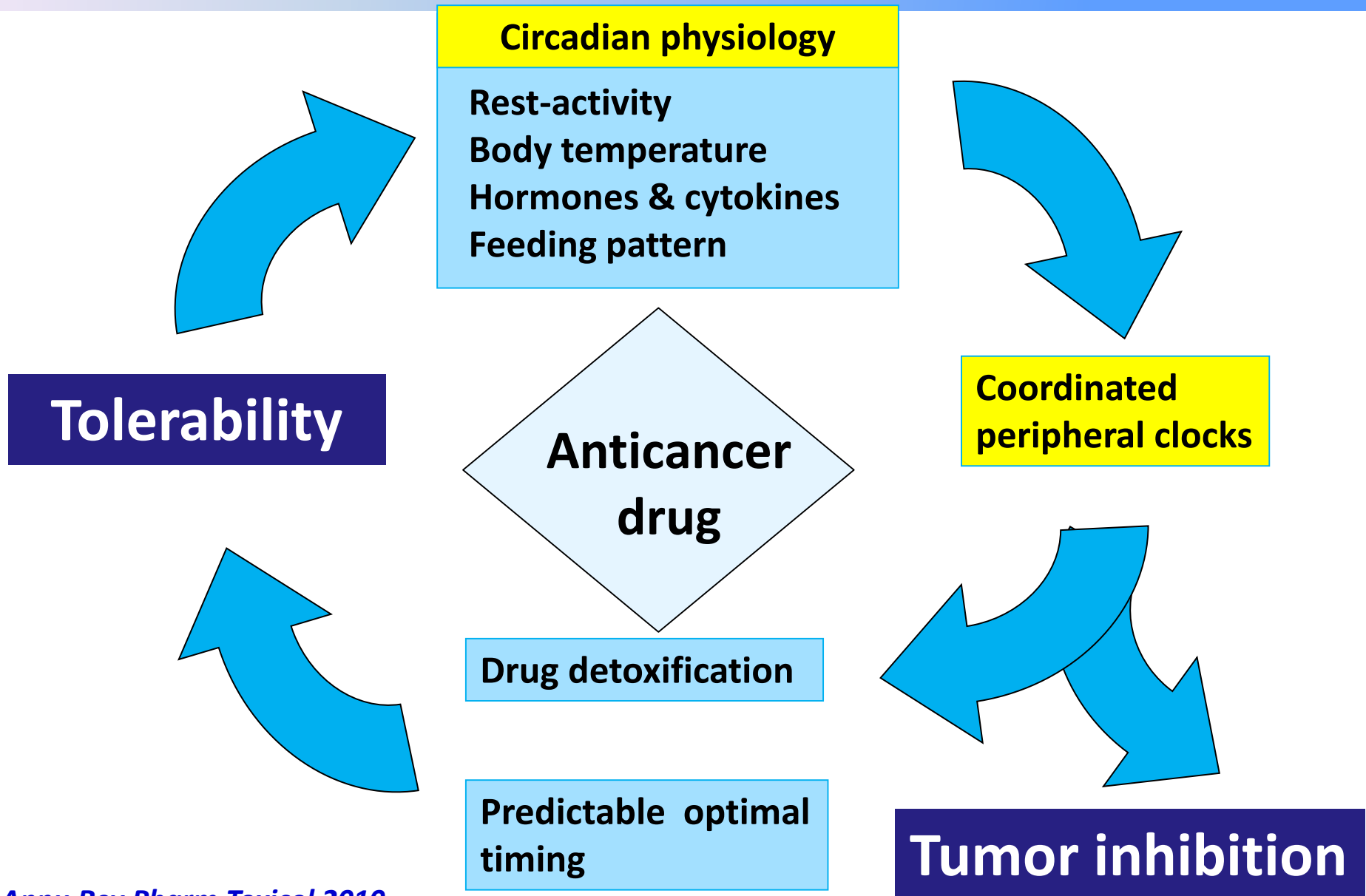
Rest-activity

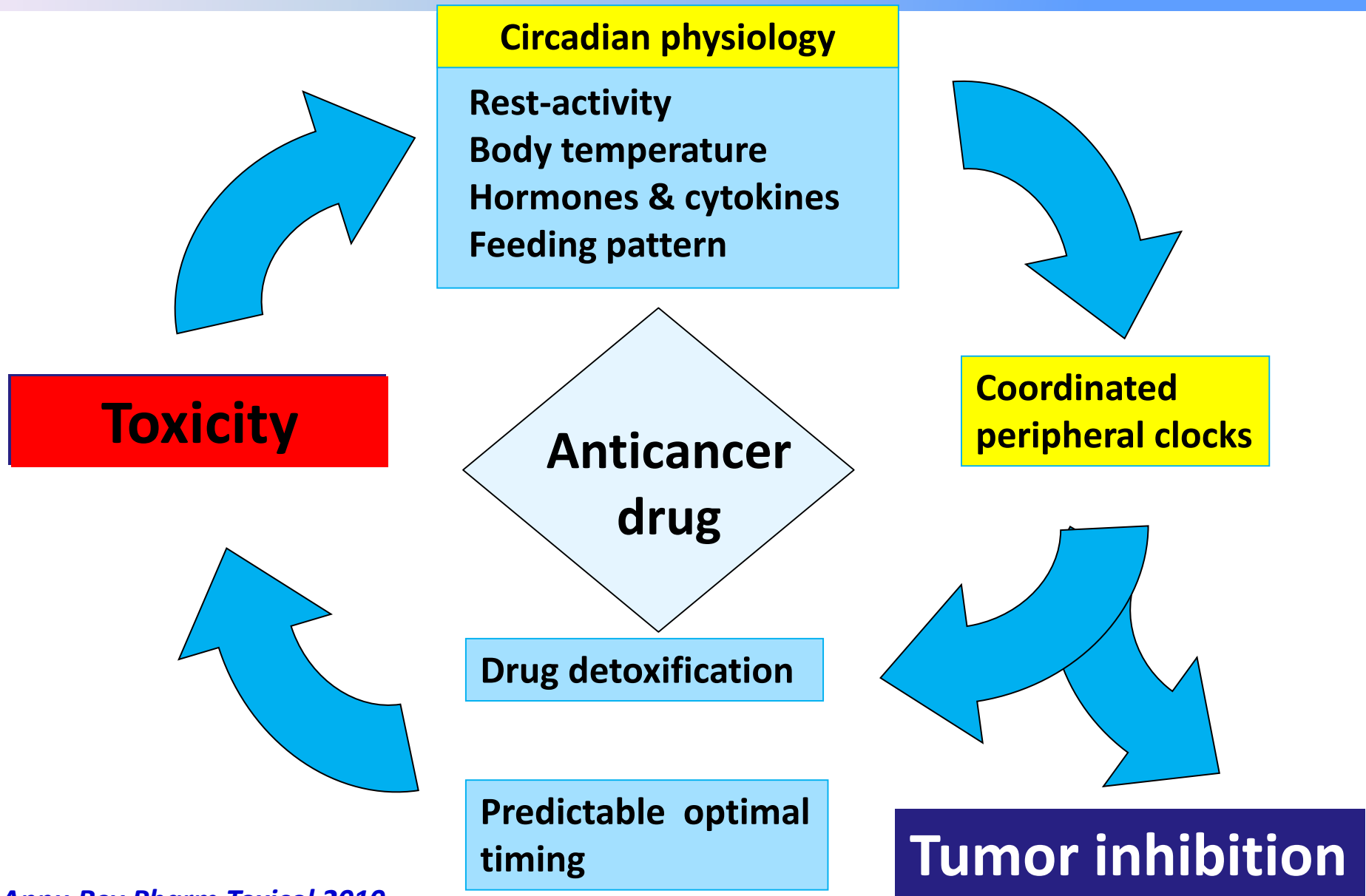
Temperature patch #1

#2

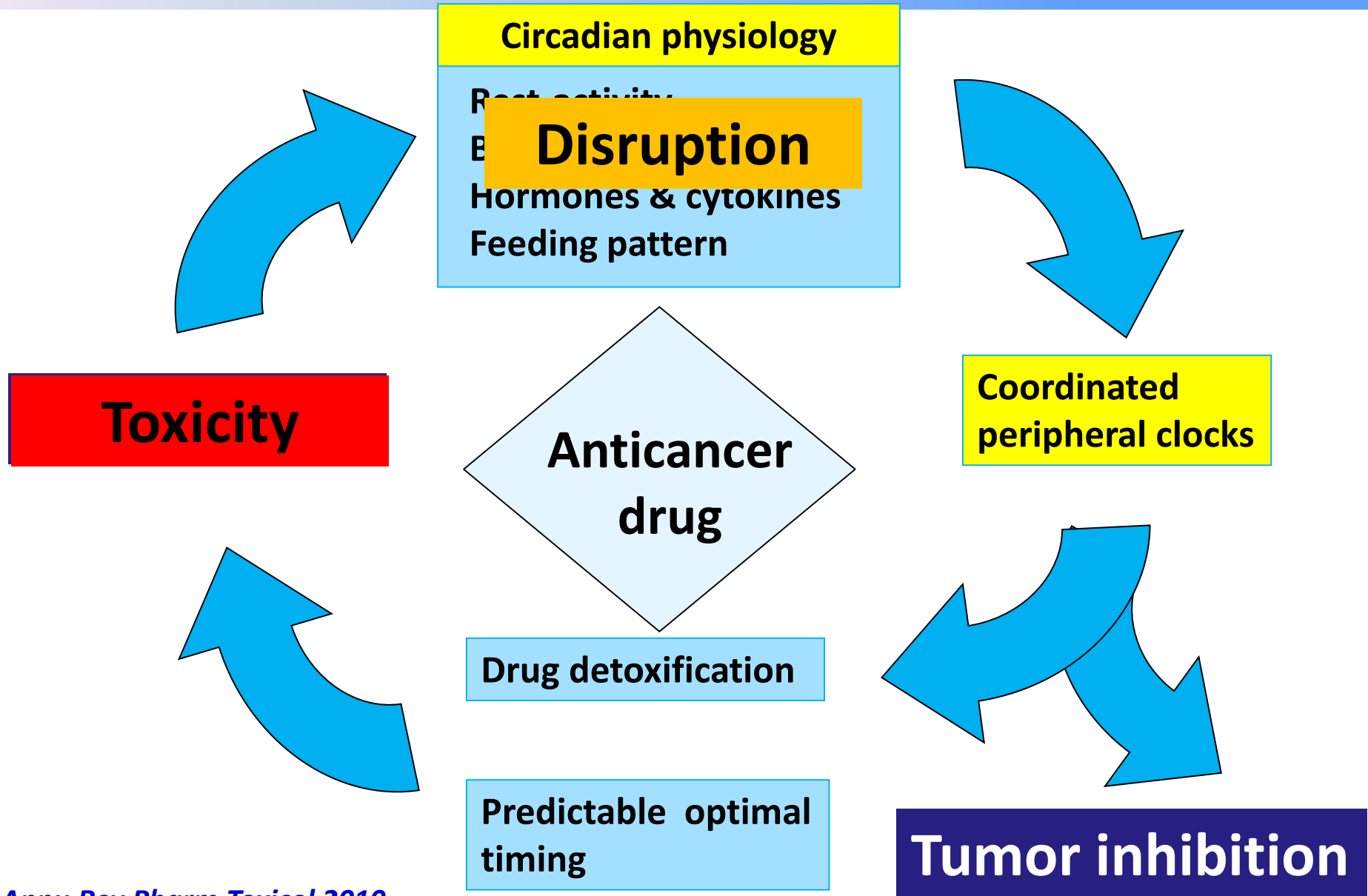
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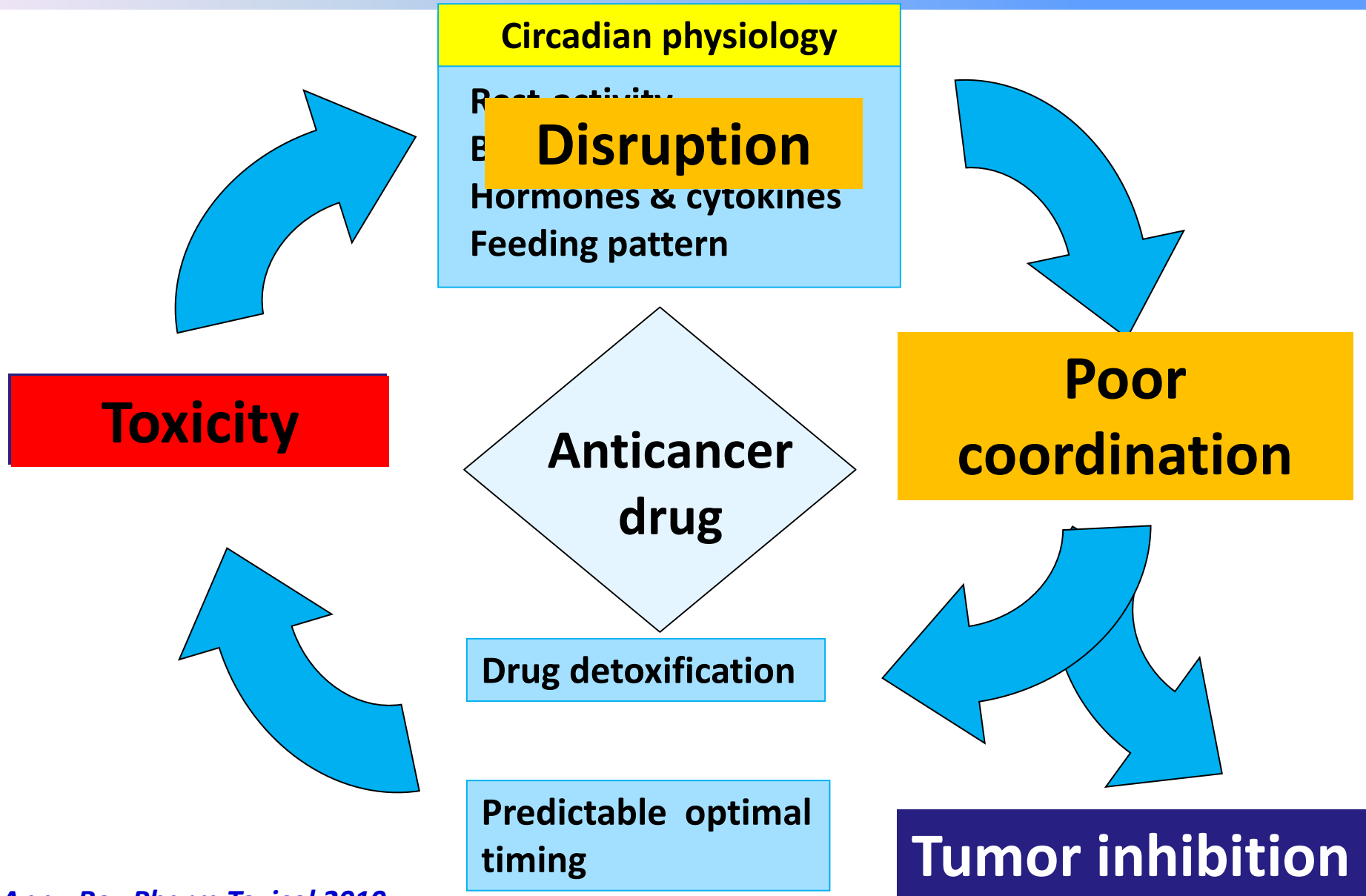
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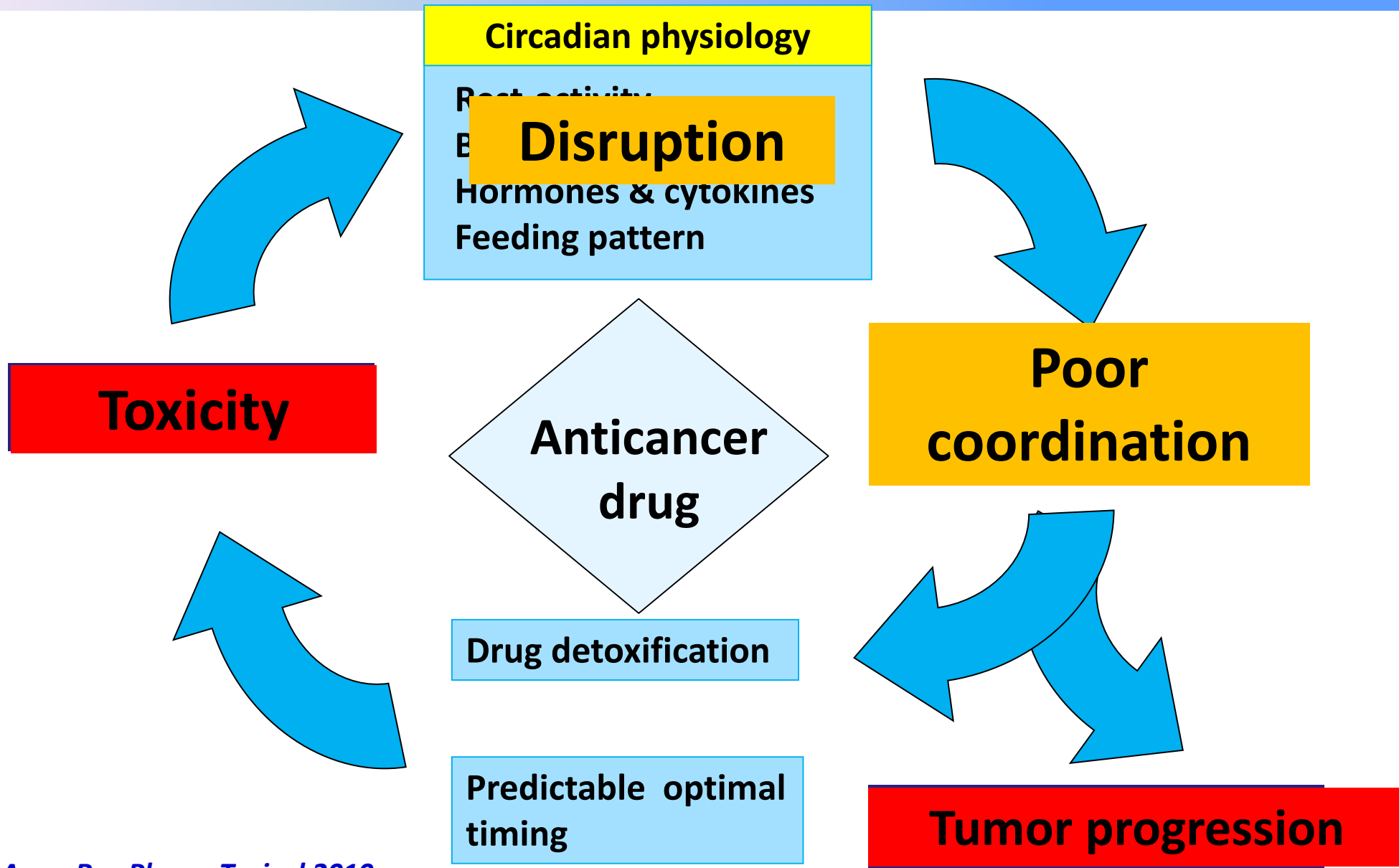


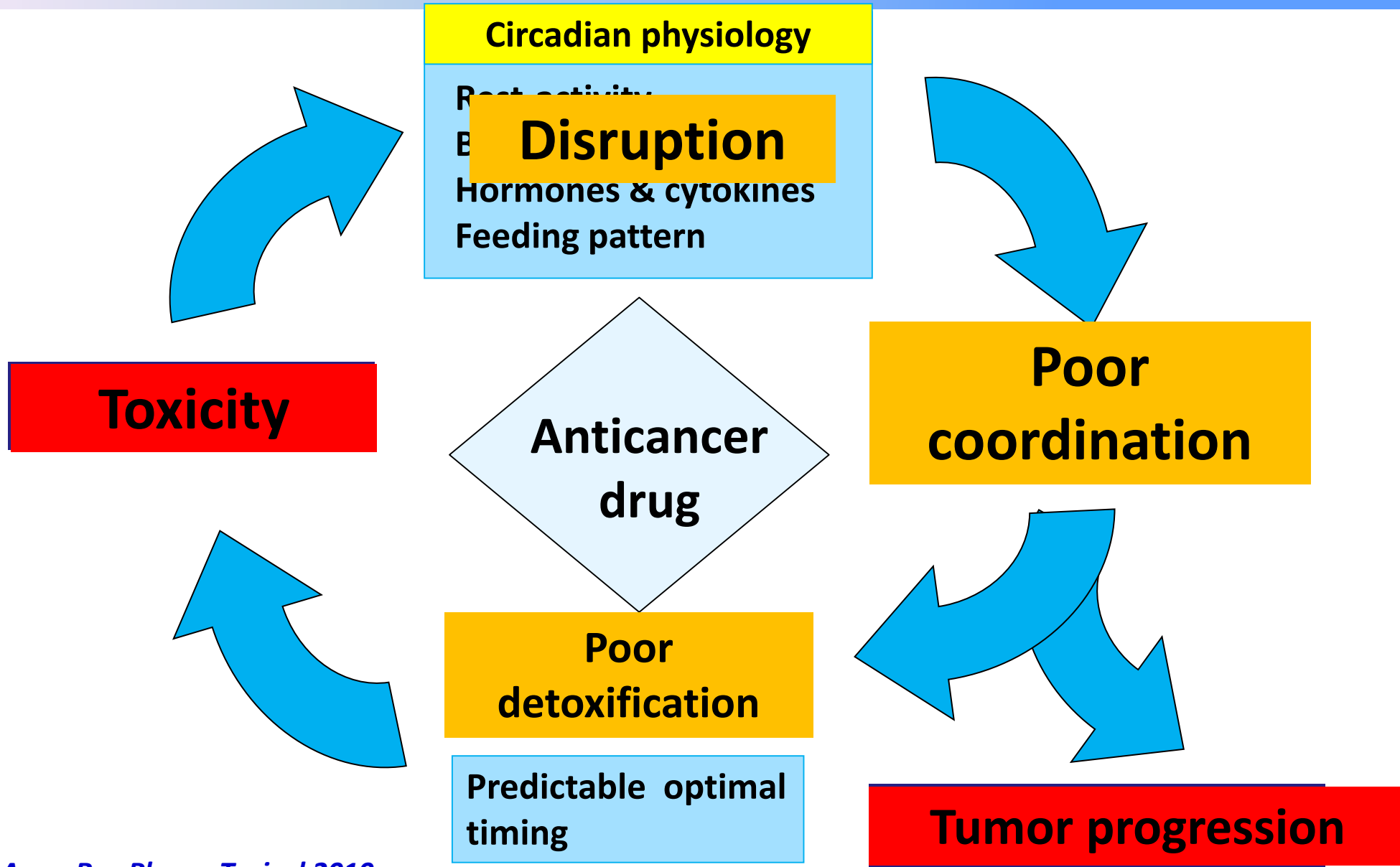


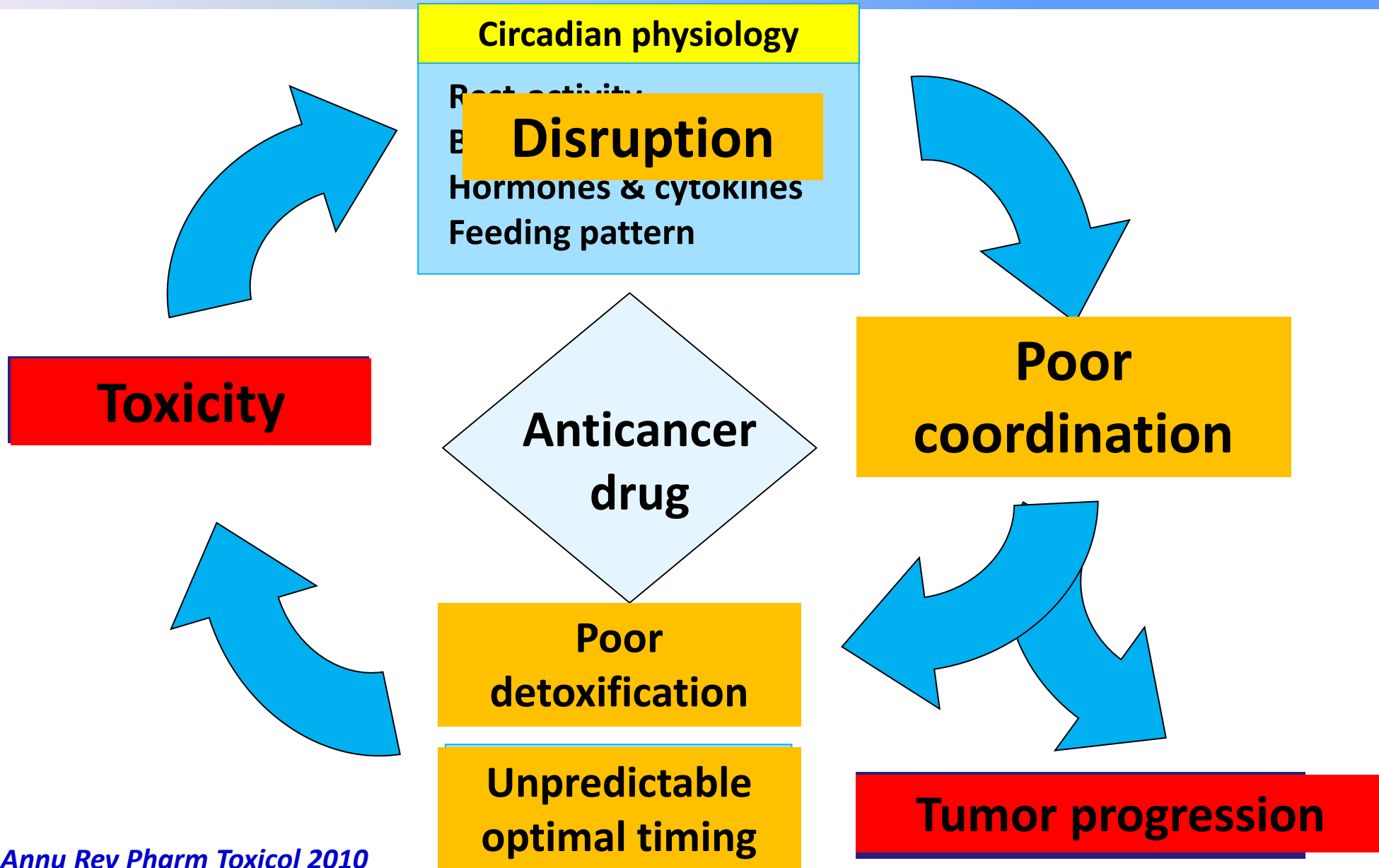










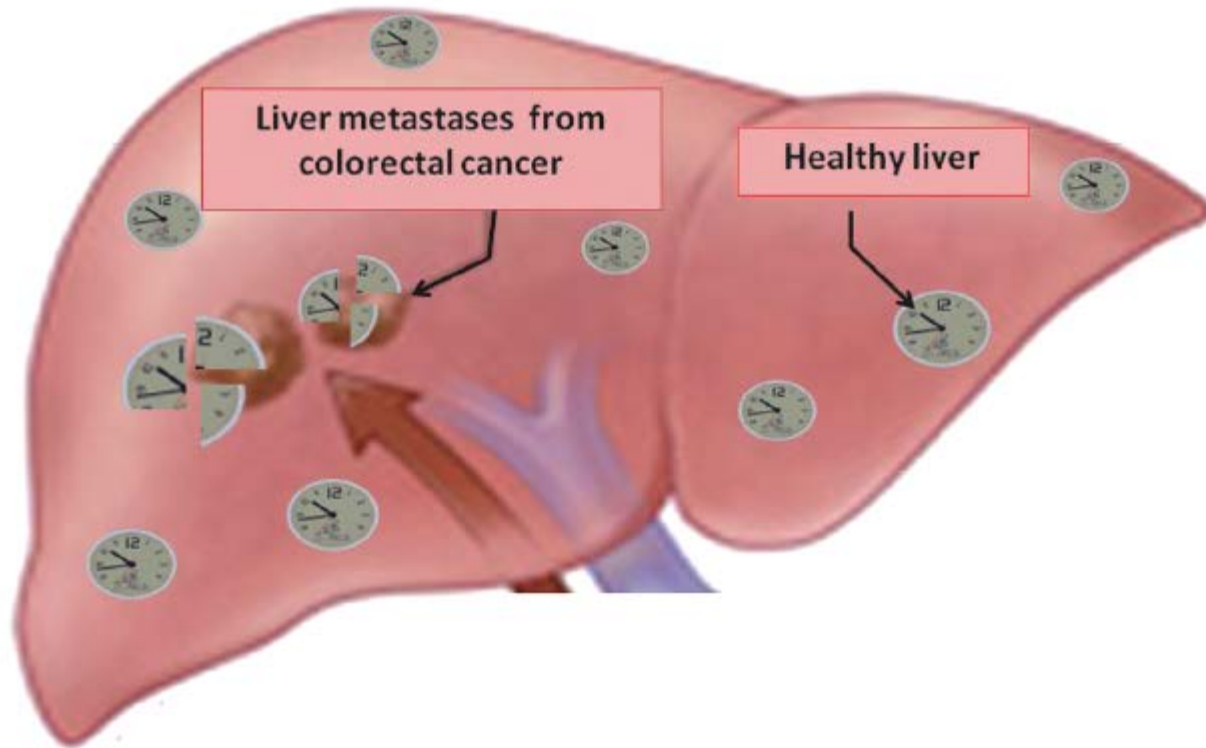


## A shift in paradigm of cancer treatments?

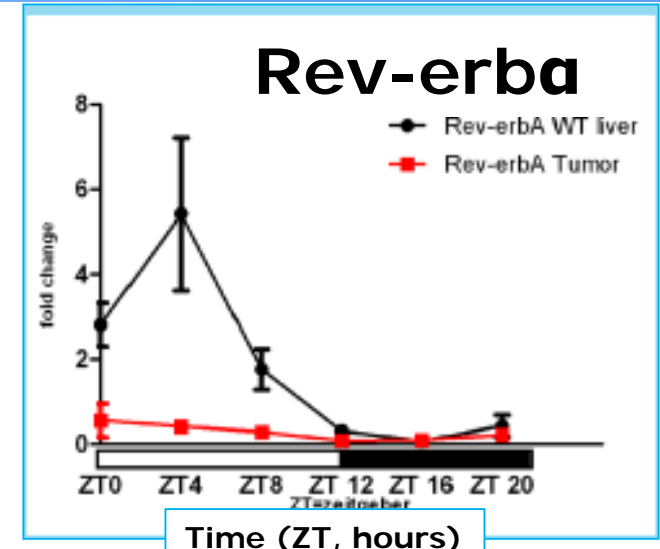
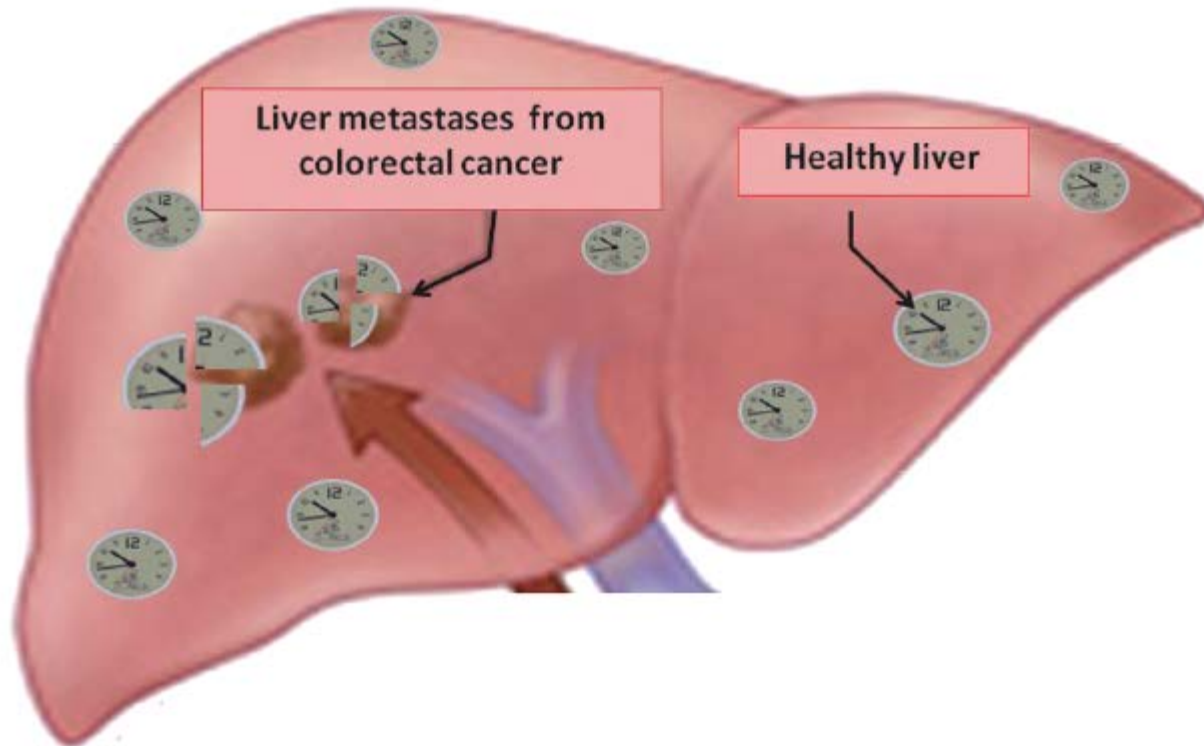
**Conventional chemotherapy principle:  
The more the toxicity, the better the efficacy**

**Chronotherapeutics principle:  
The better the tolerability, the better the efficacy!**

Circadian clocks in healthy liver cells  
Disrupted clocks in cancer cells



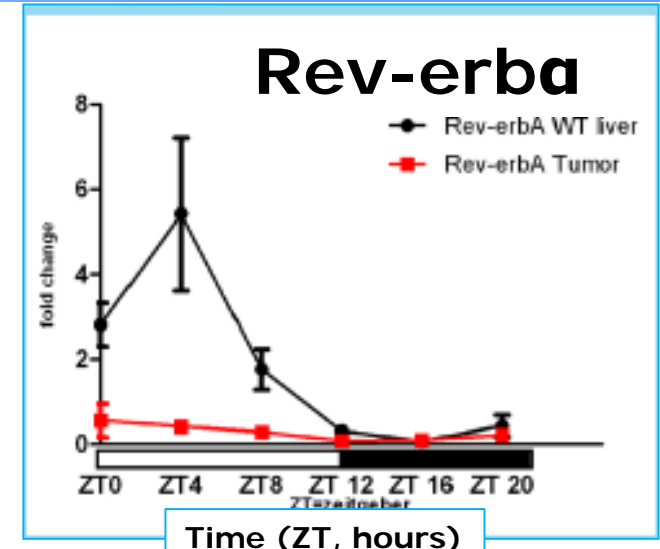
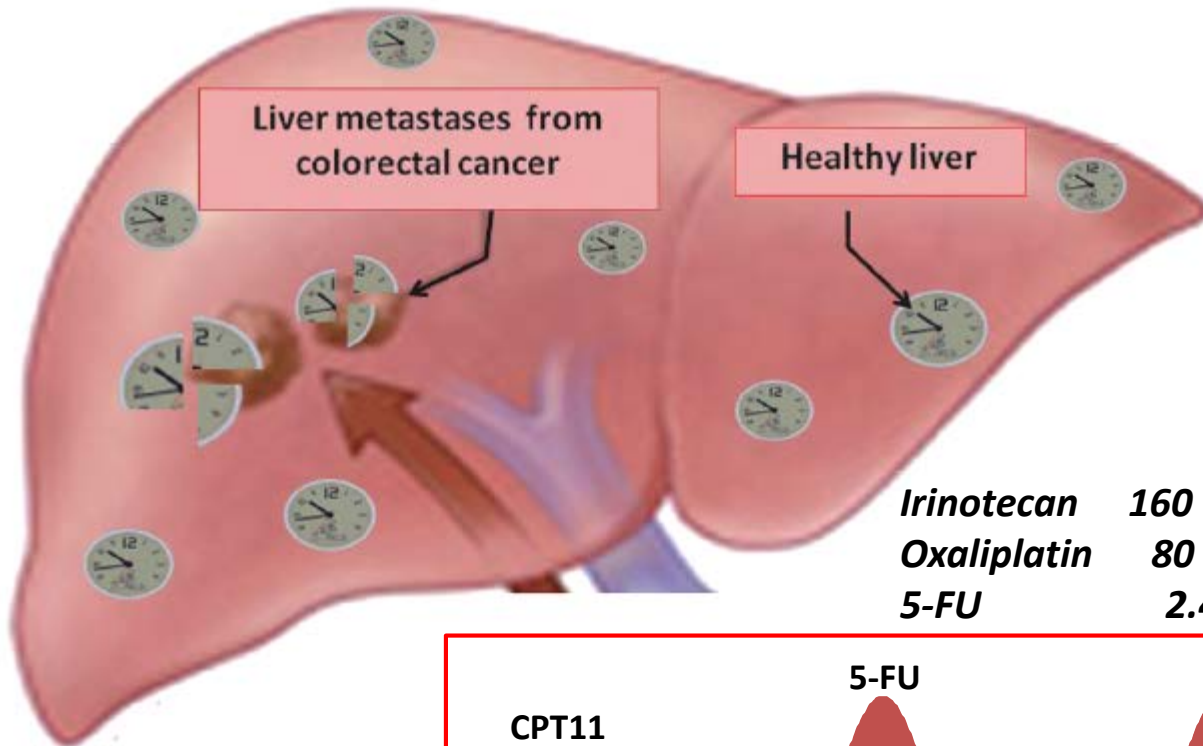
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*Huisman et al. Cancer Res*  
 2011  
 71 (8, Suppl 1), abstr 1515



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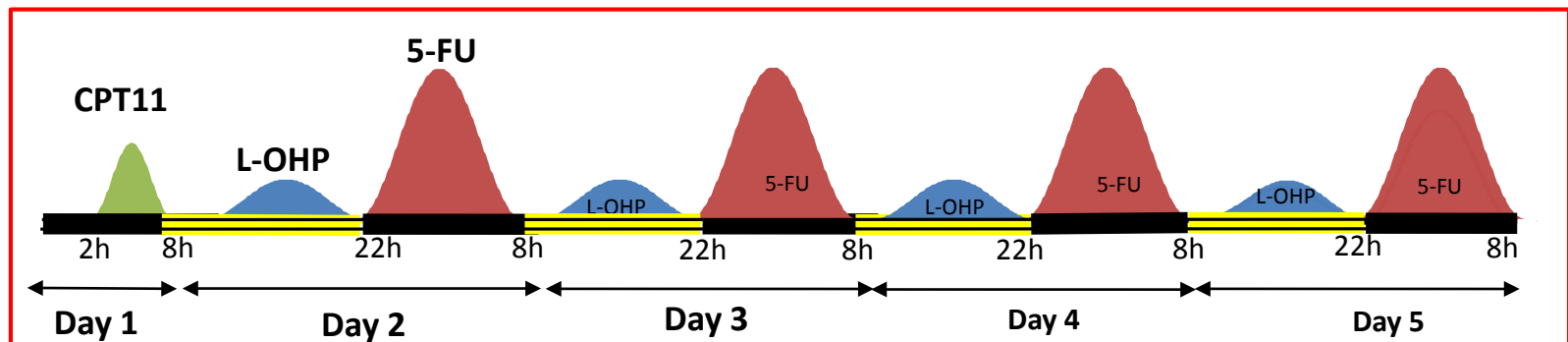


*Huisman et al. Cancer Res 2011*

71 (8, Suppl 1), abstr 1515

**Irinotecan** 160 mg/m<sup>2</sup> day1  
**Oxaliplatin** 80 mg/m<sup>2</sup> days2-5  
**5-FU** 2.4 g/m<sup>2</sup> days 2-5

Every 3 weeks

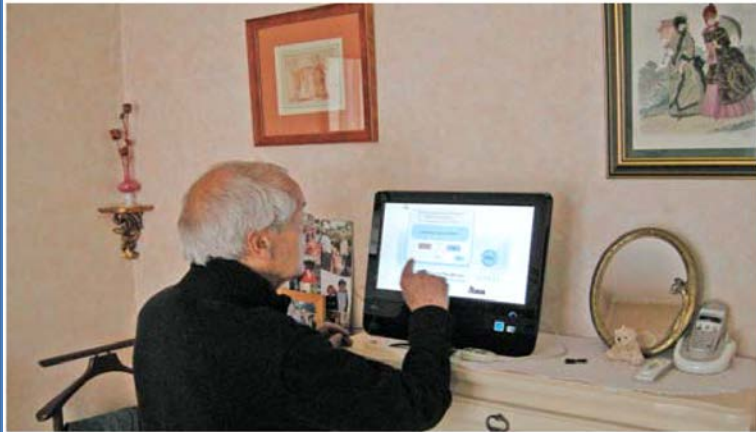


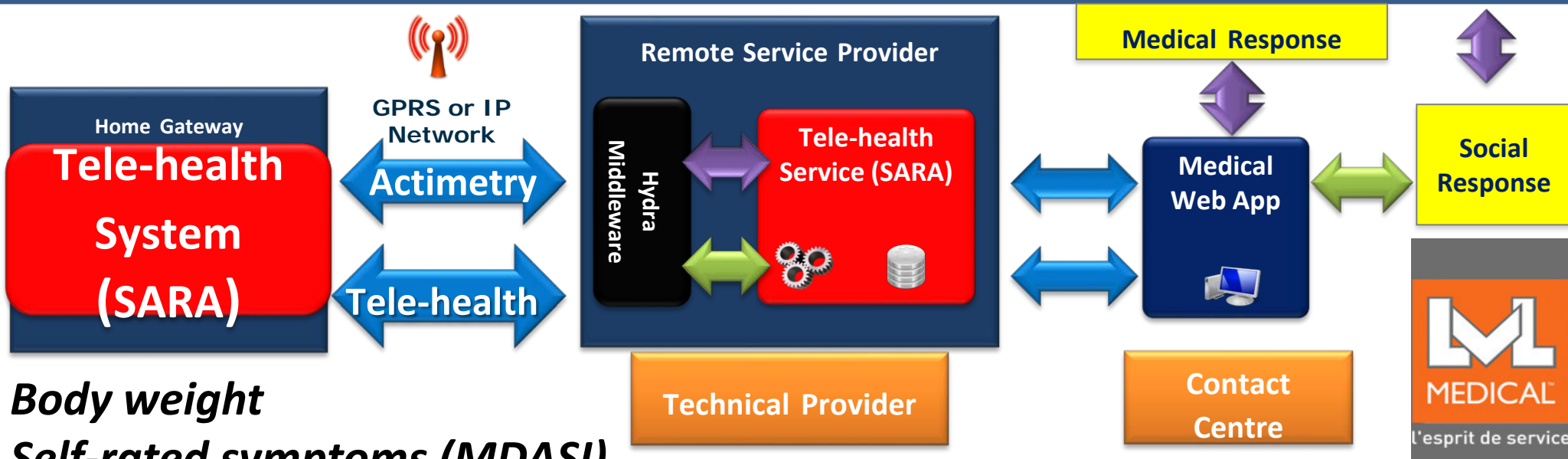
*Bouchahda et al. Cancer 2009*

- Clock- Cell cycle coupling at single cell level
- Clock- Chronopharmacology at cell population level
- Cancer Chronopharmacology in mice
- Cancer Chronotherapy in patients



Integration into home care

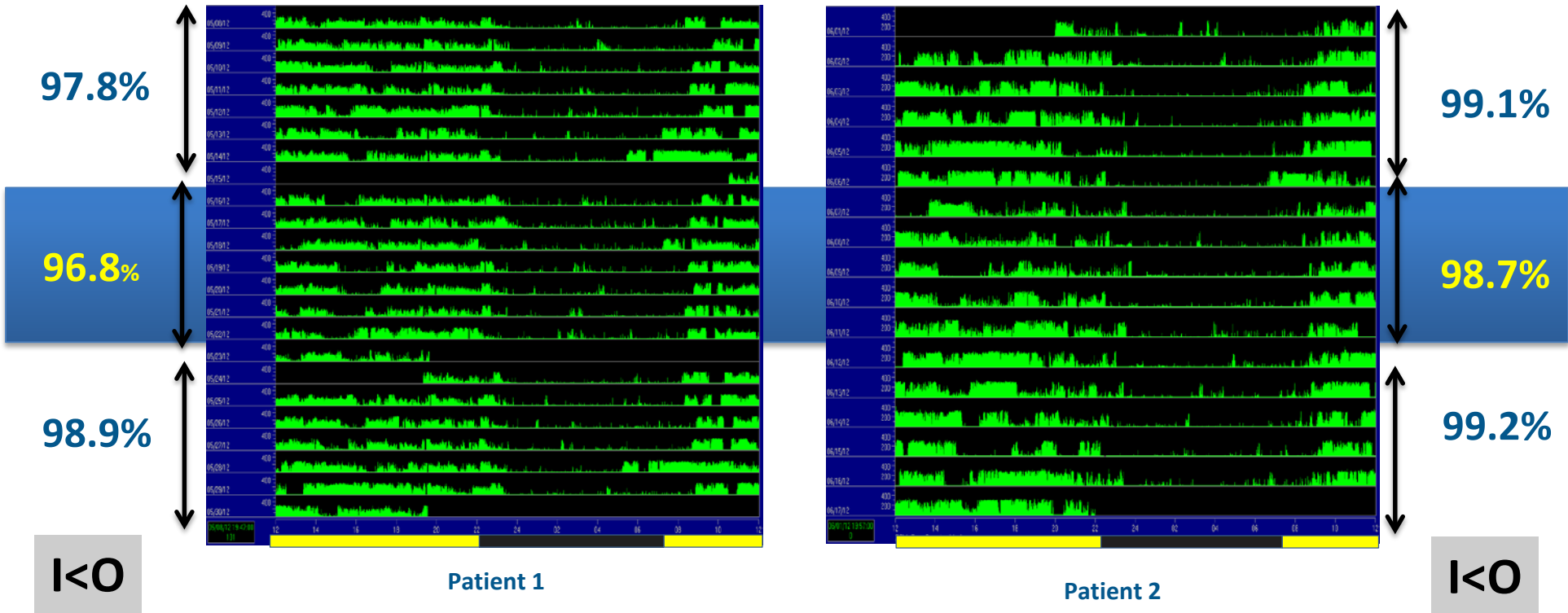




**Body weight**  
**Self-rated symptoms (MDASI)**  
**Rest activity rhythm**



## Daily teletransmission of rest-activity pattern throughout chronotherapy (chronofLO4) at home



Two patients with mCRC or pancreatic ca on  
Irinotecan, Oxaliplatin, 5-Fluorouracil, Leucovorin (chronofLO4)



## Objectives

**Patient-centered health system integrating biological rhythms, information & communication technologies, services, and patient chart**

**For improving patient autonomy, QoL, & survival through medical progress stimulation**

- **Early non invasive detection of predictors of health alteration in chronic disease patients (cancer)**
- **Proactive interventions for preventing patient deterioration and emergency hospitalization**
- **Adjustment of treatment delivery to the individual patient and to his (her) own clocks**



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**Altran, Voluntis, FSI, Axon Cable, Blue Linea, UTT, Univ Reims, INSERM**



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**IJGodinot, AP-HP, LVL médical, CEA, MADOPA, Thuasne Médical**



## Conclusions

- Circadian clocks control cancer processes and treatment effects
- Targeting host and/or tumor clocks could improve patient outcomes
- Joint optimization of tolerability & efficacy in each patient through personalized chronotherapy delivery according to CTS monitoring at home
- **Mathematical models and dedicated technologies for designing optimal treatment strategy & delivering optimal chronotherapy schedule**



# Systems Cancer Chronotherapeutics



## Rythmes Biologiques et Cancers



René Adam  
Sylvie Giacchetti



Virginie Hossard Alexandre Arbaud Pasquale Innominato Abdoulaye Karaboué  
Monique Lévi Sandrine Dulong Jacques Beau Jean Clairambault Ali Mteyrek Elisabeth Filipiski Xiao-Mei Li Elisabeth Ortiz-Tudela