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Modelling the Cancer Growth Process by Stochastic Differential Equations with the Effect of Chondroitin Sulfate (CS) as Anticancer Therapeutics

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Abstract. A stochastic model is introduced to describe the growth of cancer affected by anti-cancer therapeutics of Chondroitin Sulfate (CS). The parameters values of the stochastic model are estimated via maximum likelihood function. The numerical method of Euler-Maruyama will be employed to solve the model numerically. The efficiency of the stochastic model is measured by comparing the simulated result with the experimental data.

1. Introduction

World Health Organization (WHO) reported that breast cancer is the most common women's malignancy with the majority of deaths occurring in the most part of the world [1]. In Malaysia, breast cancer was accounted for 32.1% of all cancers among women in 2007 [2, 3].

There are varieties of molecules with various pathway that contribute to the apoptosis mechanism in cancer cell. But, the final marker in apoptosis mechanism is caspase-3 [4]. Thus, the activation of caspase-3 pathway can be positioned as activators of the death cascade of apoptosis [6]. Apoptosis plays an important roles in the cancer treatment and it is the most important mechanism for cancer therapy. Hence, a better understanding of apoptosis process opens a new class of targeted therapeutics in cancer treatment.

Generally, some of the treatment methods are surgery, chemotherapy, radiation therapy and targeted therapy. Targeted therapy is a much sharper method and has proven to be highly successful in cancer treatment, with fewer side effects [5, 7]. Nowadays, reseachers are investigating for potent, safe and effective anticancer drugs to overcome resistance and reduce side effects. Currently, the role of Chondroitin Sulfate (CS) as a potent in anticancer activities and also as anticancer are among the reserachers interest [8].

During years, some researchers have worked on mathematical modelling of the effect of targeted therapy on cancer treatment. However, to the best of our knowledge, no theoretical studies on proposing a stochastic model of targeted cancer therapies. In biological pocesses of cancer treatment, there are existing in nature that the cancer cell under treatment are exposing



to random influences due to the interplay of therapy and resistance [9]. This findings lead to the development of a mathematical model that subject to the random effects.

2. Mathematical Model

This section devotes to the development of stochastic model of the apoptotic mechanism induced by CS. It starts with the understanding of apoptosis pathway as shown in Figure 1.

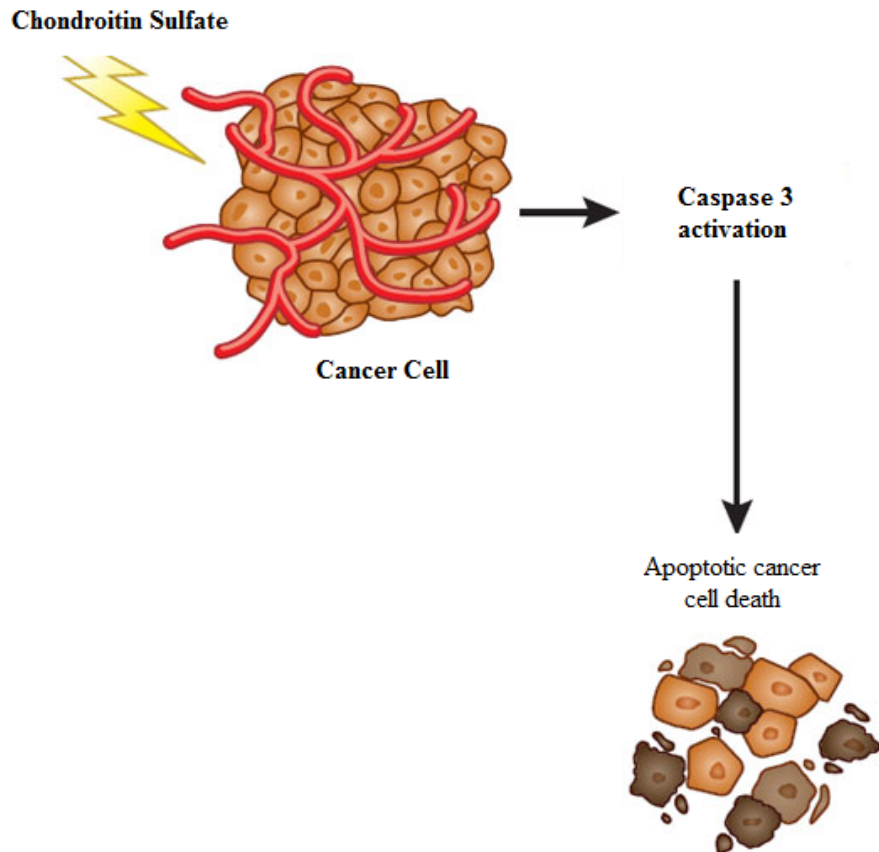
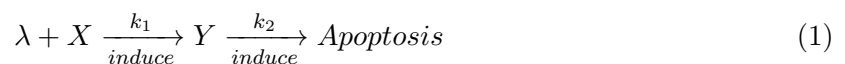


Figure 1. Apoptosis Pathway Induced by CS [10]

In Figure 1, CS binds to the cancer cells at a rate k_1 . Subsequently the CS-cancer cells bound will induced the activation of Caspase-3. The activated Caspase-3 will promotes cell death or specifically known as apoptosis mechanism at a rate k_2 . The mechanism of this pathway can be transformed into chemical reactions as



Reaction (1) can be transformed into ordinary differential equation (ODEs) as follows

$$dX = -k_1 \lambda X dt \quad (2)$$

$$dY = (k_1 \lambda X - k_2 Y) dt \quad (3)$$

ODEs (2) and (3) are transformed into SDEs by perturbing the parameters k_1 and k_2 in Equation (2) and (3), respectively such that

$$k_1 \rightarrow k_1 + \sigma \frac{dW}{dt} \quad (4)$$

$$k_2 \rightarrow k_2 + \sigma \frac{dW}{dt}. \quad (5)$$

These yields

$$dX = -k_1 \lambda X dt + \sigma_1 X dW(t) \quad (6)$$

$$dY = (k_1 \lambda X - k_2 Y) dt + \sigma_2 Y dW(t) \quad (7)$$

where X is the cancer cell, Y is the activation of caspase-3. Here, $\sigma > 0$ is the diffusion coefficient and the process dW for $t \geq 0$ is a Gaussian white noise process with mean zero and variance, Δt .

3. Numerical Method and Parameter Estimation

The numerical solution of stochastic models are simulated via a Euler-Maruyama method with 0.5 order of convergence. This method can be represented by following formula

$$X_{n+1} = X_n + (-k_1 \lambda X_n) \Delta t + (\sigma_1 X_n) \Delta W_n \quad (8)$$

$$Y_{n+1} = Y_n + (k_1 \lambda X_n - k_2 Y_n) \Delta t + (\sigma_2 Y_n) \Delta W_n \quad (9)$$

where $\Delta t = t_{n+1} - t_n$ and $\Delta W_n = W(t_{n+1}) - W(t_n)$.

The increment of the Wiener process, ΔW_n is normal distributed with mean zero and variance, Δt .

3.1. Maximum Likelihood Estimator

A non-parametric simulated maximum likelihood approach is applied to estimate the unknown parameters of stochastic model. The transition density of y_i starting from y_{i-1} and evolving to y_i is $p(t_i, y_i | t_{i-1}, y_{i-1}, \theta)$, where θ is the parameters to be estimated. The maximum likelihood estimator for θ is obtained by maximizing the likelihood function of

$$L(\theta) = \prod_{i=1}^N p(t_i, y_i | t_{i-1}, y_{i-1}; \theta) \quad (10)$$

The Monte Carlo simulation is used to derive $L(\theta)$ which is proposed by [14]. The algorithm is presented below.

- (i) Divide the time interval $[t_{i-1}, t_i]$ into N subintervals with a step size of $h = \frac{(t_{i-1} - t_i)}{N}$. The stochastic model is integrated on this discretization by using Euler-Maruyama method. This integration is repeated R times for $R = 100$ to generate R approximations of the cancer treated X at t_i starting with y_{i-1} at t_{i-1} . The approximate values of cancer treated is denoted as $X_{t_i}^1 \dots X_{t_i}^R$, where $X_{t_i}^r$ is the integrated value of stochastic model in the r^{th} -simulation for $r = 1, \dots, R$.
- (ii) Then, a non-parametric kernel density is constructed from the simulated values of $X_{t_i}^1 \dots X_{t_i}^R$ are used to construct a non-parametric kernel density estimate of the transition density (10)

$$p^R(t_i, y_i | t_{i-1}, y_{i-1}; \theta) = \frac{1}{R h_i} \sum_{r=1}^R K\left(\frac{y_i - A_{t_i}^r}{h_i}\right) \quad (11)$$

where h_i is the kernel bandwidth at time t_i and $K(\cdot)$ is a suitable symmetric, non-negative kernel function enclosing unit mass.

(iii) The previous procedure is repeated for each y_i and the $p^R(t_i, y_i | t_{i-1}, y_{i-1}; \theta)$ thus obtained used to construct $L^R(\theta) = \prod_{i=1}^N p^R(t_i, y_i | t_{i-1}, y_{i-1}; \theta)$.

(iv) $L^R(\theta)$ is maximized to obtain the approximated MLE θ^R of θ .

Hurn et al. [14] is proposed a suitable choice of $K(\cdot)$ which is given by the normal kernel

$$K(u) = \frac{1}{\sqrt{2\pi}} \exp\left(-\frac{u^2}{2}\right) \quad (12)$$

with bandwidth given by

$$h_i = \frac{4}{3} s_i R^{-\frac{1}{5}}, \quad i = 1, \dots, N \quad (13)$$

4. Material and Methods

4.1. Cell Line

Human breast cancer (MCF7) was kindly provided by Dr. Solachuddin Jauhari Arief Ichwan From Kuliyyah of Dentistry, International Islamic University Malaysia (IIUM) Kuantan, Pahang. The cell was cultured in DMEM (Gibco, California, USA) medium and maintained in a humidified incubator with 5% CO_2 and 95% air at 37°C.

4.2. Preparation of CS Solution

Blue-spotted stingray were used for extraction of CS. For extraction process, the powder form of CS crudes were used for the experiment. CS crude products were courtesy from Dr Nina Suhaity from University Malaysia Pahang.

4.3. Anti-Proliferation Assay

Cellular proliferation was determined by the ability of cells to convert soluble MTT (Sigma Aldrich, St. Louis, Missouri, USA) to an insoluble coloured formazan precipitate. Exponentially growing cells were plated onto 96-well plates following 24 hours at an initial density of 2×10^4 /well, treated with defined concentrations of CS (12.5, 25, 50 and 100 μg). Plates were centrifuged at 1000 rpm to collect floating cells using a microplate swing rotor centrifuge. Then carefully remove the media from the wells without disturbing the cell pellet. The cells were incubated in 30 μl MTT (Sigma-Aldrich, USA) at concentration of 5 mg/ml in phosphate buffer saline (PBS) for 2 hrs. The intercellular formazan complex was dissolved in DMSO. The absorbance was measured at 570 nm by a microplate reader.

5. Result and Discussion

In this section, the simulated results is presented to understand the effects of therapies on growth rate of cancer cell.

5.1. Analysis of Stochastic Model

For this purpose, the likelihood function $L^R(\theta)$ for $R = 100$ are maximized to generate the estimated values of $\theta = \{k_1, k_2, \sigma_1, \sigma_2\}$. The construction of $L^R(\theta)$ requires the generating of Wiener increments $\Delta W(t) = W(t_n) - W(t_{n-1})$. The increments are simulated by using Box-Muller method and those values are kept fixed for a given optimization procedure. The experimental data is generated at equally spaced intervals of time $h_n = t_n - t_{n-1} = \frac{T}{N}$. Numerical method is performed to simulate the trajectories in the interval time $[t_0, T]$ with initial condition of cell absorbance, $X(t_0) = 0.3123$. Numerical optimization algorithm was implemented using Matlab program and the estimated parameter values of $\theta = \{k_1, k_2, \sigma_1, \sigma_2\}$ for $R = 100$ are listed in Table 5.1.

Table 1. Maximum Likelihood Estimates of Stochastic Model Parameter

Mathematical Model	k_1	k_2	σ_1	σ_2
Stochastic Model	-0.54	0.41	0.05	0.04

Figure 2 shows the simulated results of stochastic models (6) and(7) with experimental data. Based on Figure 2, the numerical result obtained via stochastic model is consistent with the experimental data.

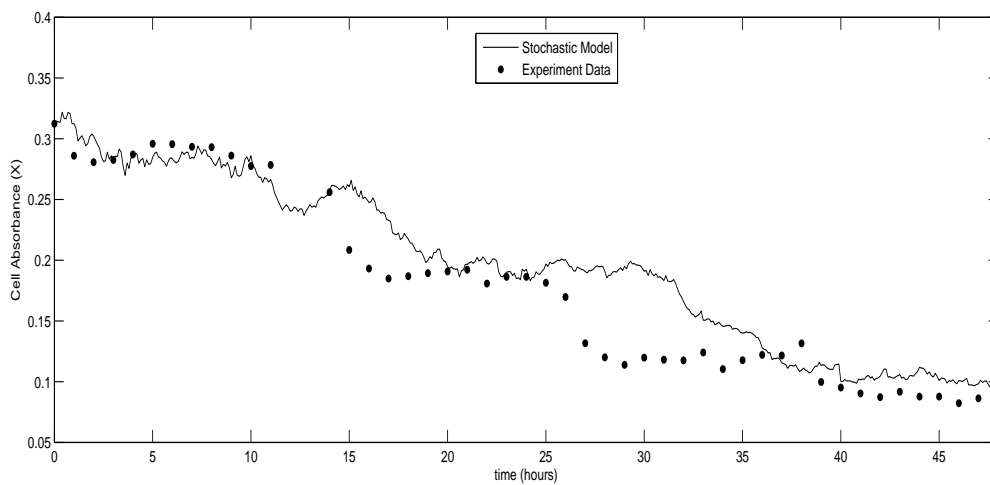
**Figure 2.** Simulation Results of Stochastic Model with the Experimental Data of Cancerous Growth with Treatment

Figure 3 illustrates the result of Equation (7) over 100 trajectories. To confirm whether apoptotic in these cells were mediated by caspase-3, the upregulated transcript levels of these caspase in MCF-7 were simulated. It is shown that CS effects on caspase-3 activation are at the transcriptional level.

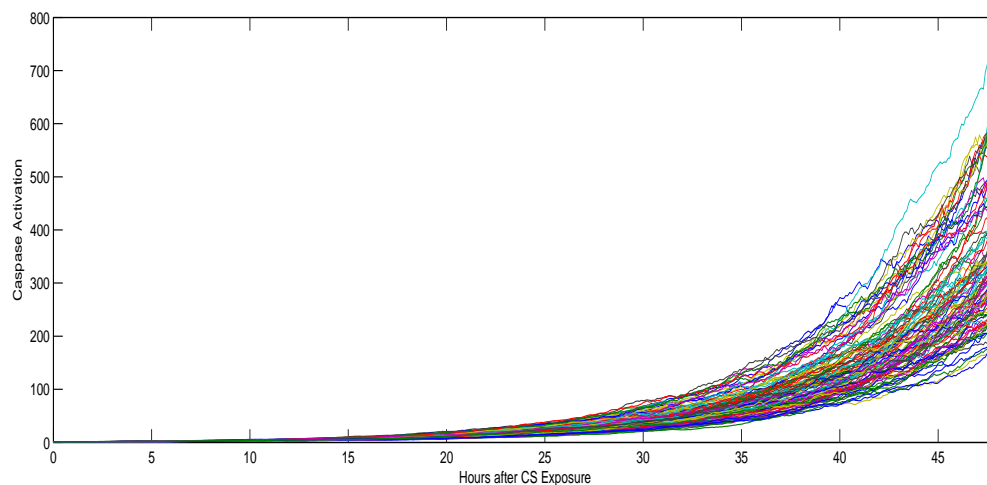


Figure 3. Caspase-3 activity assay

6. Conclusion

It is clear that for reducing cancerous growth, drug targeted therapy should be started as soon as the cancer cell is detected and should be scheduled frequently. This finding provides useful knowledge on the understanding of the interaction of CS with the cancer cell.

Acknowledgments

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