

XVIII PTBR National Meeting Satellite Symposium  
Applications of low radiation doses in medical  
diagnosis and therapy



**Irradiation of arbitrary time-dependence:  
*mathematical model of adaptive  
response and oscillatory behavior, and  
its consequences***

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and Ludwik Dobrzański

Kielce, September 18, 2019

# Acknowledgements

- Prof. Ludwik Dobrzyński National Centre for Nuclear Research  
Świerk, Poland
  - Dr. Yair Y. Shaki }
  - Prof. Avi Caspi } Jerusalem College of Technology
  - Dr. Jerry Cuttler Independent, Canada
  - Prof. Ludwig Feinendegen Heinrich-Heine University, Düsseldorf
  - Prof. Kanokporn Rithidech Stony Brook Medical School
  - Dr. Bobby R. Scott Lovelace Respiratory Research Institute
  - Prof. James Welsh Loyola U. Chicago, Stritch School of Medicine
  - Mr. Yaakov Socol Hebrew University Medical School, Jerusalem

# In memoriam



Boris Dubrovin, mathematician 1950–2019

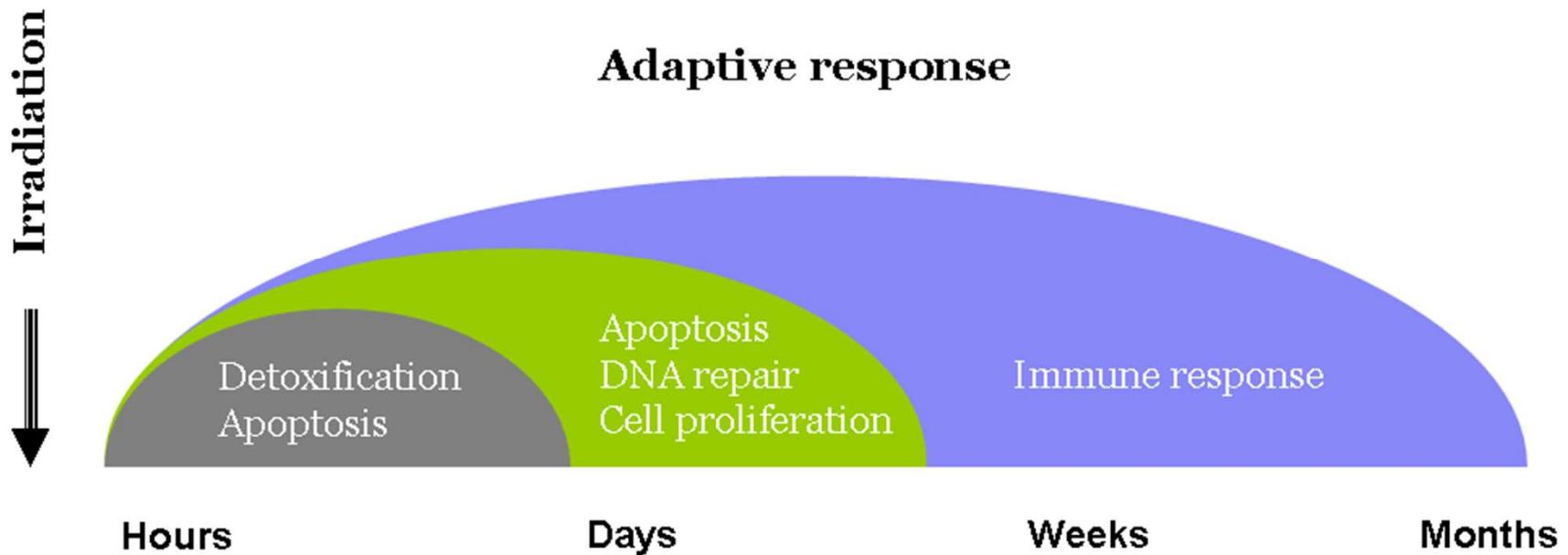
Moscow University  
International School for Advanced Studies (SISSA) Italy

Cause of death: ALS

# What we know

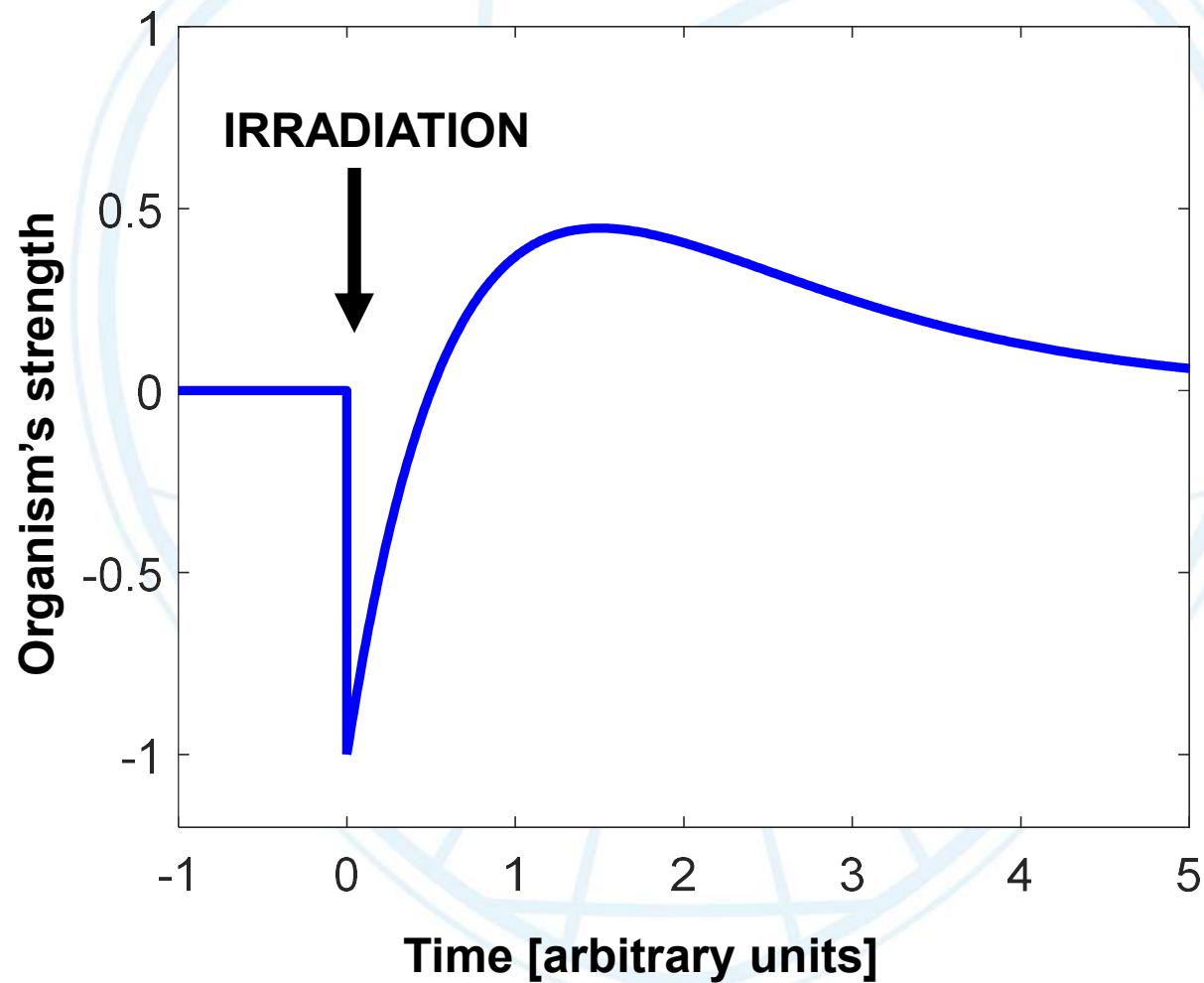
- High-dose radiation kills
- Low-dose: multiple adaptive response mechanisms
- Acute adverse health effects are fast (hours)
- Adaptive response (protection)
  - may switch on within hours or days
  - may last weeks and months

# Adaptive response

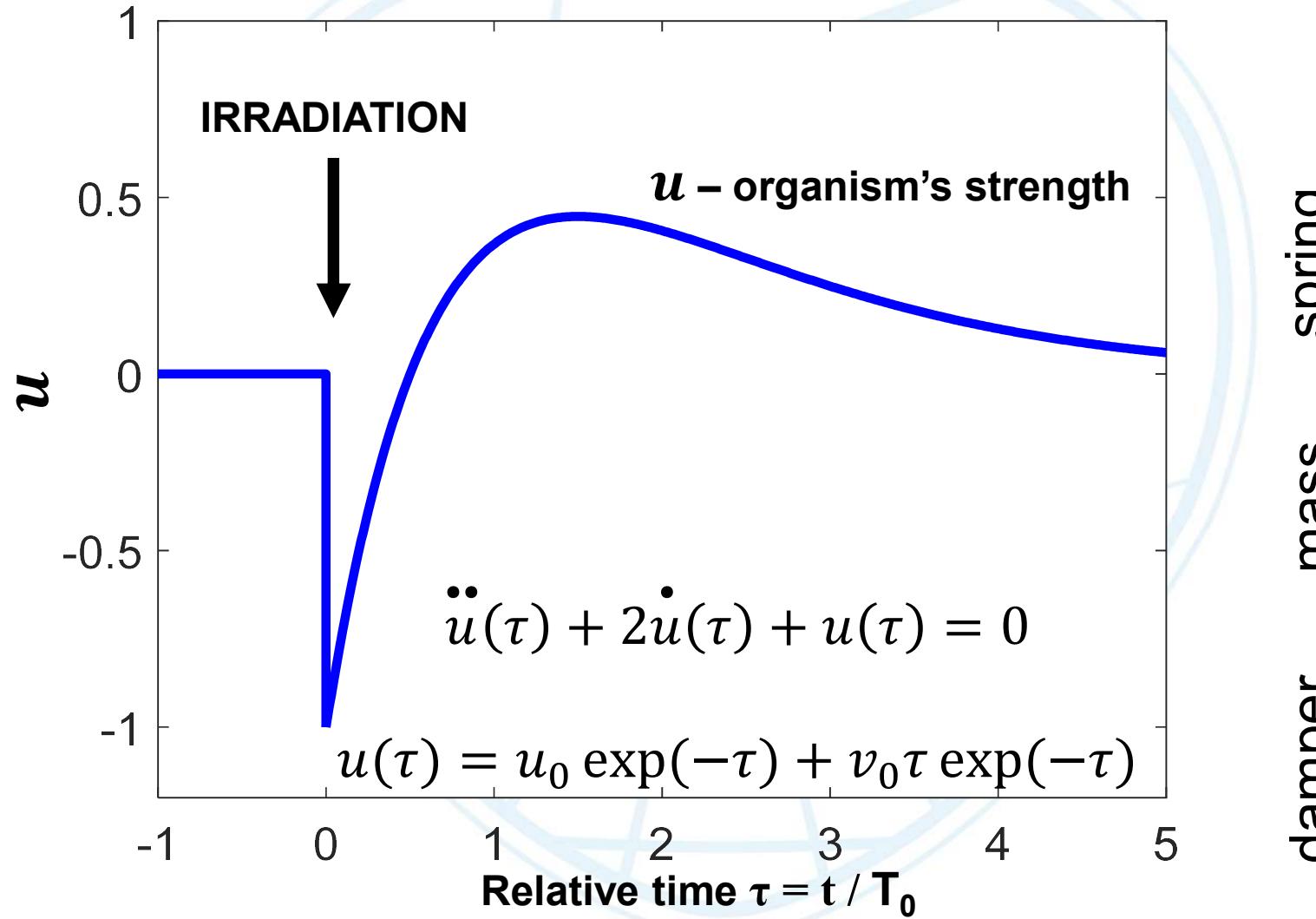


Adapted from:  
Feinendegen *et al.* (2007)  
*Exp. Hematol.* **35**, 37-46

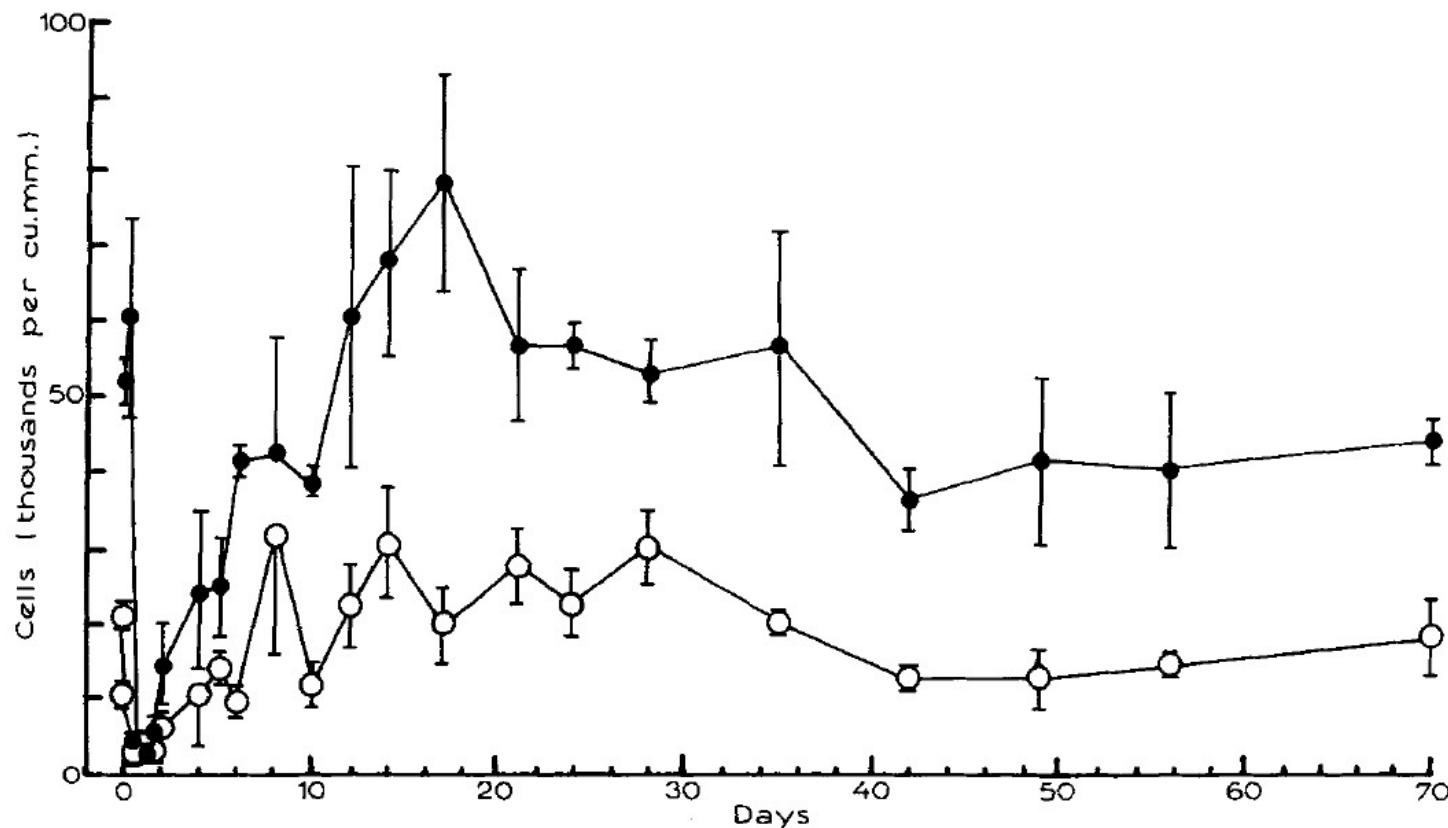
# Hypothesis:



# Hypothesis: critical damping



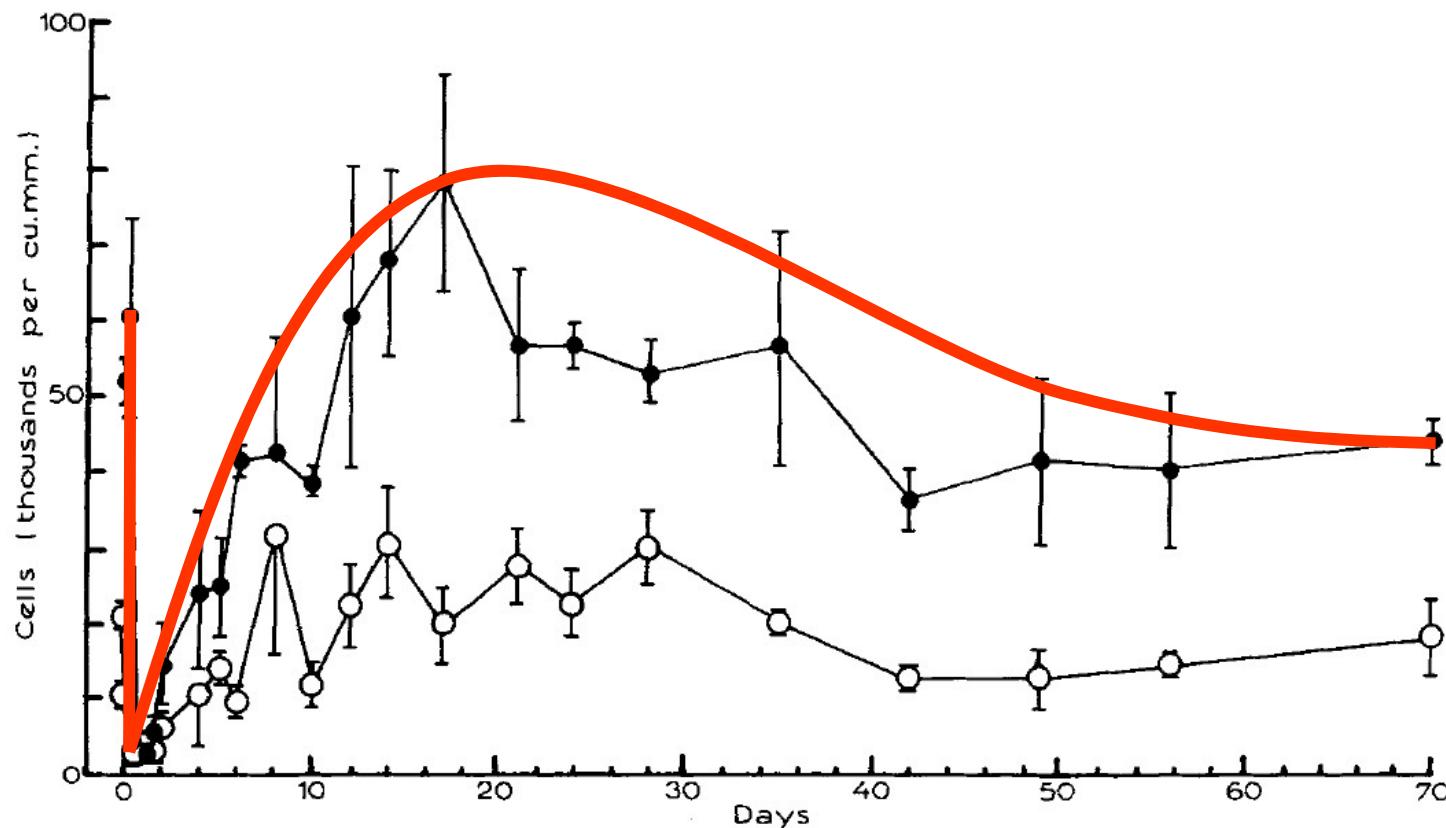
# Data: rats, 400 R



Numbers of early normoblasts (●) and pronormoblasts (○), and their standard errors, in the marrow.

Hulse (1963) *Brit. J. Haemat.* **9**, 365-375

# Data: rats, 400 R

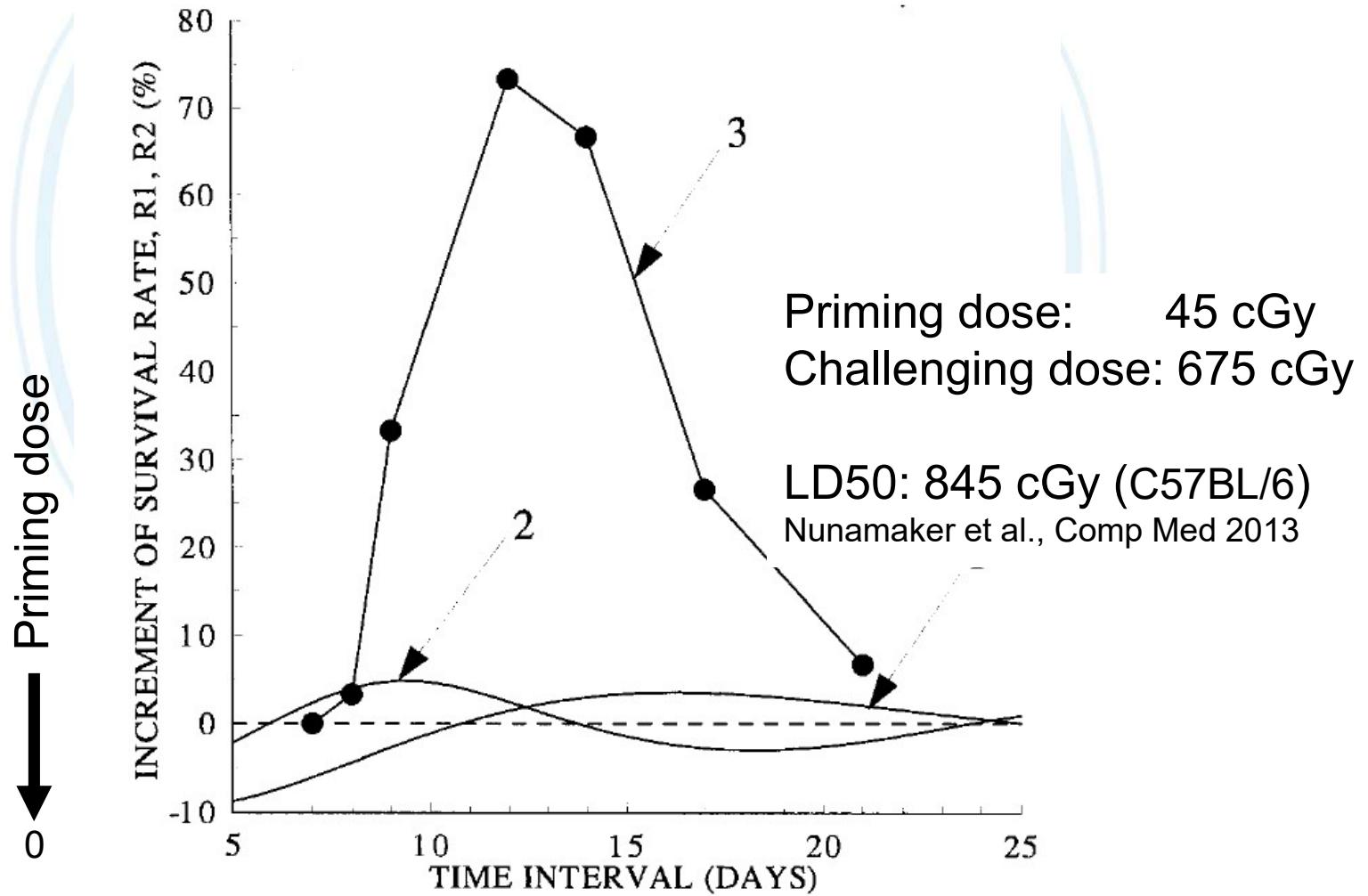


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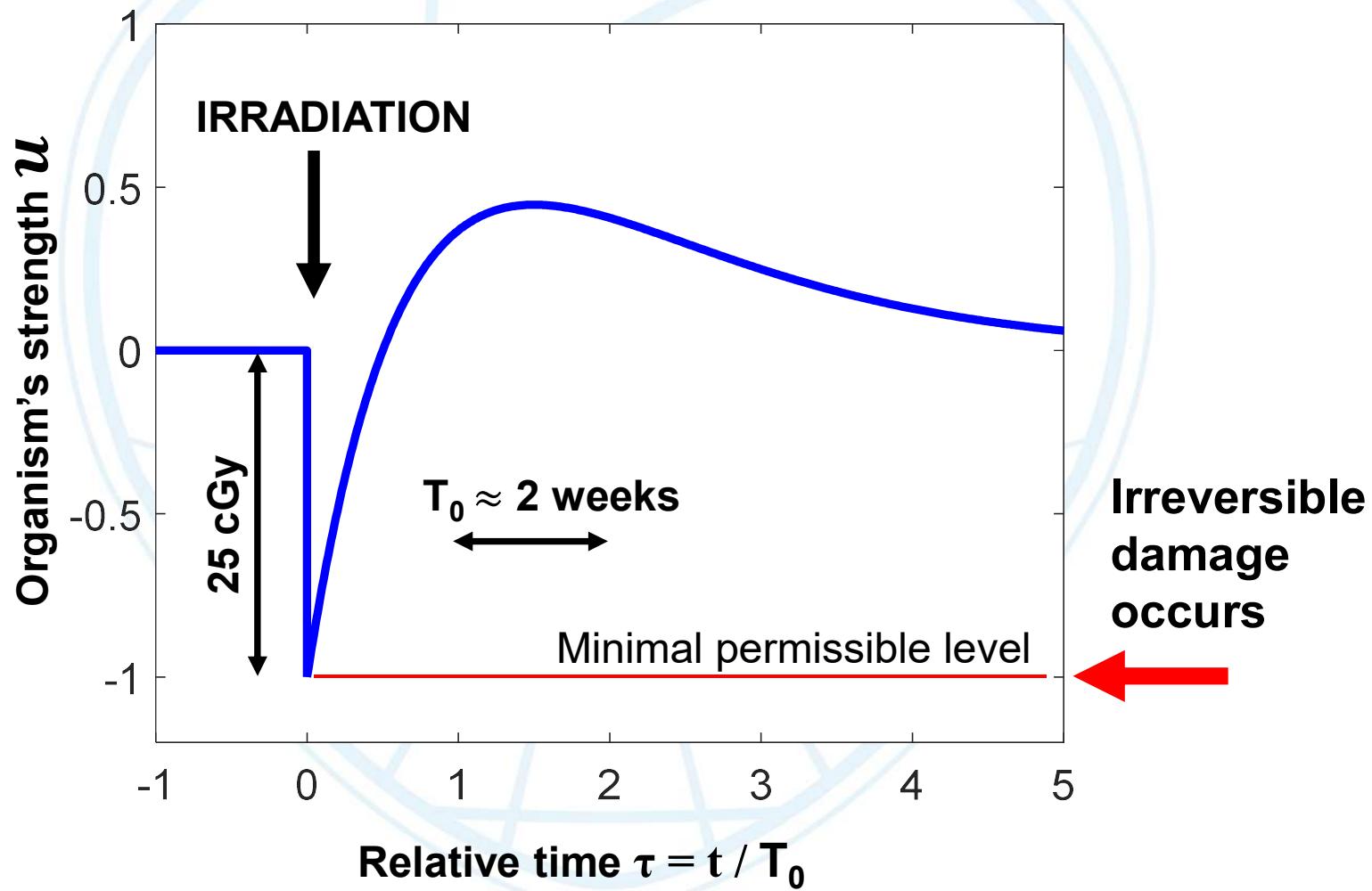
Hulse (1963) *Brit. J. Haemat.* **9**, 365-375

# Data: mice survival after pre-irradiation

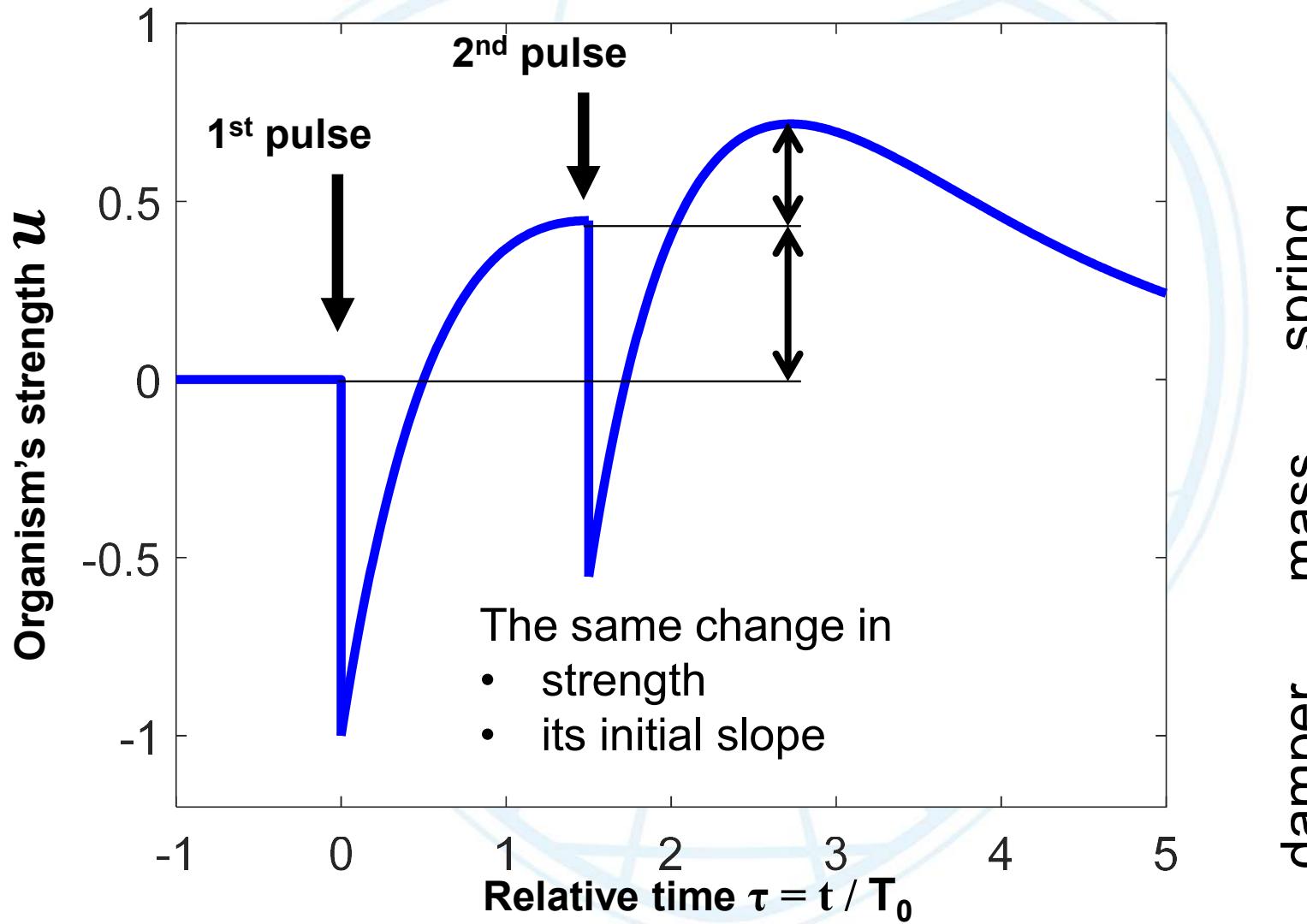
Smirnova OA, Yonezawa M  
Health Phys (2003) 85(2):150-158



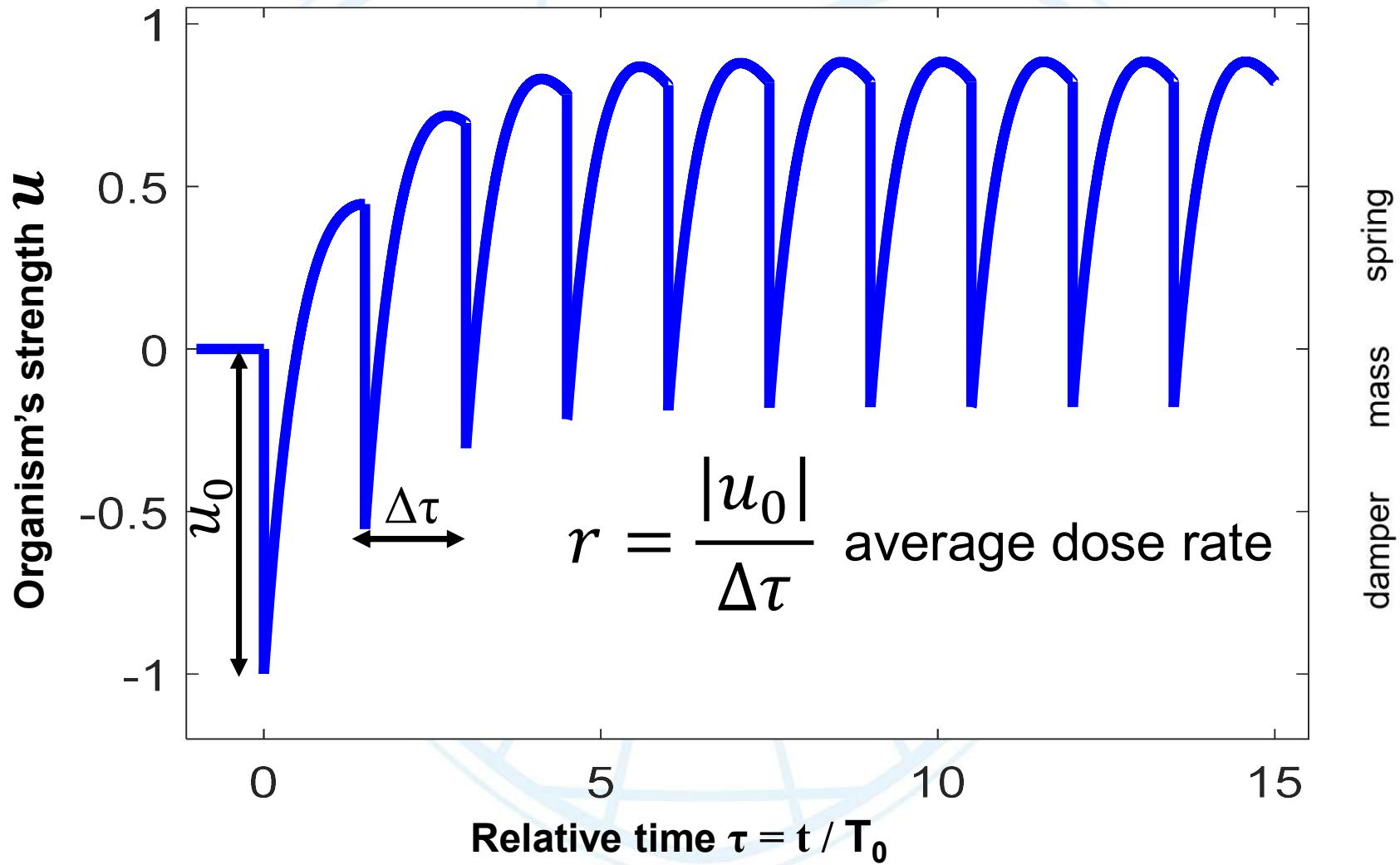
# Hypothesis:



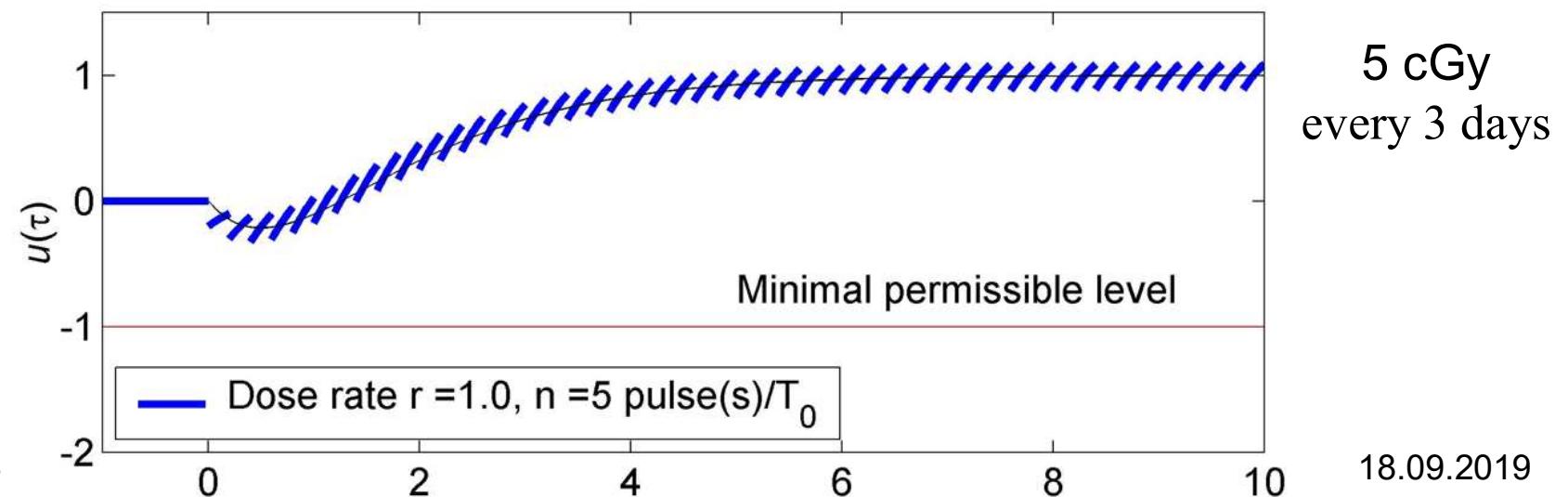
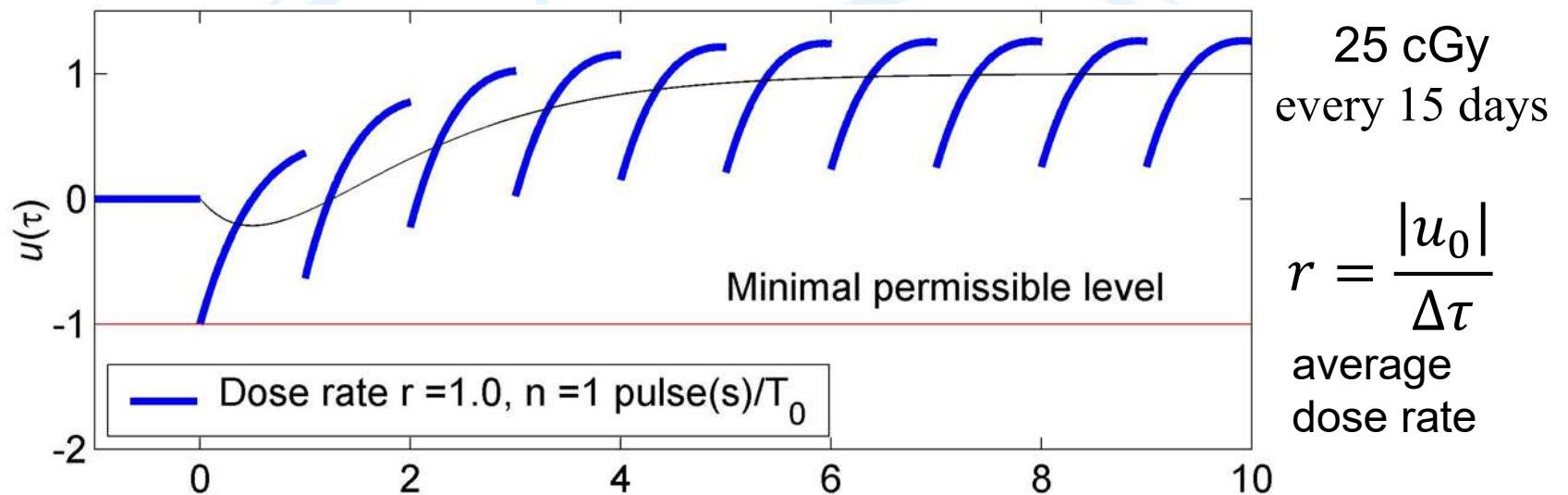
## Assumption #2: second pulse



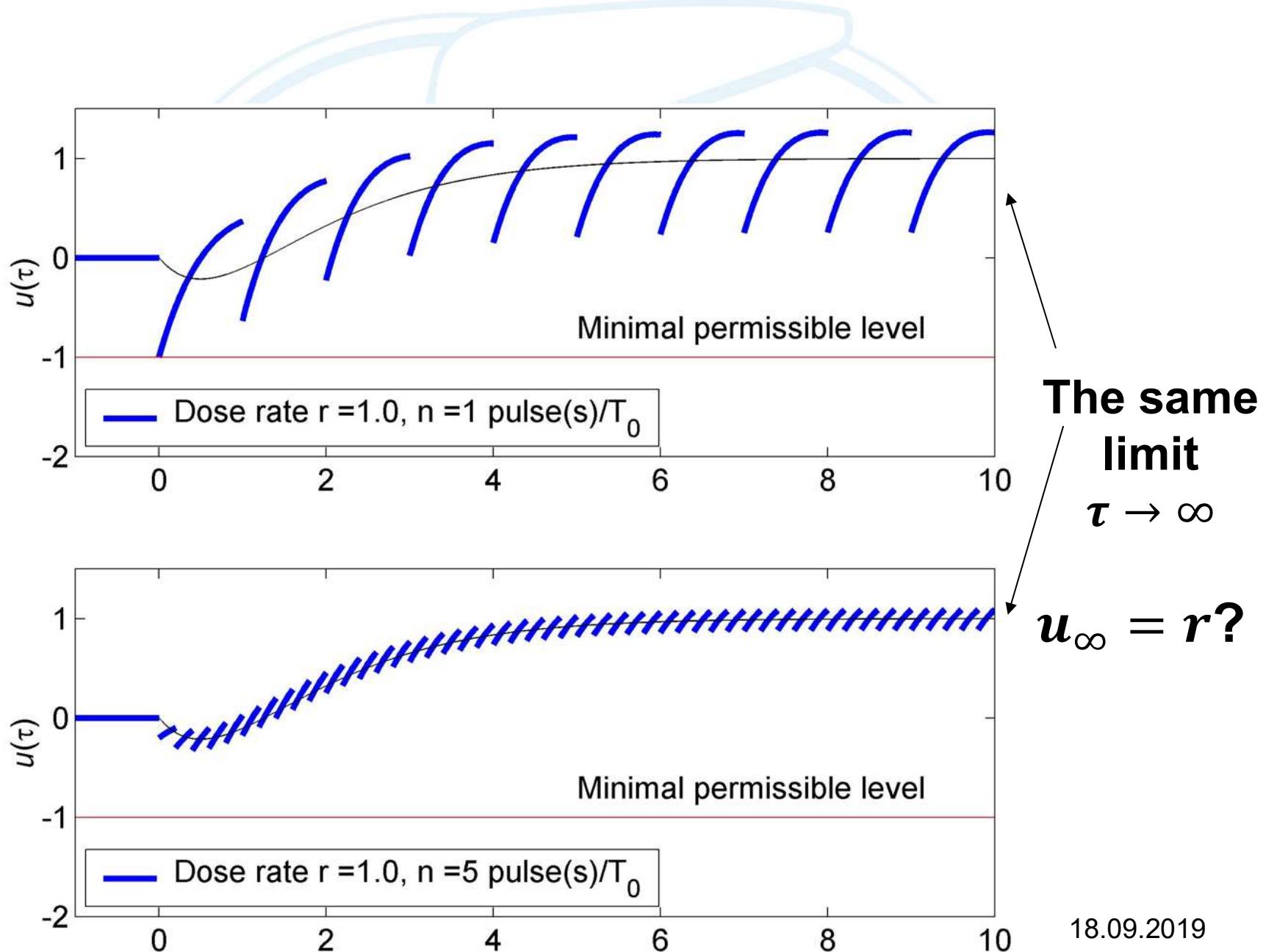
# Pulse train



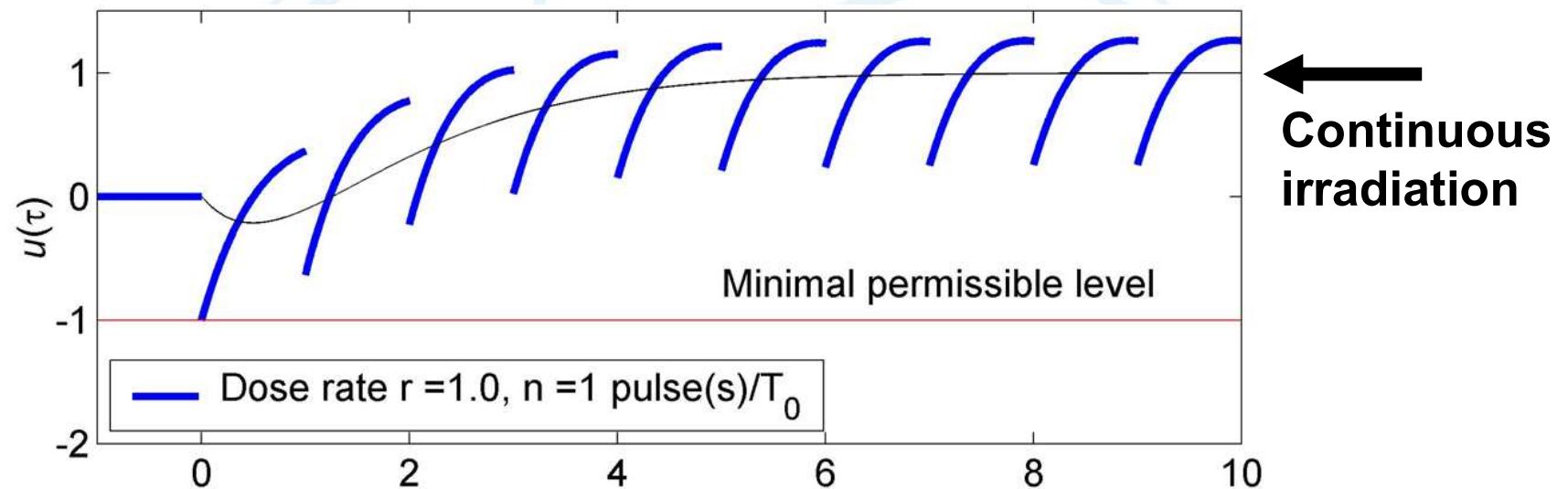
# Effect of dose fractionation hypothesized doses and times



# Effect of dose fractionation



# Continuous irradiation limit



Continuous irradiation:

$$\begin{cases} \dot{u}(\tau) = -r - u(\tau) + v(\tau) \\ \dot{v}(\tau) = \beta \times r - v(\tau) \end{cases}$$

Three parameters:

- Time scale  $T_0$
- Damage threshold
- Response  $\beta$

# Existing math model

$$\frac{dx_1}{dt} = Bx_1 - \gamma x_1 - \frac{N}{D_1}x_1, \quad (1)$$

$$\frac{dx_2}{dt} = \gamma x_1 - Fx_2 - \frac{N}{D_2}x_2, \quad (2)$$

$$\frac{dx_3}{dt} = Fx_2 - \psi x_3 - \frac{N}{D_3}x_3, \quad (3)$$

$$\frac{dx_4}{dt} = \psi x_3 - \kappa x_4 - \frac{N}{D_4}x_4, \quad (4)$$

$$\frac{dx_{di}}{dt} = \frac{N}{D_i} \frac{1}{1 + \rho_i} x_i - \nu_1 x_{di}, \quad (5)$$

$$\frac{dx_{hdi}}{dt} = \frac{N}{D_i} \frac{\rho_i}{1 + \rho_i} x_i - \nu_2 x_{hdi}, \quad i = 1, \dots, n, \quad (6)$$

$$\frac{dI}{dt} = G \sum_{i=1}^m [\theta_i(x_i + \Phi x_{di} + \Gamma x_{hdi})] - HI. \quad (7)$$

Smirnova OA, Yonezawa M

RADIOPROTECTION EFFECT OF LOW LEVEL  
PREIRRADIATION ON MAMMALS: MODELING AND  
EXPERIMENTAL INVESTIGATIONS

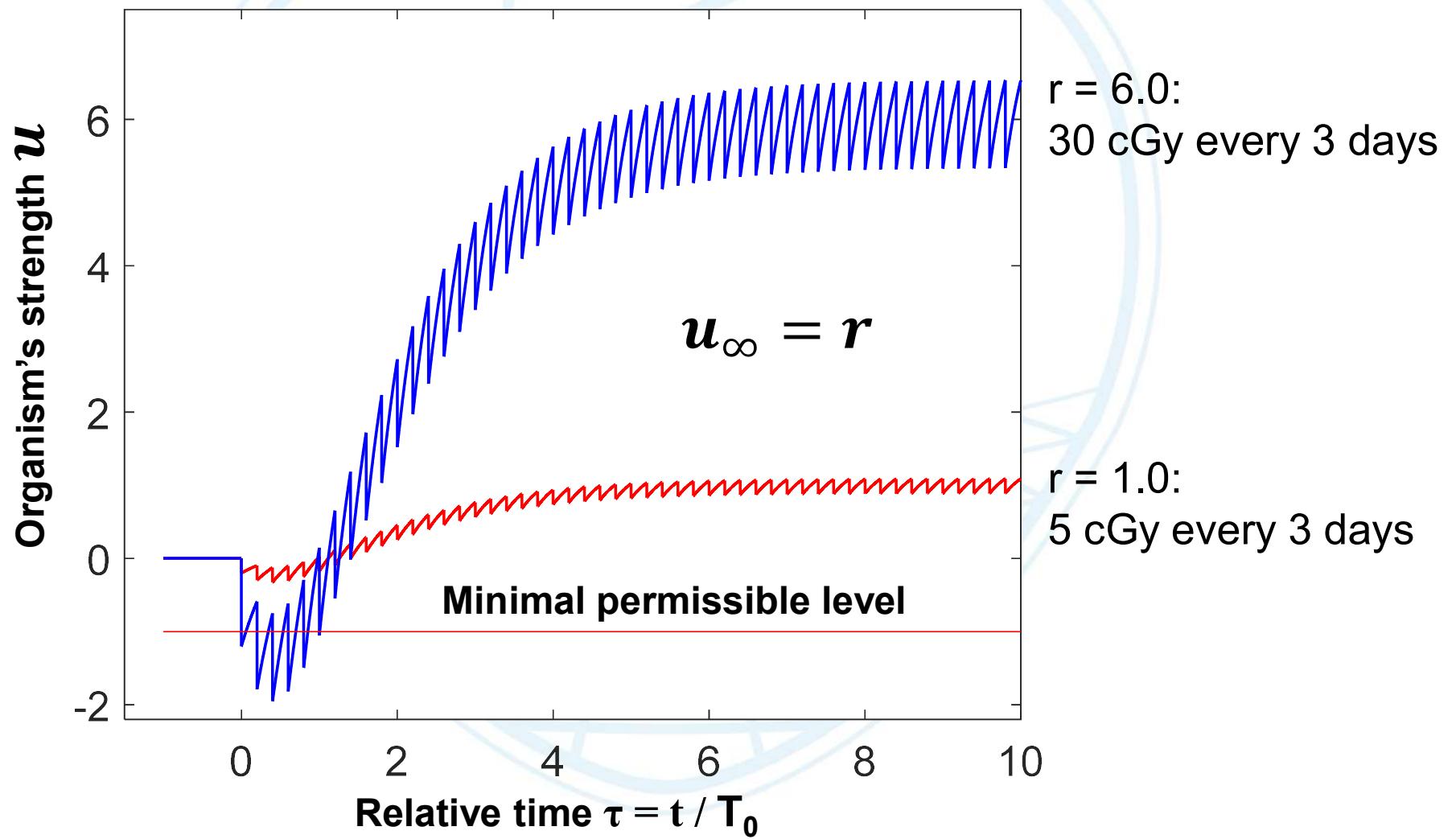
Health Phys. 85(2):150–158; 2003

(5)  
(6)

$\times 4$

13 differential equations  
about 50 parameters

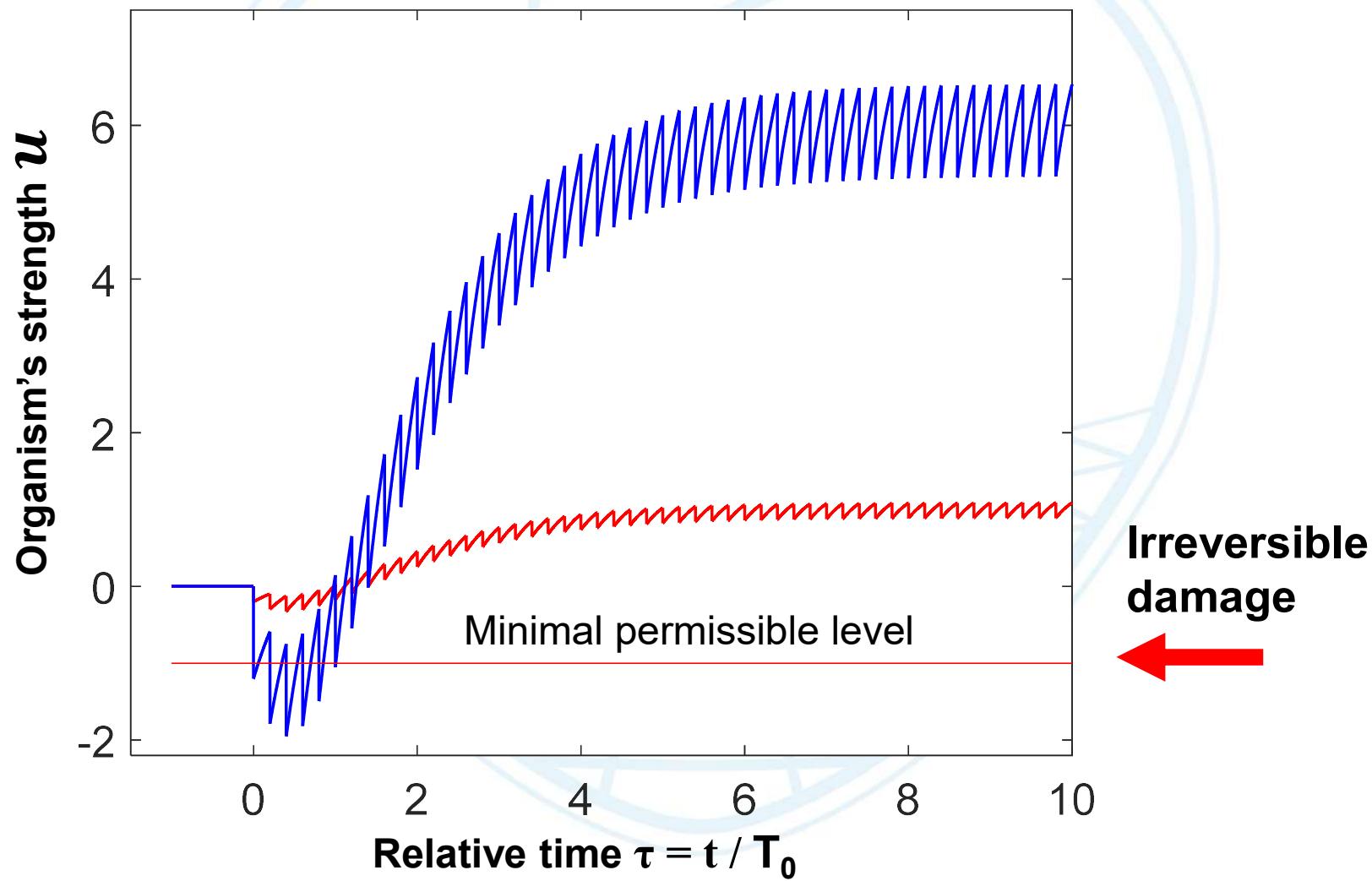
# Effect of dose rate hypothesized doses and times



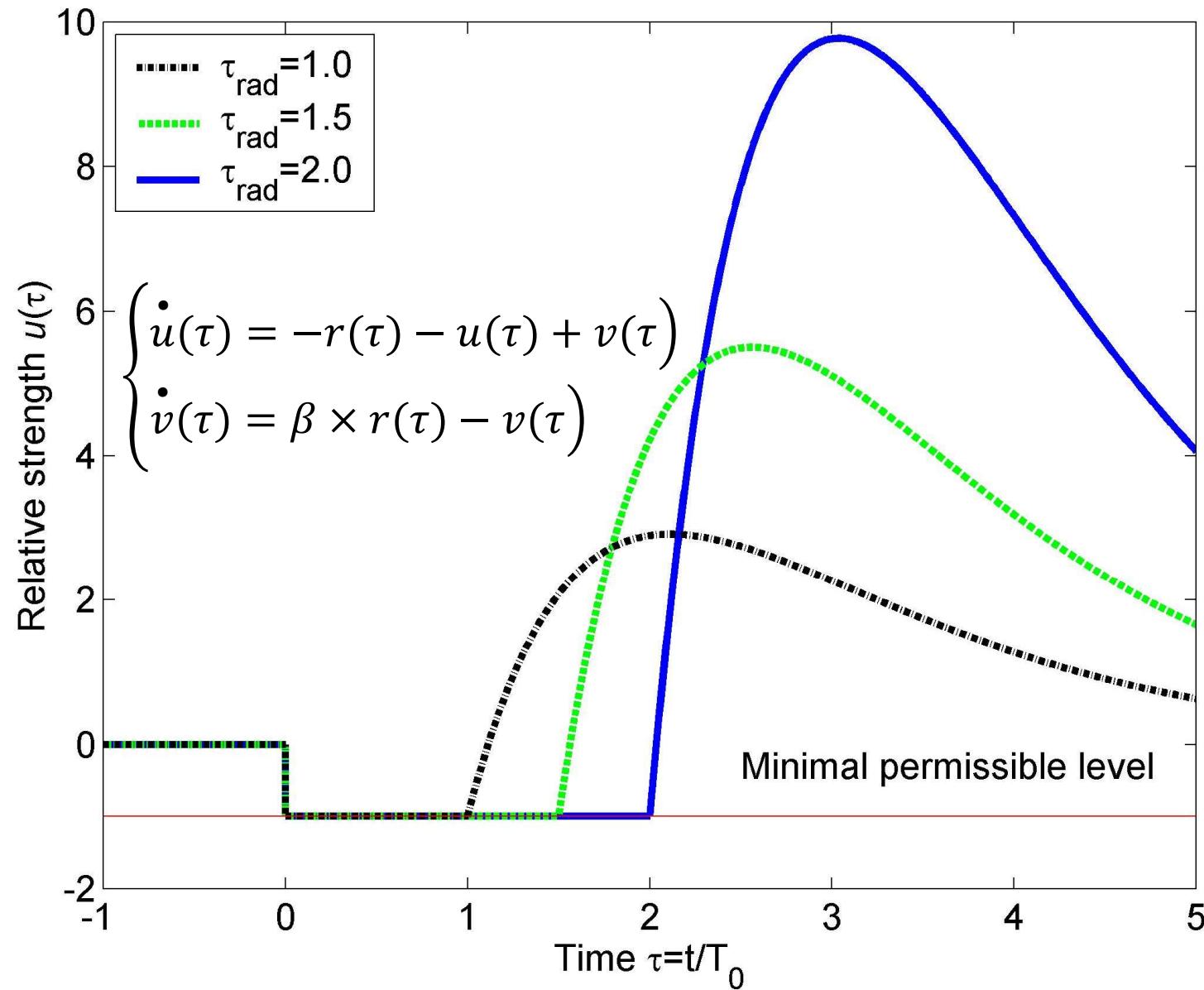
# Adaptive response and radiation therapy (RT)

- RT side effects are important
- Dose fractionation is commonly used to mitigate the side effects; however, no kind of training has been reported
- By whole-body irradiation we hope to increase radiation resistance of the body, but NOT of the tumor

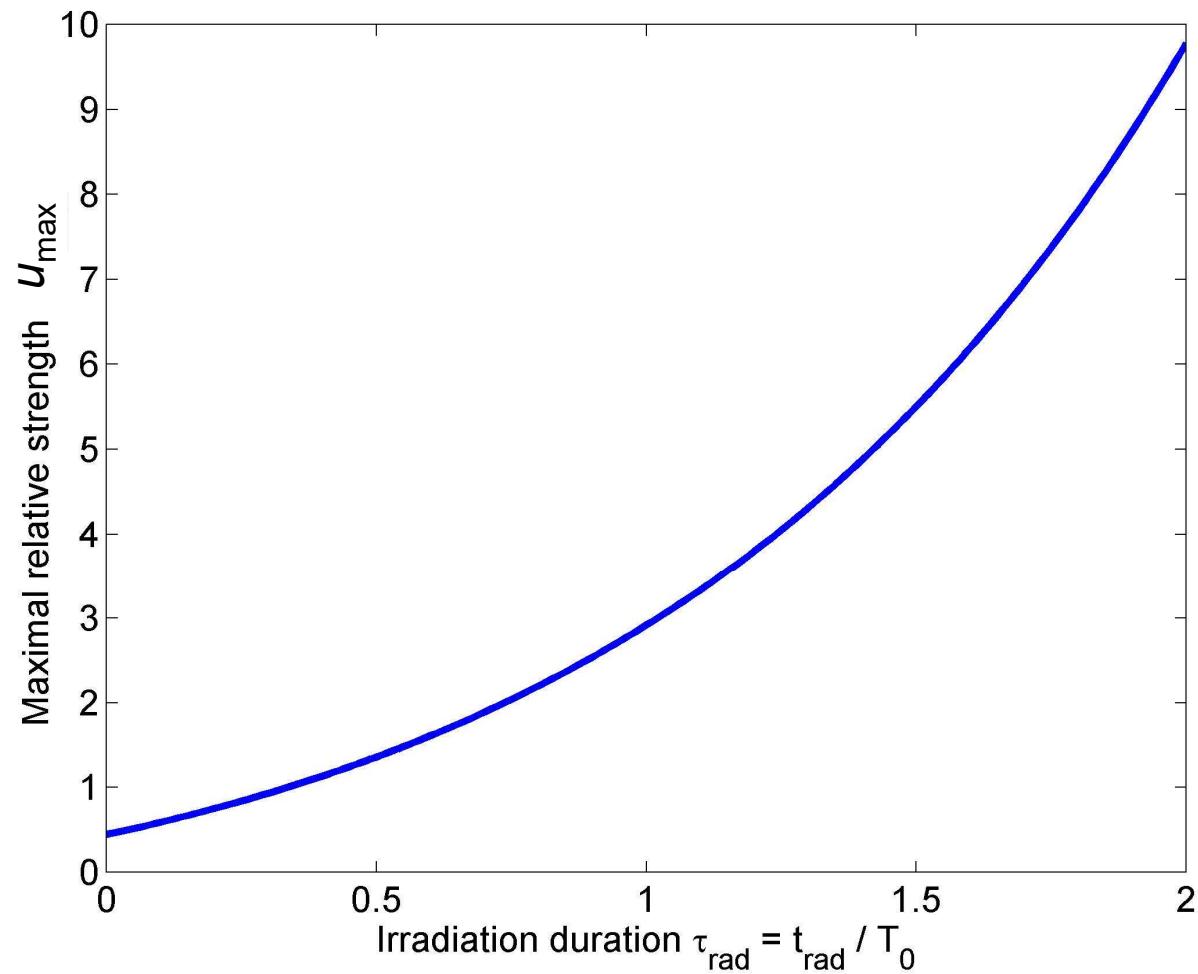
# How to achieve high value of $u$ without crossing the "red line" of irreversible damage?



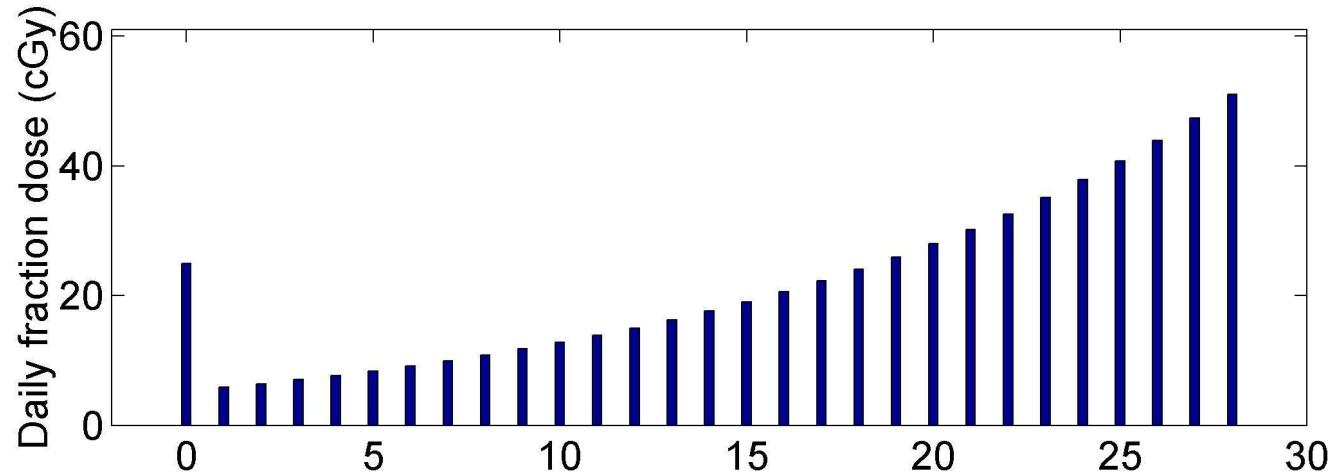
– to increase radiation rate  $r$  while  $u = -1$ !



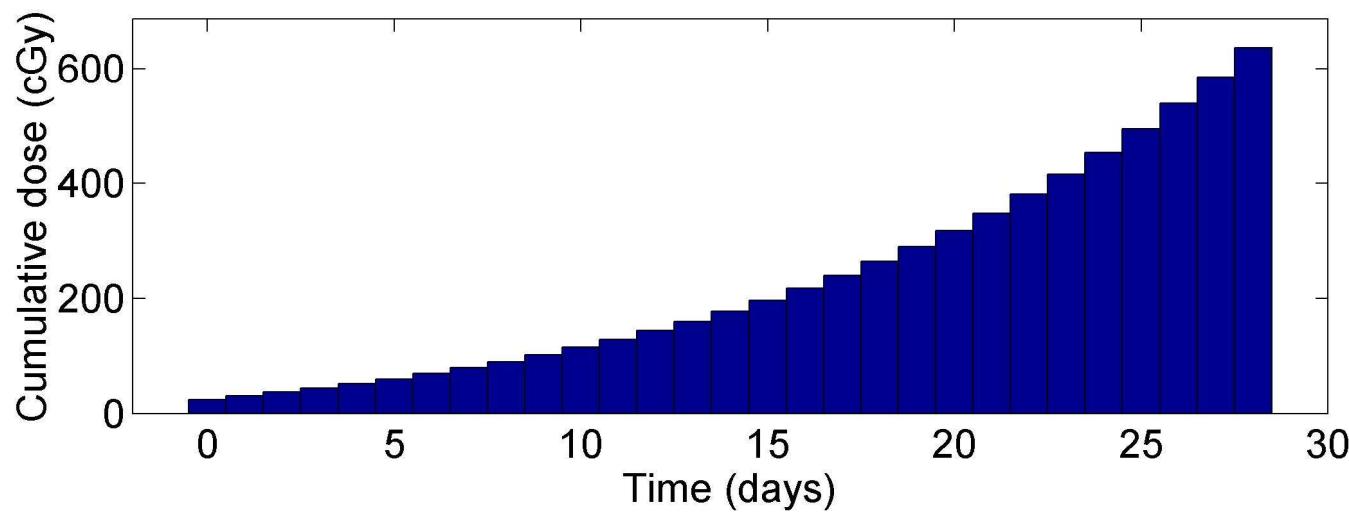
# $U_{\max}$ vs. irradiation duration $\tau_{\text{rad}}$



# Radiation training



Assumptions:  
 $T_0 = 2 \text{ weeks}$   
 $u = -1: 25 \text{ cGy}$



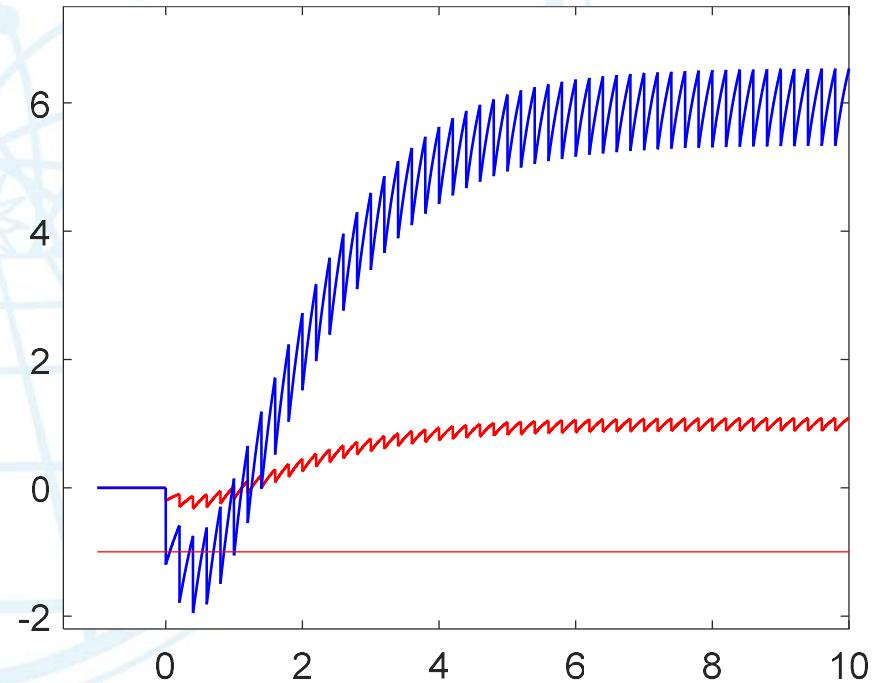
# Problems with the model

- No limit for maximal achievable effect
- Too high value of tolerance dose rate

$$r \approx 5$$

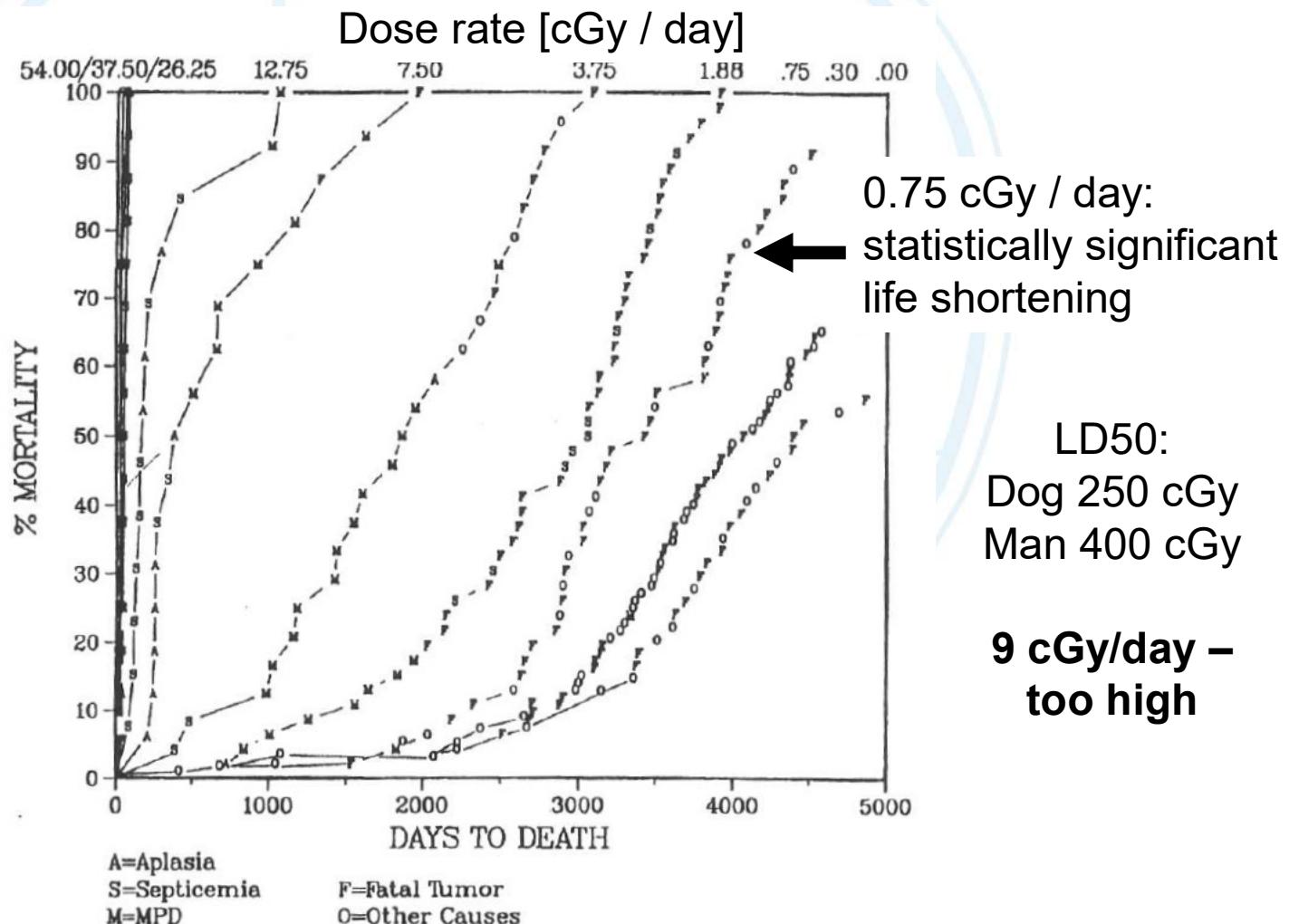
$$5 \times 25 = 125 \text{ cGy}$$

$$125 / 14 \approx 9 \text{ cGy/day}$$



# Tolerance dose-rate: dogs' mortality

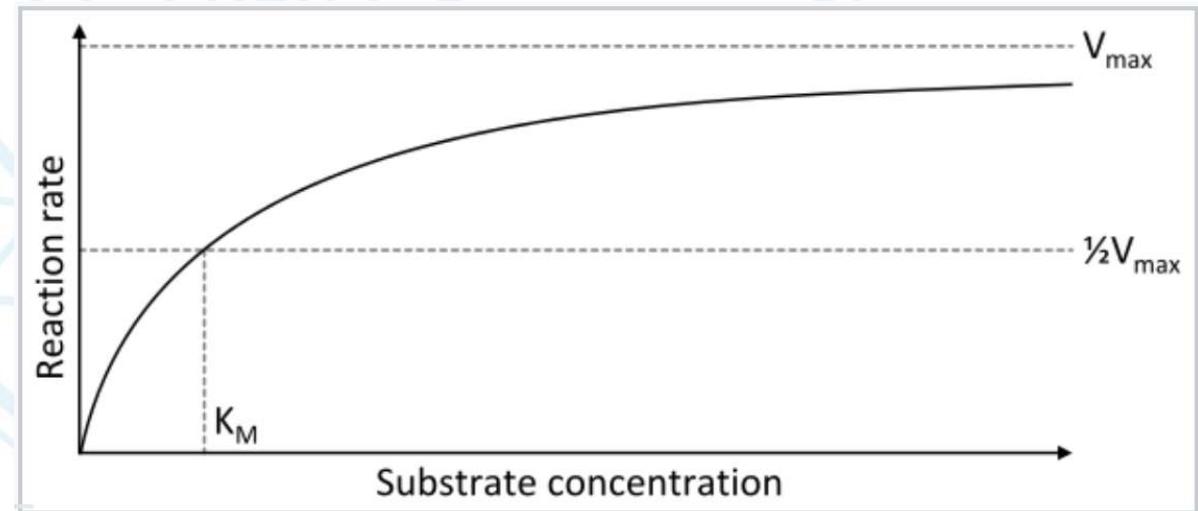
Fritz (2002)  
Brit J Radiol suppl



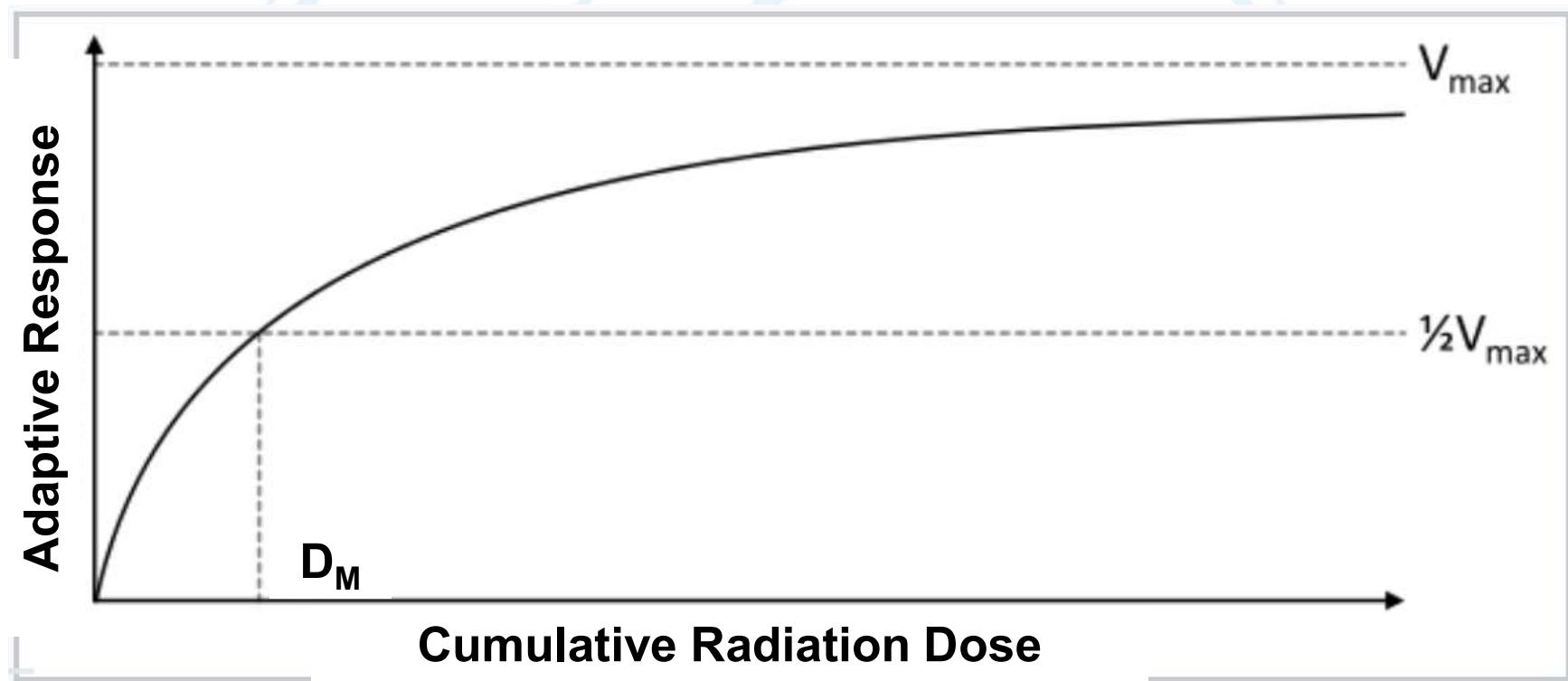
# Nonlinear response

- Monod equation: microbial growth
- Michaelis–Menten equation:  
enzyme kinetics

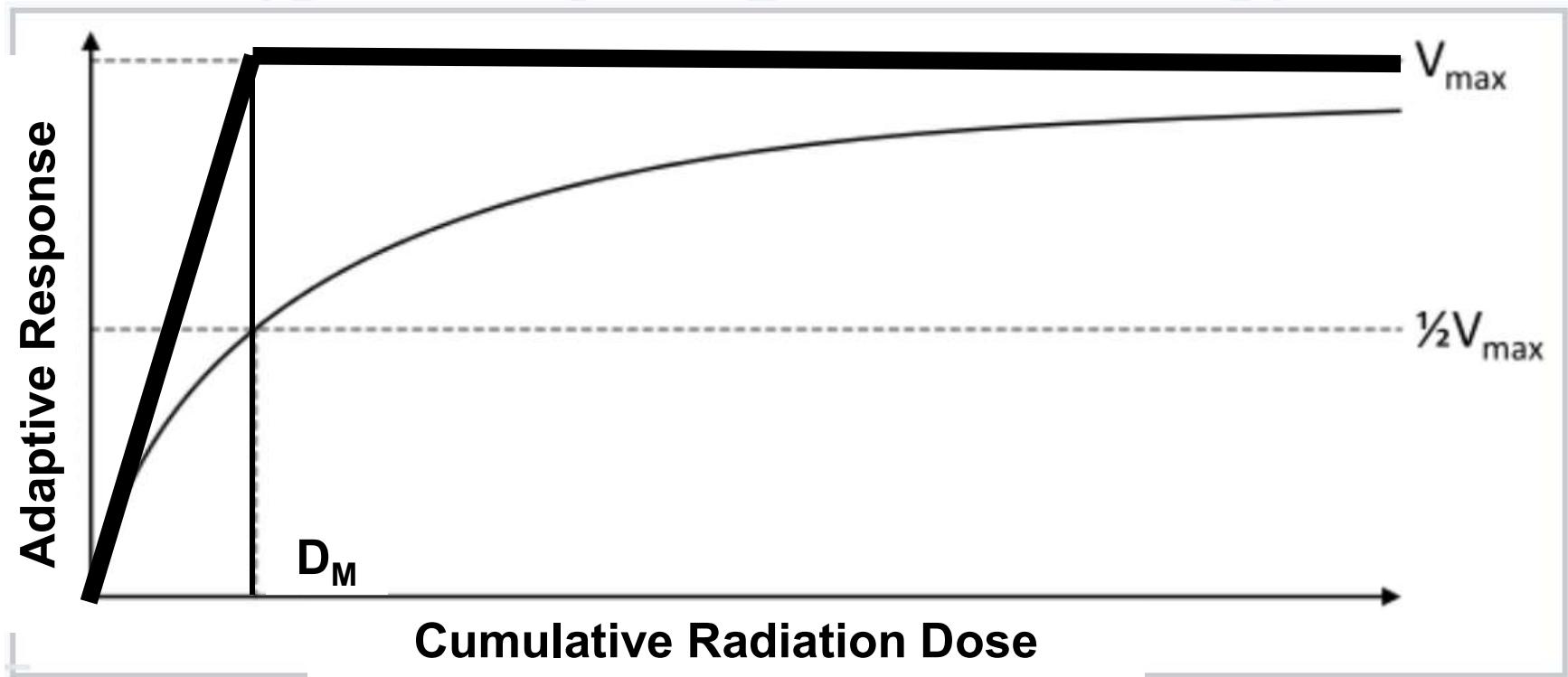
$$v = \frac{d[P]}{dt} = \frac{V_{\max}[S]}{K_M + [S]}$$



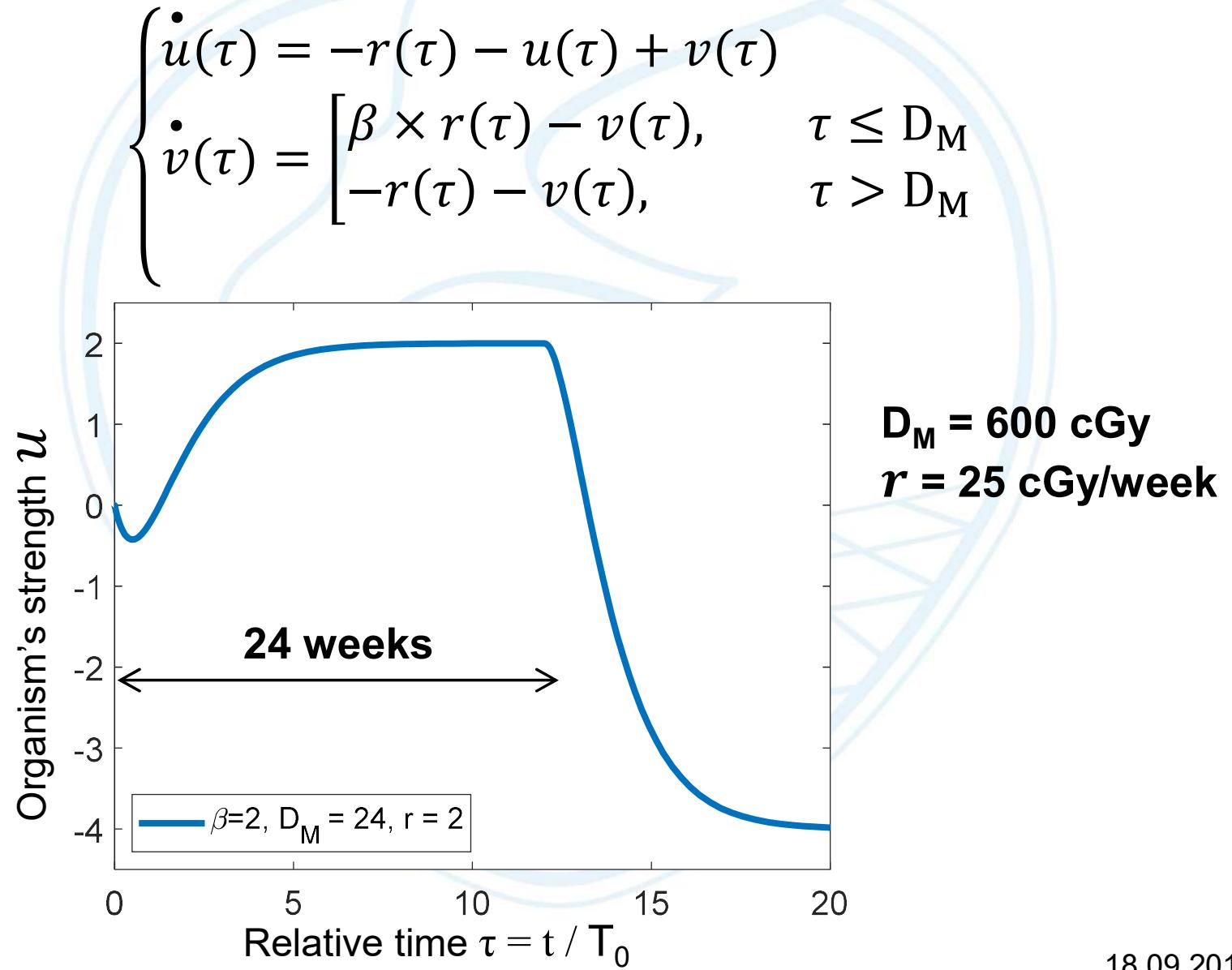
# Hypothesis:



# Approximation:



# Analytical result



# Pro and contra

- Pro
  - analytical tool, one parameter added ( $D_M$ )
  - logical result for radiation training efficiency limit
  - no change for results with total dose below  $D_M$
- Contra
  - crude biological model
  - crude math approximation
  - no explanation for tolerance dose rate

# Future directions

- Introduce smooth Monod-like response
- Add parameter to connect tolerance dose (acute) with tolerance dose rate
- Tune the model based on future data  
Experimentalists, please!!!

# Conclusions

- Rather simple math model for adaptive response developed
- Practical ideas for “radiation training” in radiation therapy
- Experimental data are urgently needed!

Thank you!