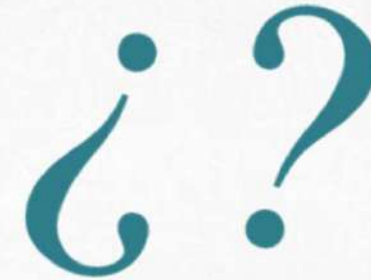


Nanotechnology-based Drug Delivery
Systems (nanotDDS) against Cancer
Stem Cells (CSC)

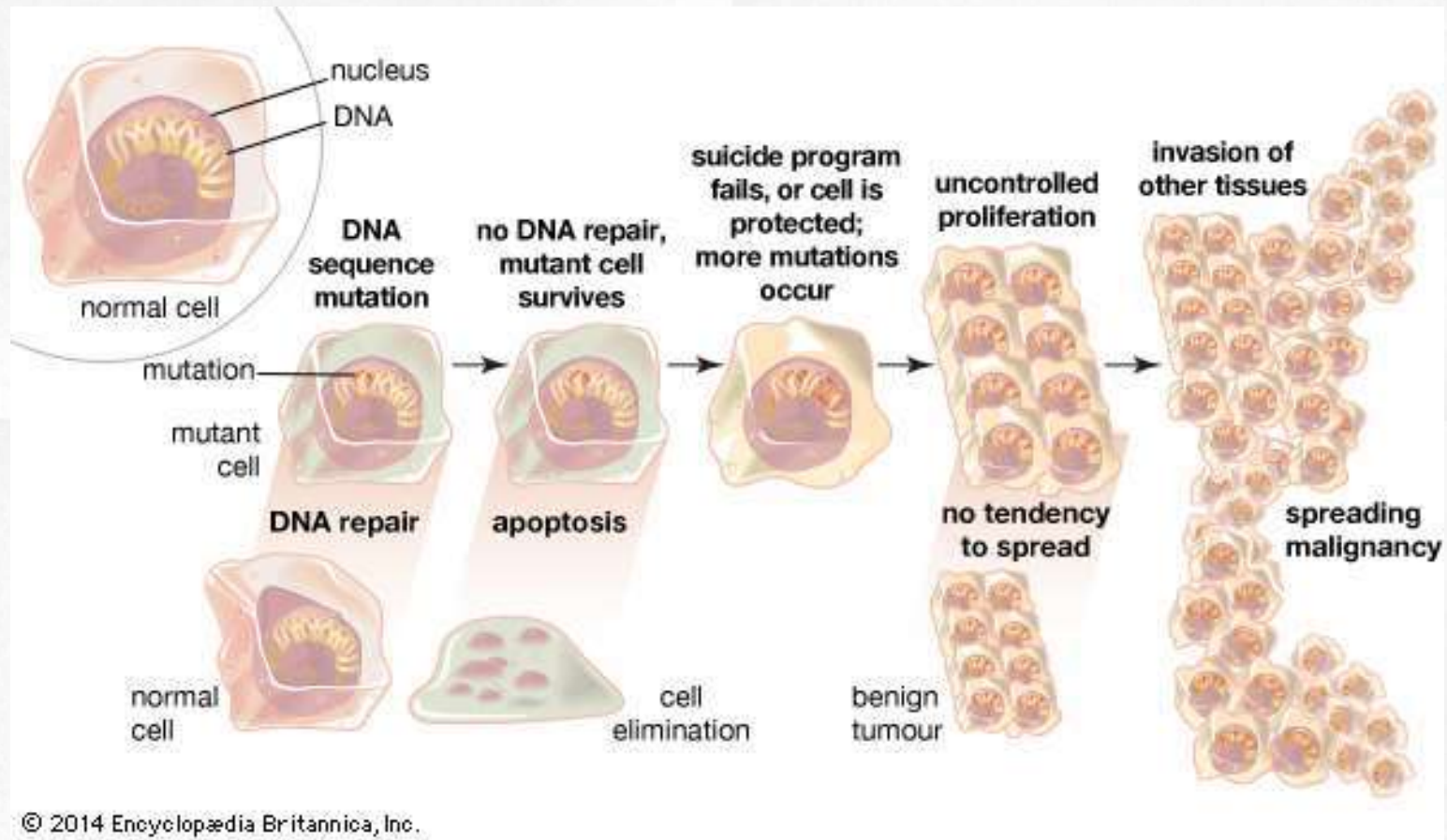
Fernanda da Silva Andrade

WHY CANCER

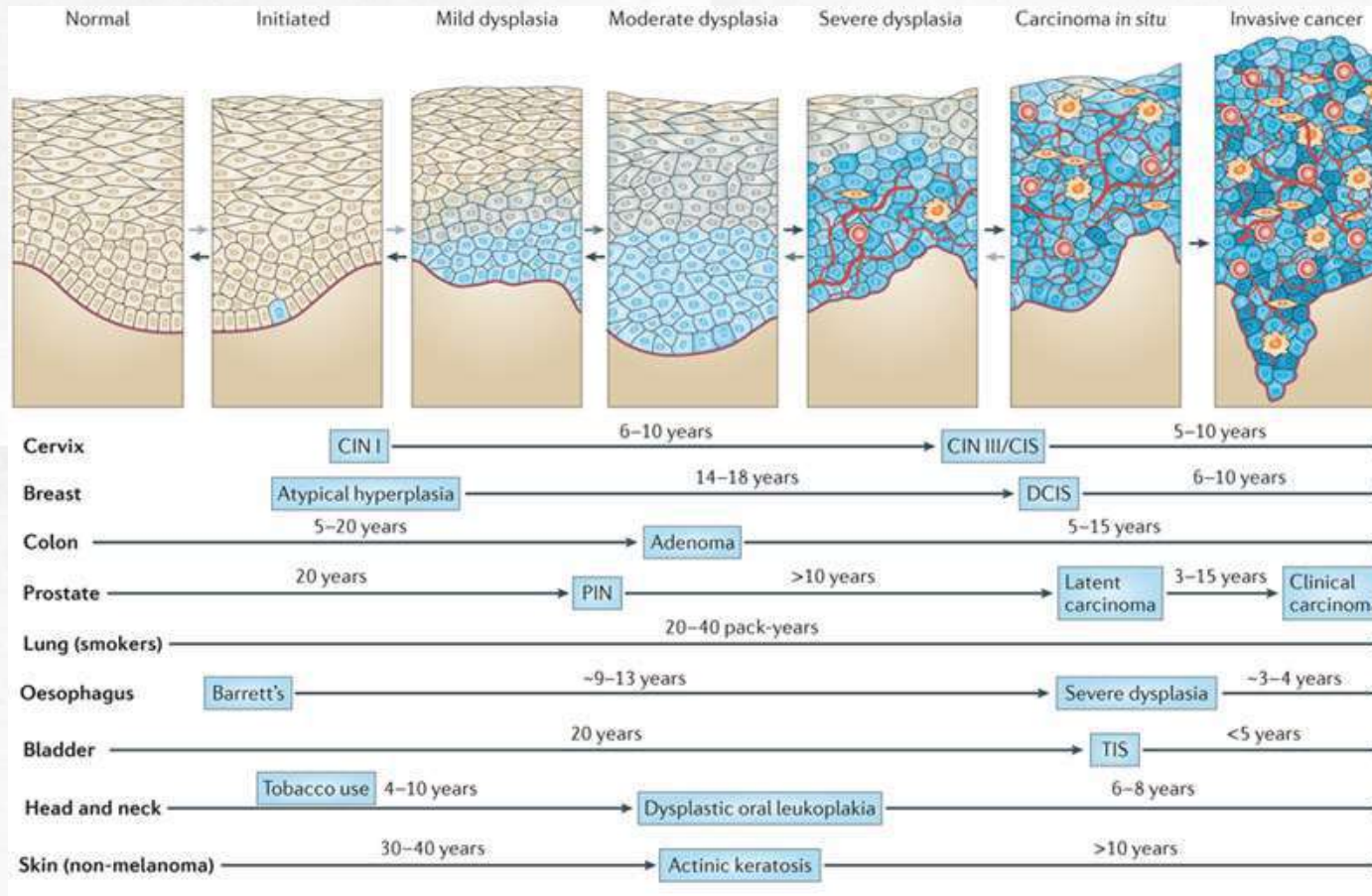


- Cancer is a generic term for a **large group** of diseases that can affect any part of the body.
- The **rapid creation of abnormal cells** that grow beyond their usual boundaries, and which can then invade adjoining parts of the body and spread to other organs.

Cancer



Cancer



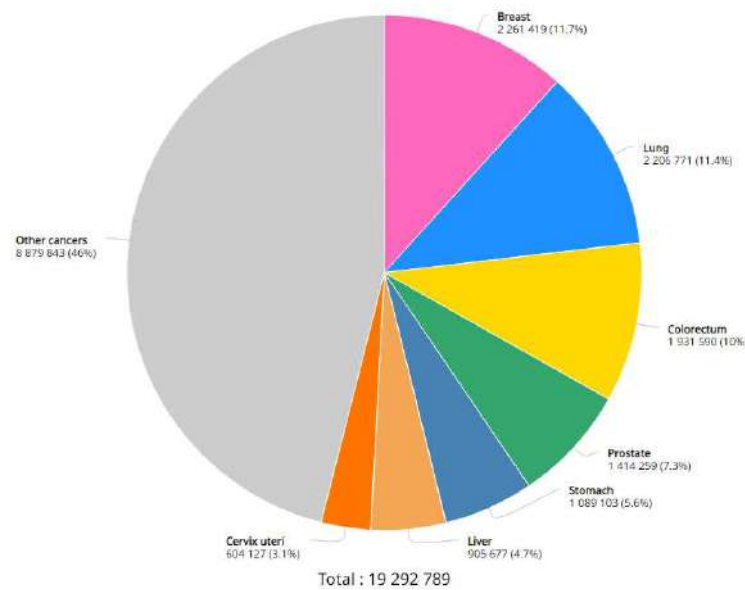
Asad Umar, et al, *Nature Reviews Cancer* 12, 835-848 (2012)

Cancer Statistics

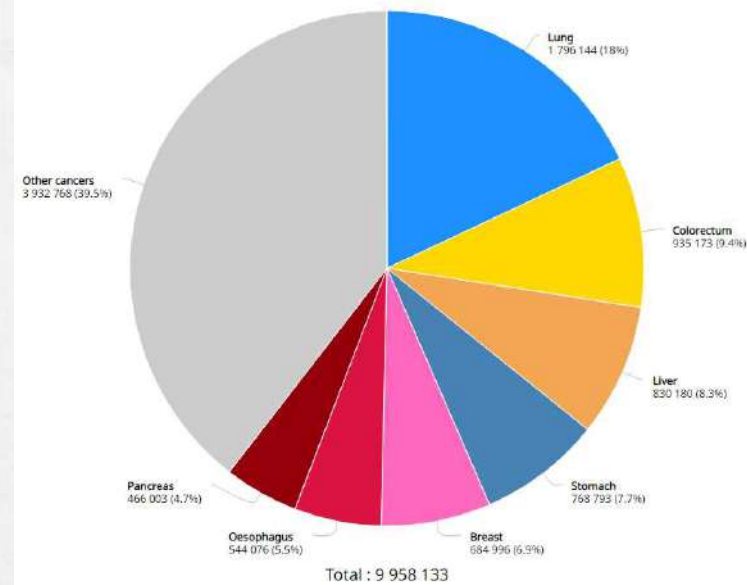
▣ In 2020:

- 10 million cancer related deaths
- 19.3 million new cases
- New cases are expected to rise by to 29.5 million up to 2040

Estimated number of new cases in 2020, World, both sexes, all ages



Estimated number of deaths in 2020, World, both sexes, all ages

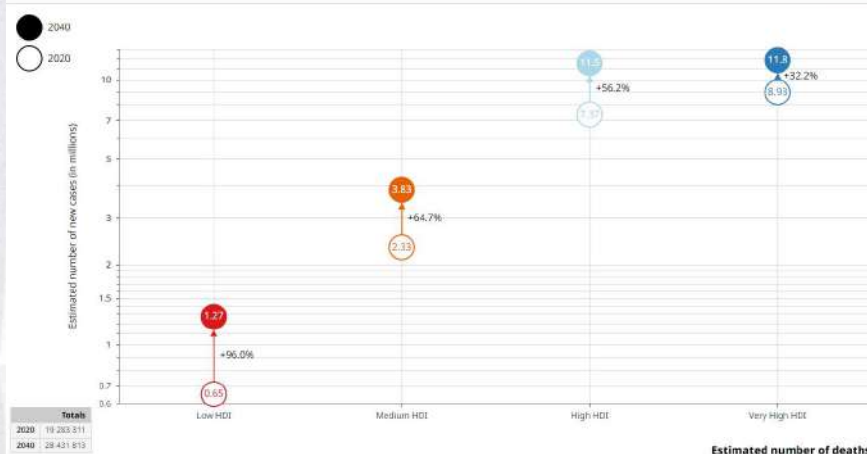


Cancer Statistics

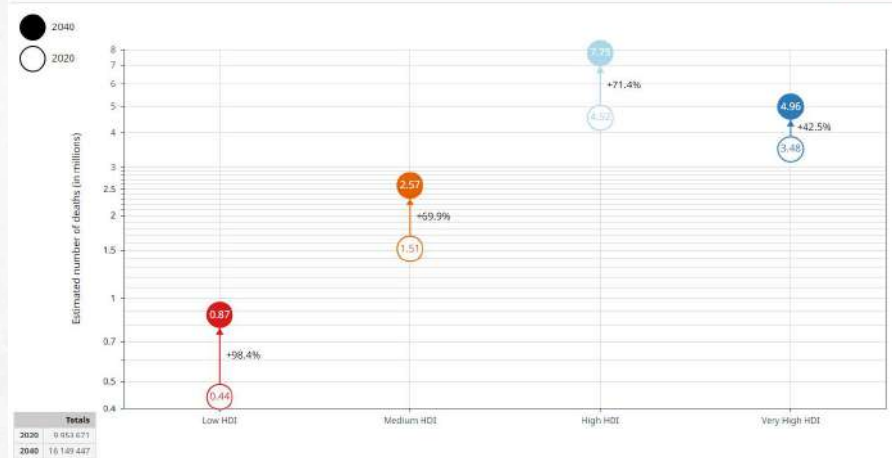
Data source: GLOBOCAN 2020
 Graph production: Global Cancer Observatory (<http://gco.iarc.fr/>)
 © International Agency for Research on Cancer 2022

2040 previsions

Estimated number of new cases from 2020 to 2040, Both sexes, age [0-85+]
 All cancers



Estimated number of deaths from 2020 to 2040, Both sexes, age [0-85+]
 All cancers



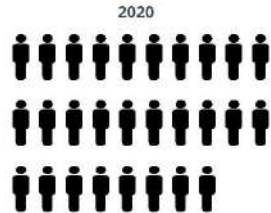
Cancer Statistics

Data source: GLOBOCAN 2020
Graph production: Global Cancer Observatory (<http://gco.iarc.fr/>)
© International Agency for Research on Cancer 2022

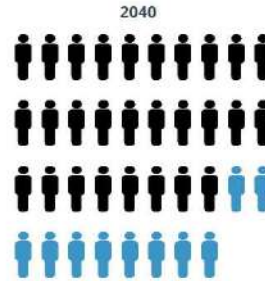
Spain

Estimated number of new cases from 2020 to 2040, Both sexes, age [0-85+]

All cancers
Spain



282k

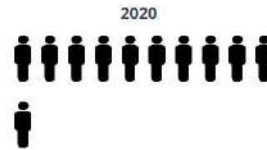


375k

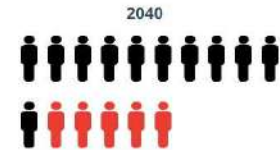


Estimated number of deaths from 2020 to 2040, Both sexes, age [0-85+]

All cancers
Spain



113k

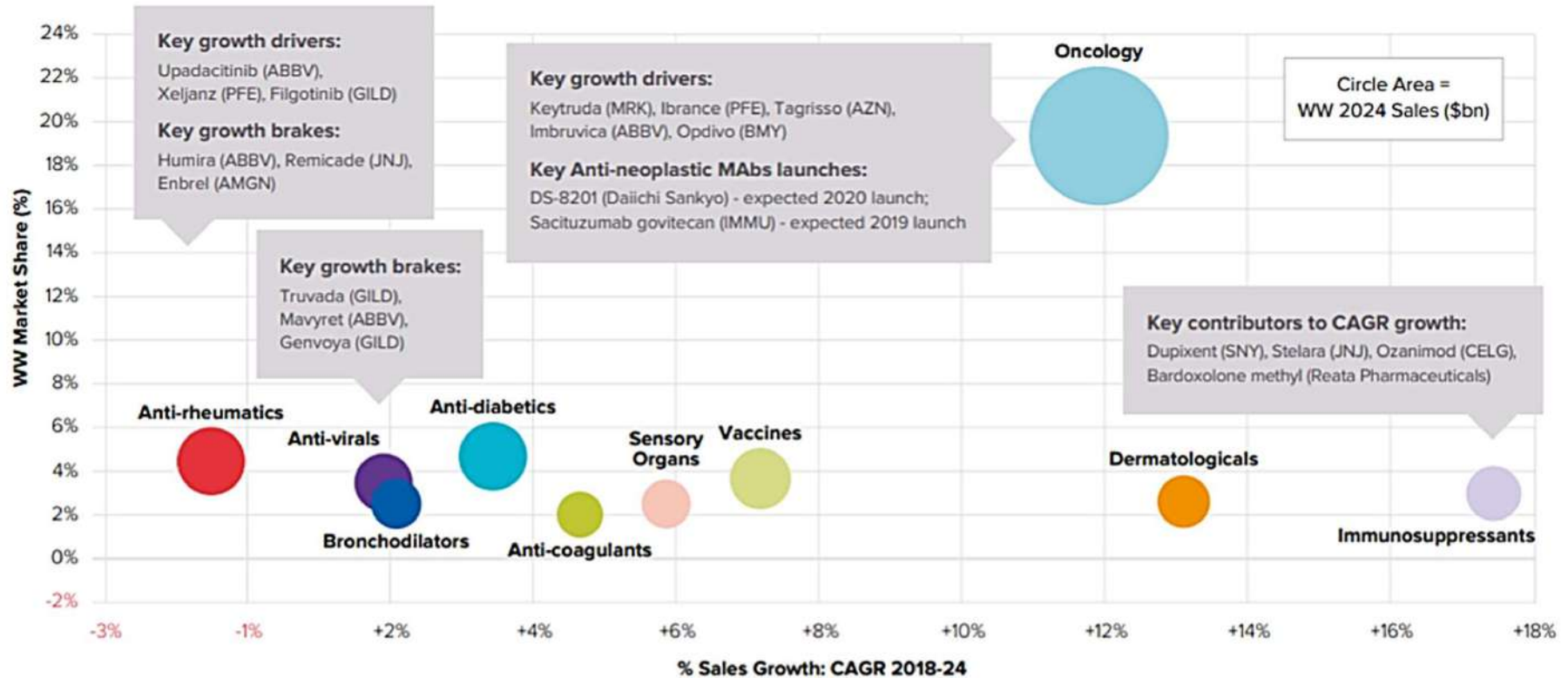


160k



Cancer Costs

▨ Top 10 Therapy Areas in 2024, Market Share & Sales Growth



Cancer Costs

Worldwide Prescription Drug & OTC Sales by Evaluate Therapy Area (2018 & 2024: Top 10 Categories & Total Market)

Rank	Therapy Area	WW Sales (\$bn)		CAGR % Growth	WW Market Share		Chg. (+/-)	Rank Chg. (+/-)
		2018	2024		2018	2024		
1.	Oncology	123.8	236.6	+11.4%	14.3%	19.4%	+5.0pp	+0
2.	Anti-diabetics	48.5	57.6	+2.9%	5.6%	4.7%	-0.9pp	+1
3.	Anti-rheumatics	58.1	54.6	-1.0%	6.7%	4.5%	-2.3pp	-1
4.	Vaccines	30.5	44.8	+6.6%	3.5%	3.7%	+0.1pp	+1
5.	Anti-virals	38.9	42.2	+1.4%	4.5%	3.5%	-1.0pp	-1
6.	Immunosuppressants	14.2	36.1	+16.9%	1.6%	3.0%	+1.3pp	+6
7.	Dermatologicals	15.8	32.1	+12.6%	1.8%	2.6%	+0.8pp	+4
8.	Bronchodilators	28.0	30.7	+1.6%	3.2%	2.5%	-0.7pp	-2
9.	Sensory Organs	22.3	30.5	+5.3%	2.6%	2.5%	-0.1pp	+0
10.	Anti-coagulants	19.3	24.6	+4.1%	2.2%	2.0%	-0.2pp	+0

Cancer Costs

▨ In 2010:

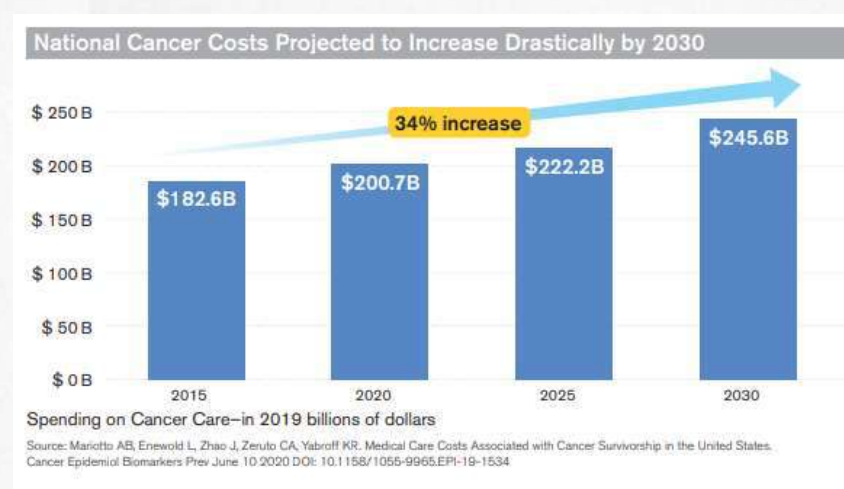
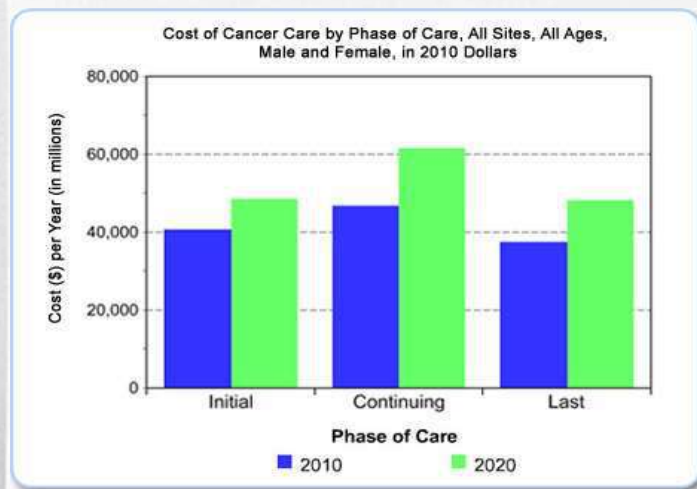
- Costs of cancer care: \$157 billion

▨ In 2020:

- Costs of cancer care projected: \$174 billion (calculated \$200 billion)

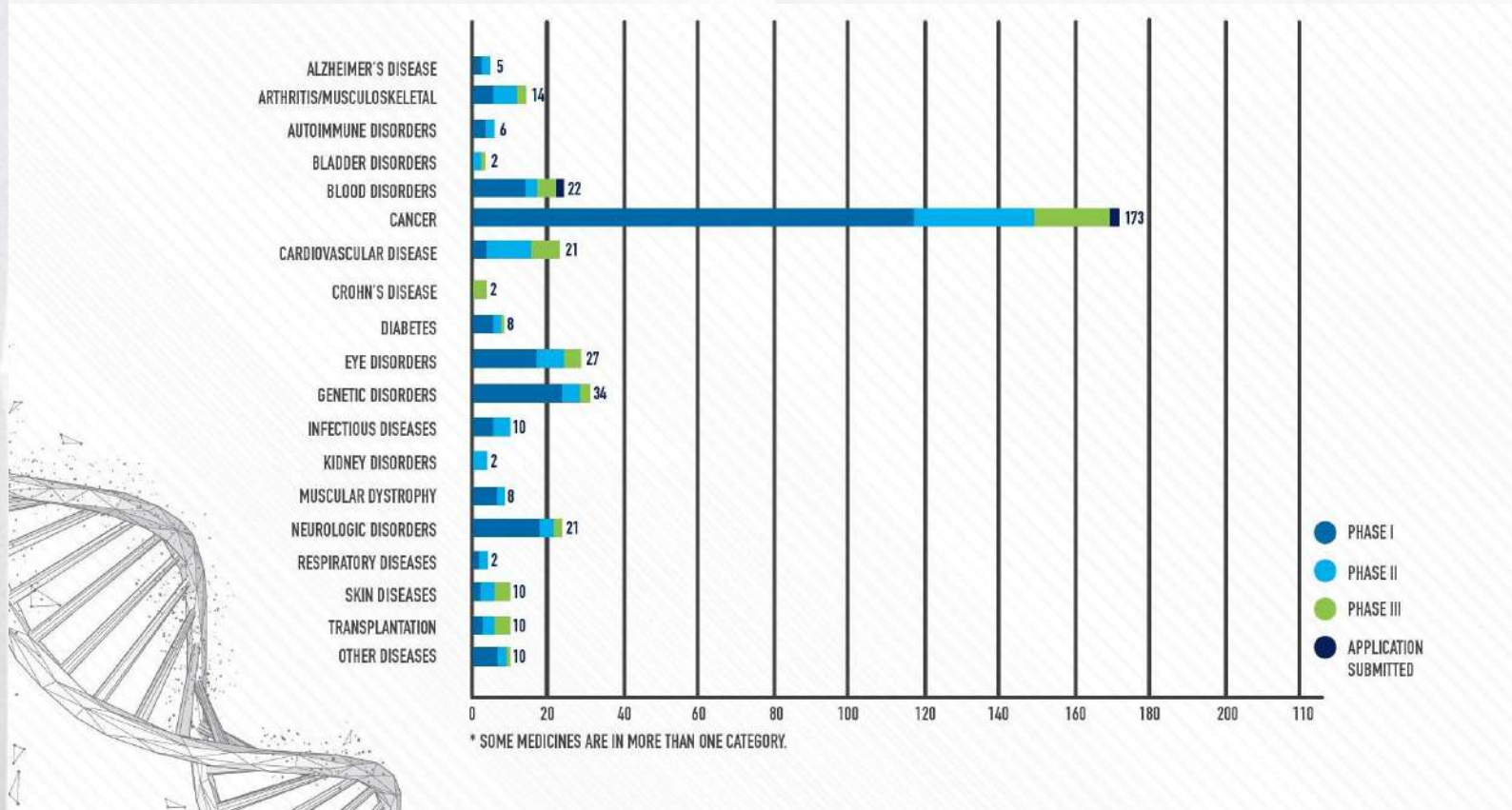
▨ In 2030:

- Costs of cancer care projected: \$246 billion



Data from: USA

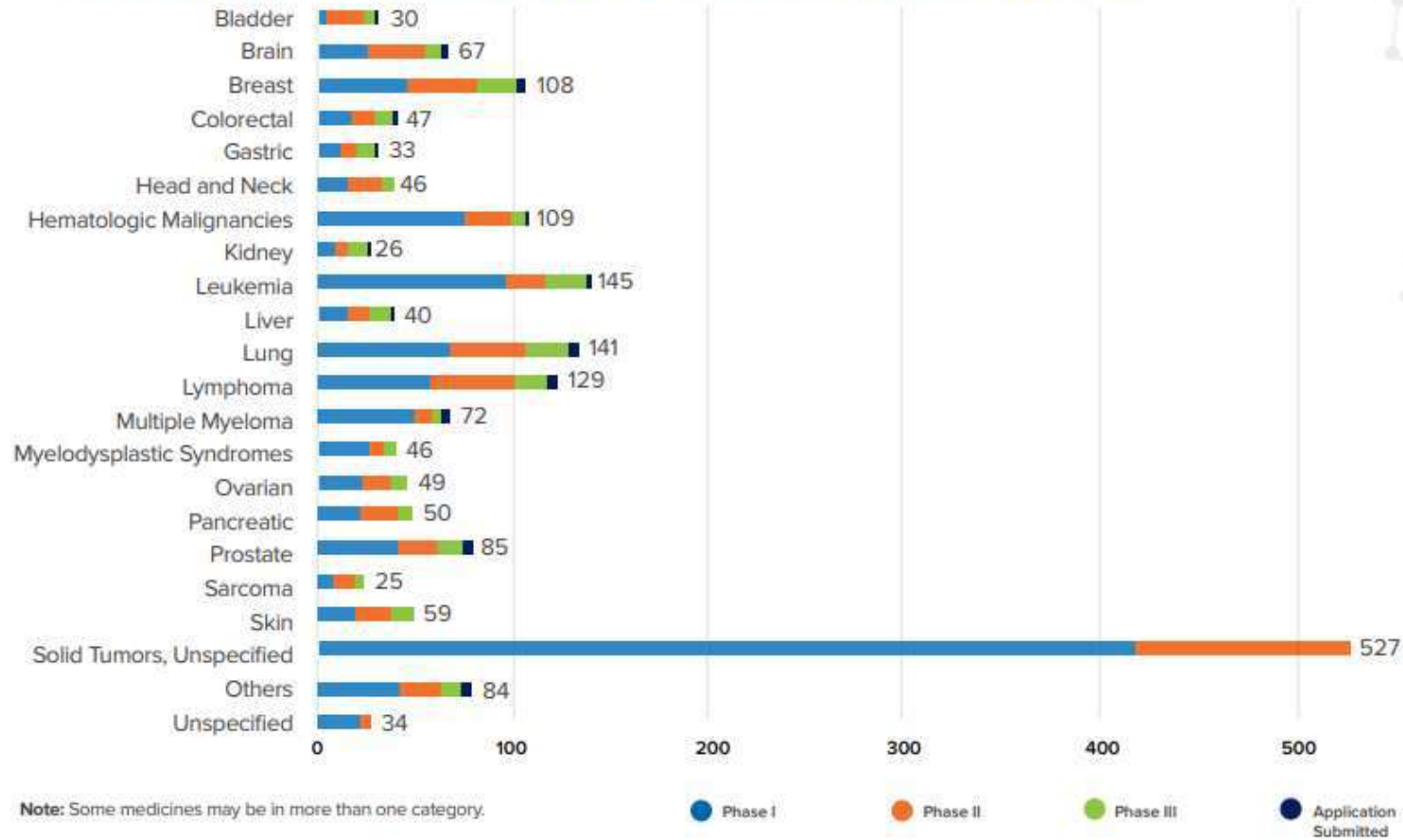
Medicines Under Development



Data from: 2020

Medicines Under Development for Cancer

Medicines and Vaccines in Development for Cancer by Type

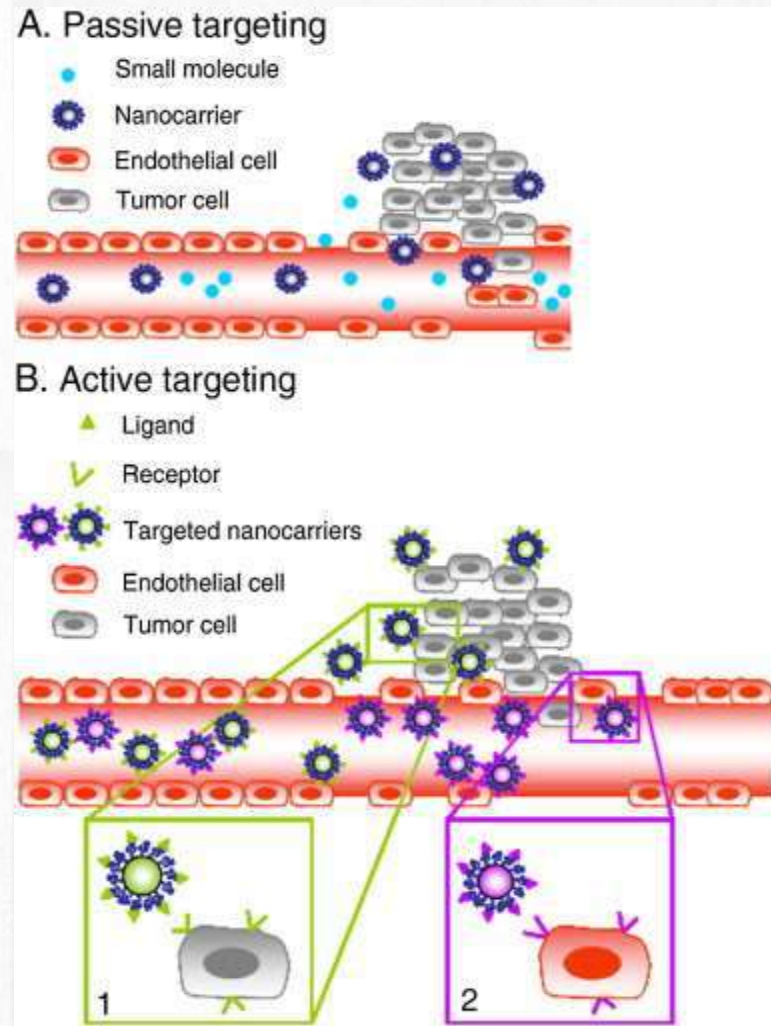


Data from: 2020

Nanomedicine

▣ Passive – Enhanced Permeability and Retention (EPR) effect

▣ Active Targeting



Danhier, et al, J Control Release. 2010
1;148(2):135-46

Nanomedicine

Non Liposomal Drug

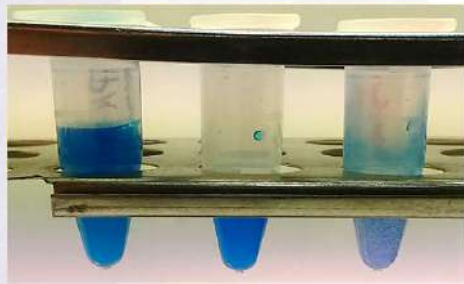


Liposomal Drug



Nanomedicine

Biopharmaceutical classification system (BCS)



PM-DID (in PBS) 0.25 mg/ml
 Free DID in DMSO 0.25 mg/ml
 Free DID in PBS 0.25 mg/ml

Increase **trans-epithelial permeability**: permeation enhancers; nanotechnology

Class I
 High Solubility
 High Permeability
 Diazepam, Nifedipine, Diltiazem, Verapamil, Quinidine, Midazolam

Class II
 Low Solubility
 High Permeability
 Aciclovir, Captopril, Amoxicillin, Penicillin

Class III
 High Solubility
 Low Permeability
 Atorvastatin, Cyclosporin, Tamoxifen, Ketoconazole

Class IV
 Low Solubility
 Low Permeability
 Paclitaxel, Amphotericin B

Permeability

Solubility

Increase **solubility and dissolution rate**: increase surface area/size reduction; solid solutions/dispersions; solvents/surfactantes

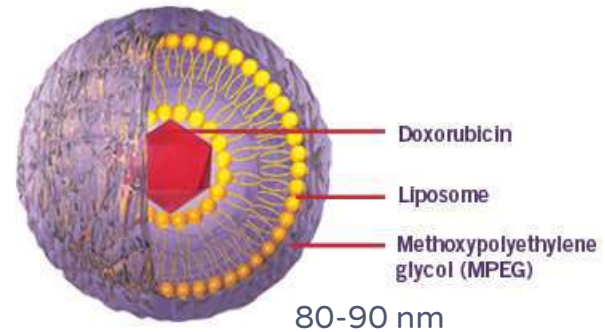
Increase **solubility and dissolution rate**
 Increase **trans-epithelial permeability**

Nanomedicine

Doxil® - The first FDA-approved nano-drug (1995)

Stealth liposomes of doxorubicin

Ovarian cancer
AIDS-related Kaposi's Sarcoma
Multiple Myeloma

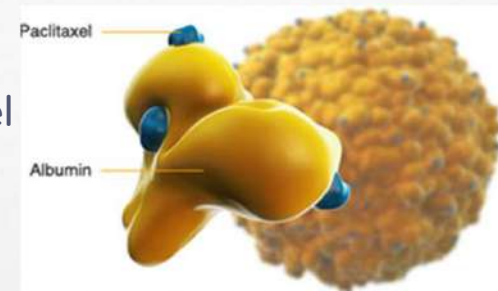


Cardiotoxicity dose:
Doxorubicin: 570 mg/m²
Doxil: 785 mg/m²

Abraxane® - FDA-approved nano-drug (2005)

Albumin nanoparticles of paclitaxel

Advanced breast cancer
Advanced non-small cell lung cancer
Advanced pancreatic cancer

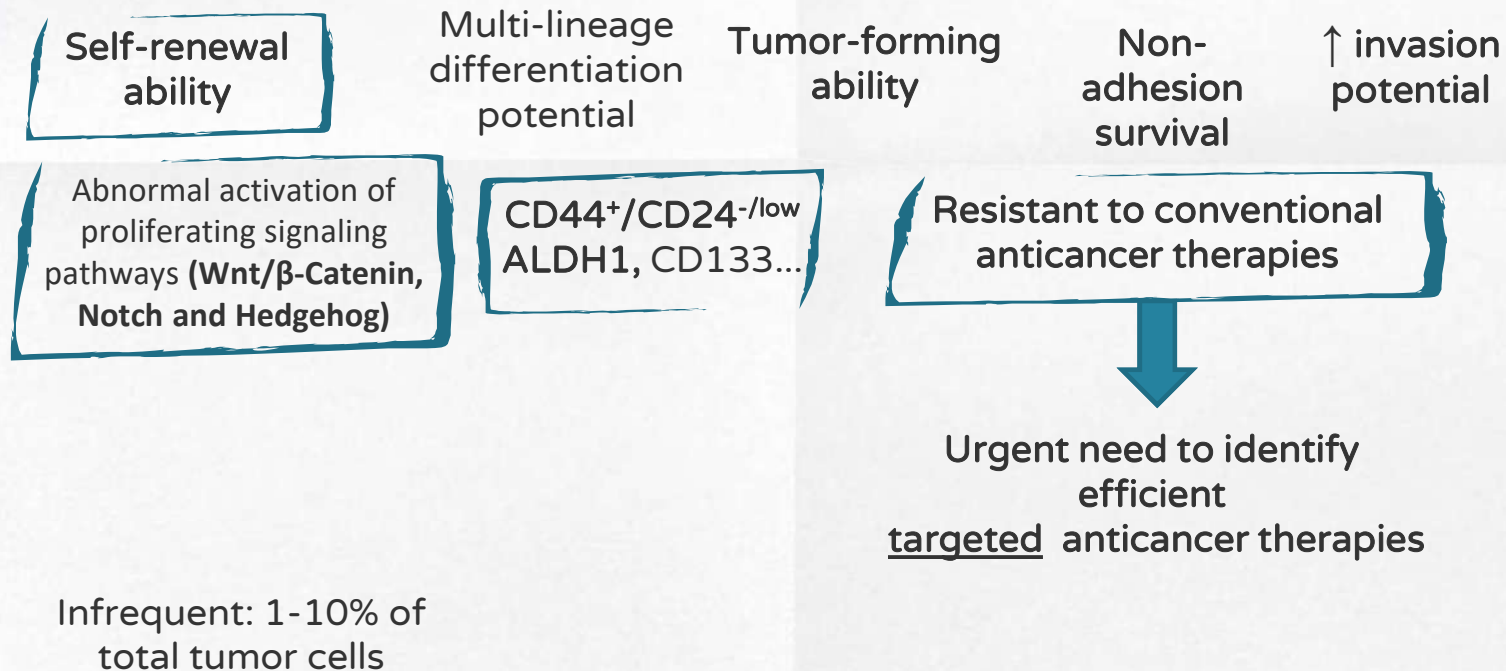


Maximum tolerated dose:
Taxol: 175 mg/m²
Abraxane: 260 mg/m²

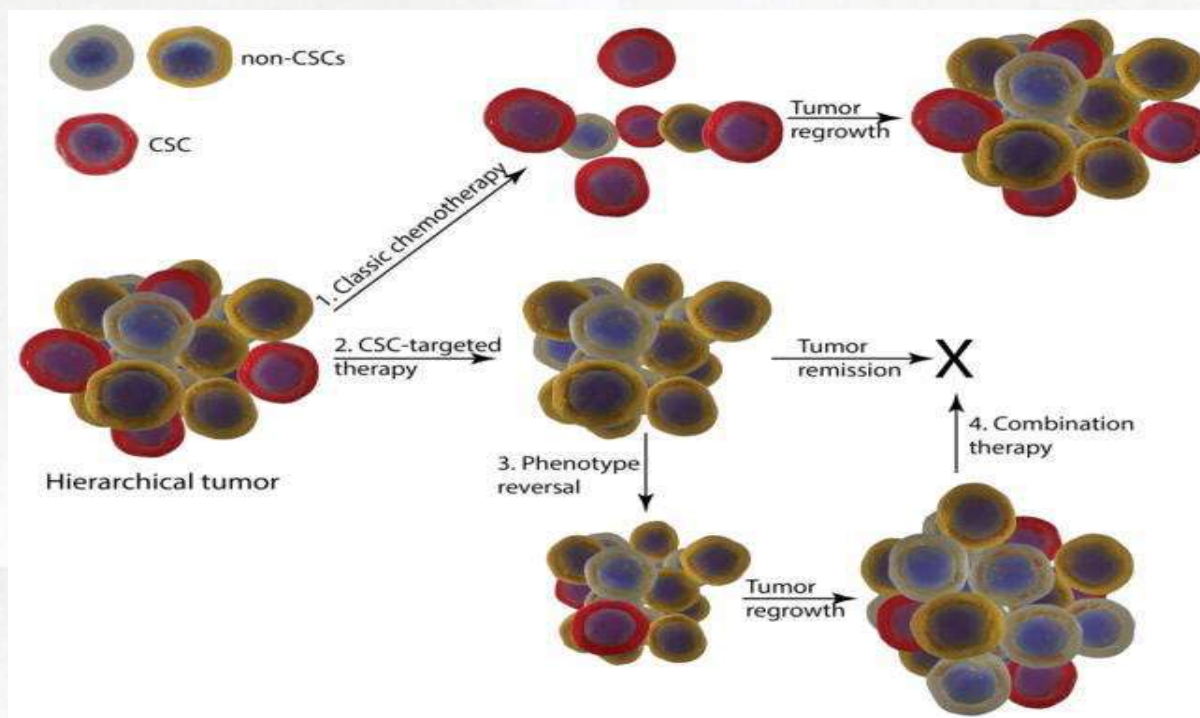
Cancer Stem Cells (CSC)

▣ CSC properties

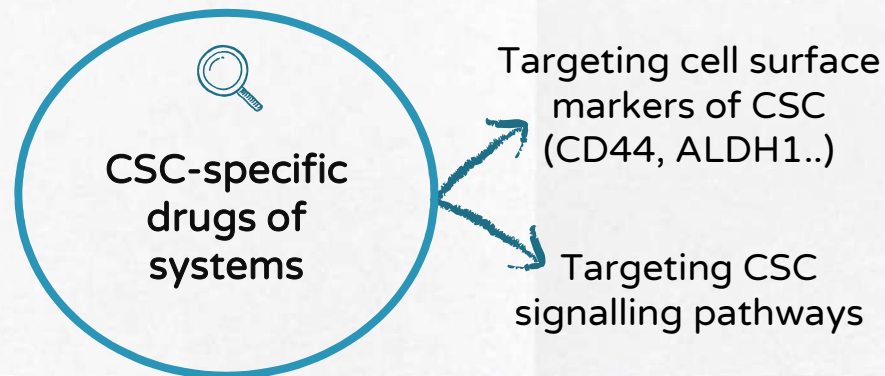
- Support the metastatic spread and tumor resistance reducing overall survival.



Targeting Cancer Stem Cells (CSC)



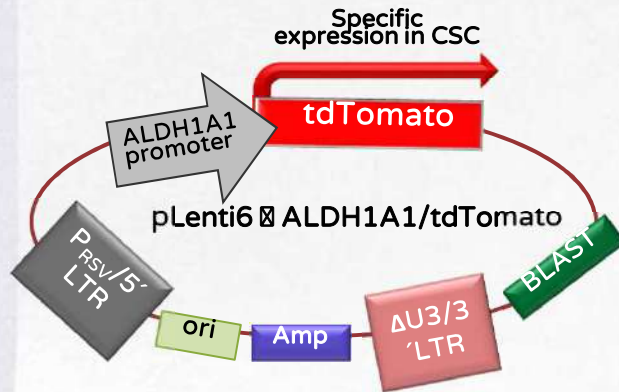
Y. Zhao et al. *Adv Drug Deliv Rev*, 2013, 65(0): 1763–1783.



Advanced Breast Cancer

Development of CSC fluorescently traceable model

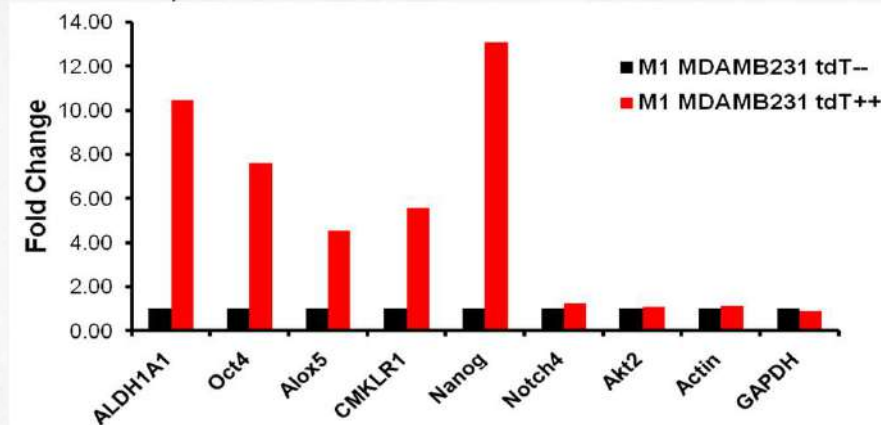
▣ Breast Cancer – most prevalent cancer worldwide (WHO).



ALDH1A1-tdTomato reporter system

- Permanent expression of reporter in CSC allowing
 - Isolation of CSC from regular cultures
 - Monitoring of CSC within cell culture

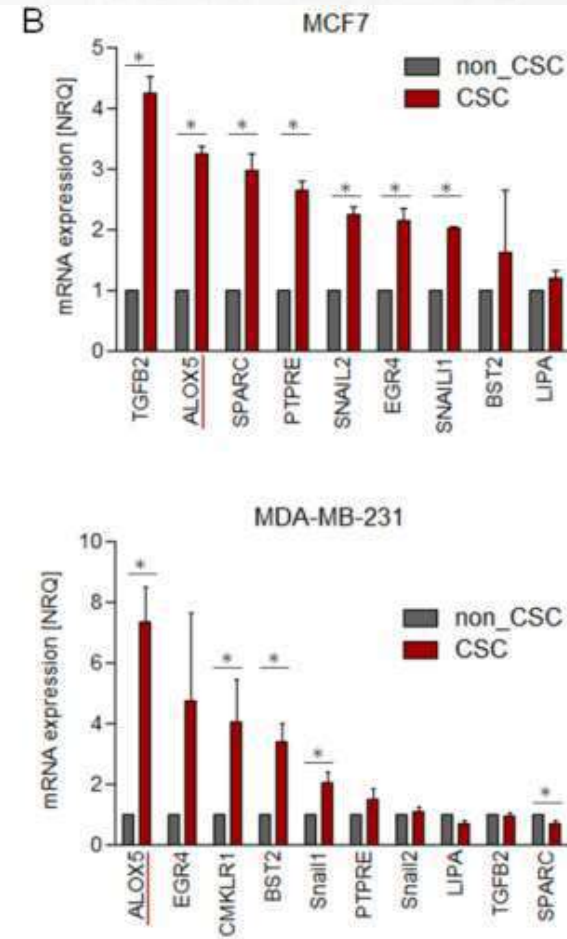
*ALDH1A1 is overexpressed in bCSCs



Drug Screening

A

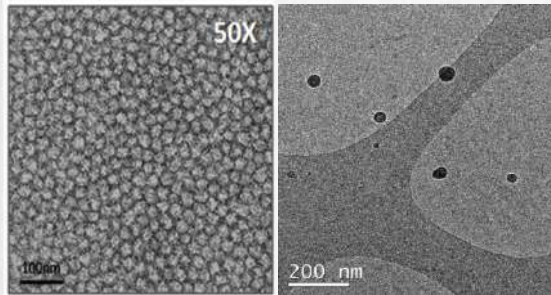
log2ratio_MCF7_CSC vz. MCF7_nonCSC	log2ratio_MDA231_CSC vz. MDA231_nonCSC	log2ratio_CSC vz. nonCSC	GeneName	FC_MCF7_CSC vz. MCF7_nonCSC	FC_MDA231_CSC vz. MDA231_nonCSC	FC_CSC vz. nonCSC	P.Value_CSC vz. nonCSC	Confirmed overexpression in MCF7_CSC	Confirmed overexpression in MDA231_CSC
			PGC	3.76	3.62	3.69	0.01	-	-
			ALOX5	5.15	2.50	3.59	0.00	yes	yes
			EGR4	3.33	2.80	3.05	0.04	no	no
			BST2	2.60	2.62	2.61	0.00	no	yes
			TGFB2	3.38	1.49	2.25	0.02	yes	no
			HLA-DRB5	2.34	2.15	2.24	0.01	-	-
			PTPRE	2.08	2.02	2.05	0.00	yes	no
			SNAI2	1.63	2.57	2.05	0.02	yes	no
			IL10RA	1.23	3.21	1.99	0.10	-	-
			GRM5	1.52	1.96	1.73	0.04	-	-
			LIPA	1.27	1.22	1.24	0.06	no	no
			TLR2	1.55	-1.09	1.19	0.45	-	-
			CMKLR1	-1.02	1.28	1.12	0.36	yes	yes
			GATA4	1.04	1.17	1.11	0.29	no	-
			SNAI1	-1.02	-1.11	-1.06	0.59	yes	yes
			SPARC	-1.03	-1.28	-1.15	0.39	yes	no



▨ Zileuton™ – Anti-asthmatic drug – inhibitor of ALOX5 –
overexpressed in CSC

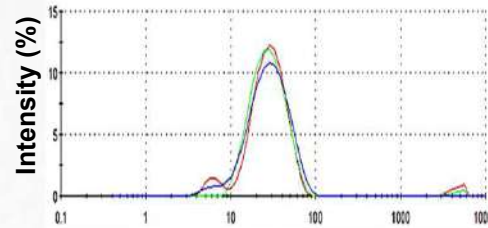
Polymeric Micelles: Zileuton™ – characterization

▣ Morphology (TEM and CryoTEM)



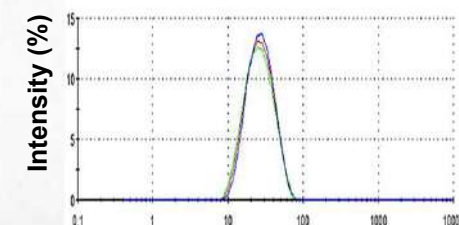
▣ Size and Stability over time (day 0 and day 30)

Size Distribution by Intensity (Day 0)



Size (d.nm)

Size Distribution by Intensity (Day 30)

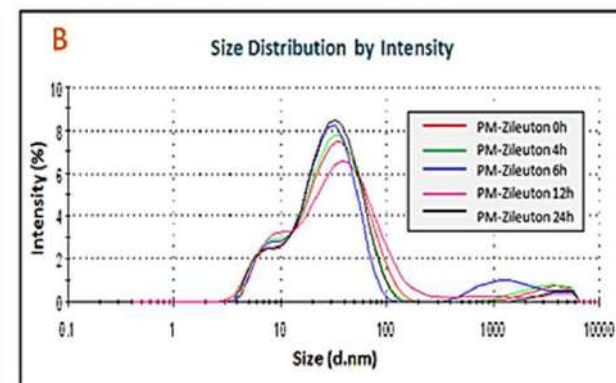
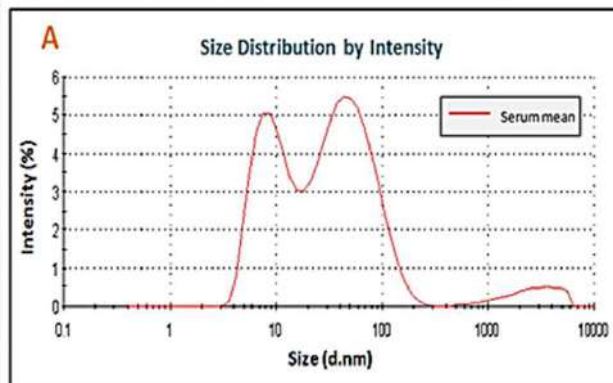


Size (d.nm)

Sample	Size (nm) ± sd	Pdi ± sd
PM-Zil	23.86 ± 0.89	0.226 ± 0.016

Sample	Size (nm) ± sd	Pdi ± sd
PM-Zil	23.93 ± 0.20	0.176 ± 0.004

▣ Stability in serum

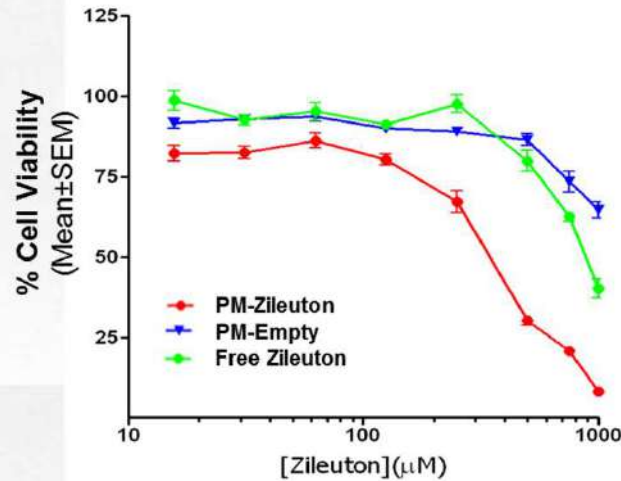


Polymeric Micelles: Zileuton™ – *in vitro* results

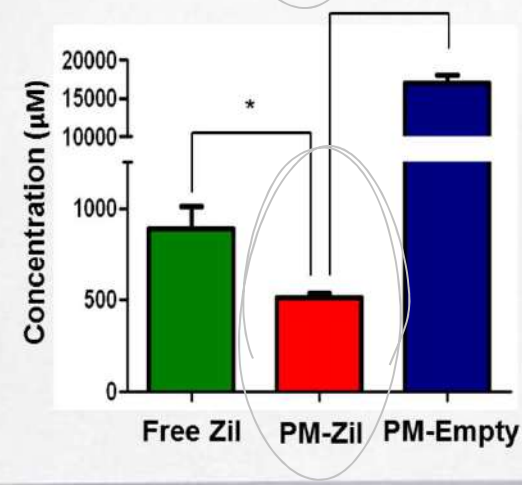
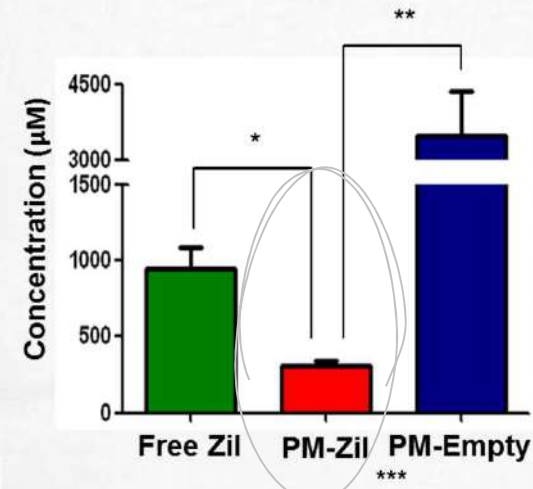
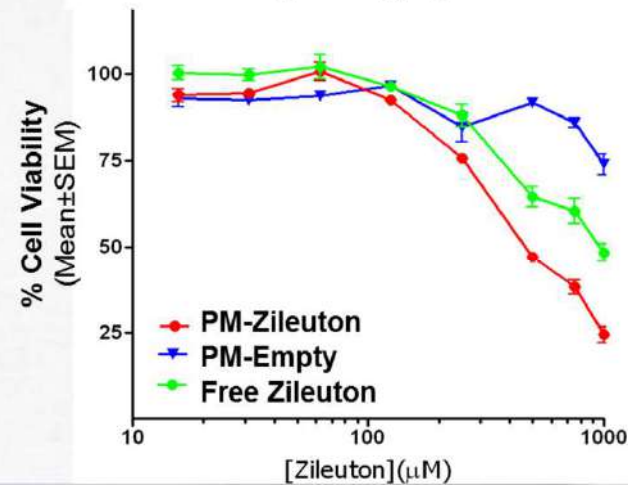


Increased activity of Zileuton™ when encapsulated in PM

MDA-MB-231



MCF-7

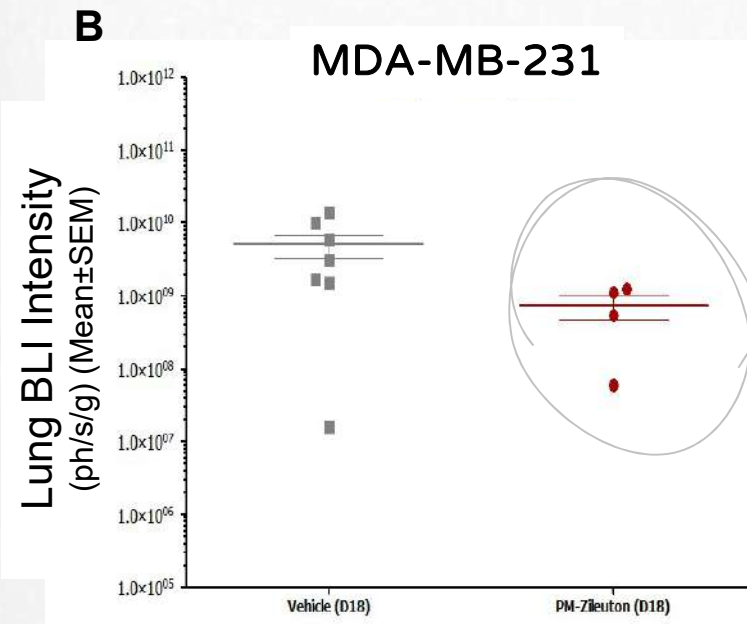
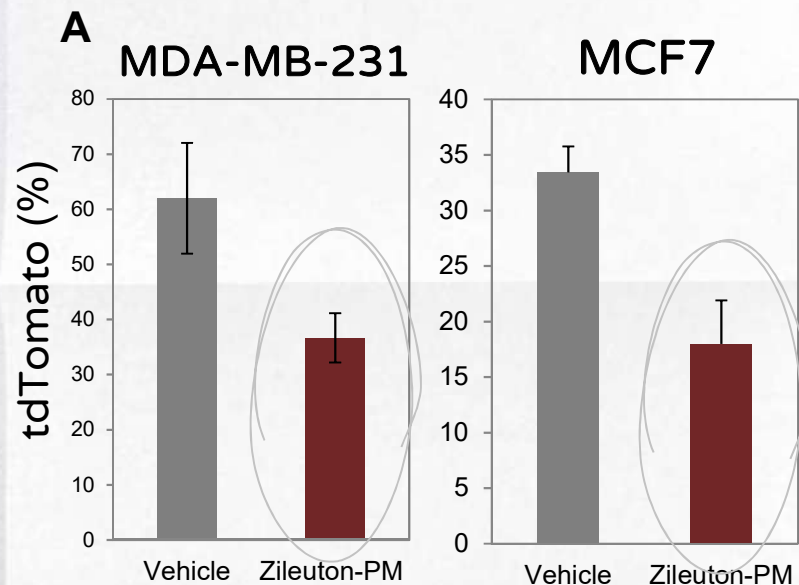


Polymeric Micelles: Zileuton™ – *in vivo* results



A) Reduction of CSC content in ensuing tumor

B) Abolishment of CTC and reduction of the number of metastasis detected by BLI.



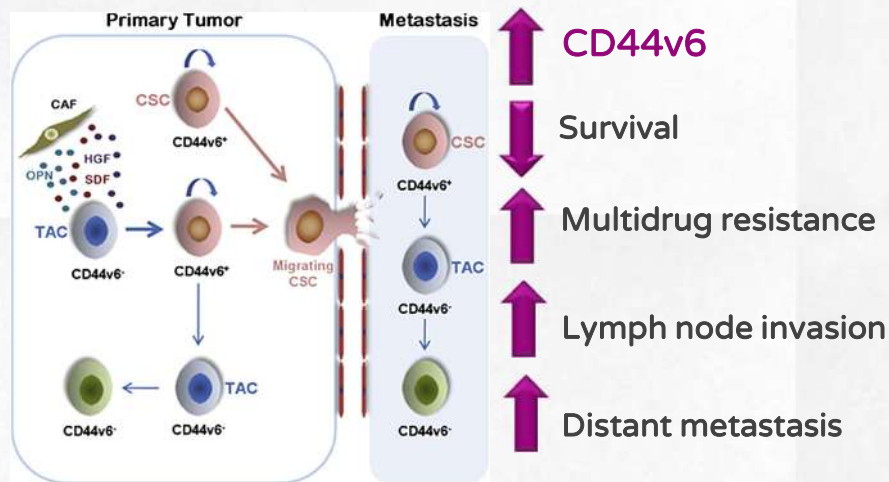
Treatment	CTC incidence	CSC (%)
Vehicle	6/9	35.3
PM-Zileuton	0/7	N/A



Advanced Colorectal Cancer

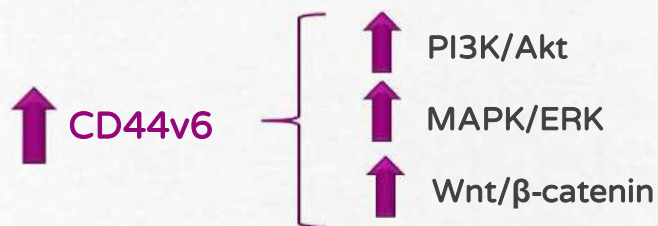
CD44v6 in Colorectal Cancer

- ▣ Colorectal Cancer (CRC) – 2nd leading cause of cancer mortality worldwide (WHO).
- ▣ Metastatic CRC – non-responsive to treatments due to intrinsic and acquired drug resistance.



In gastrointestinal cancers:
Tumor niche reprograms
CD44v6⁻ CRC progenitors into
metastatic CD44v6⁺ CSC.

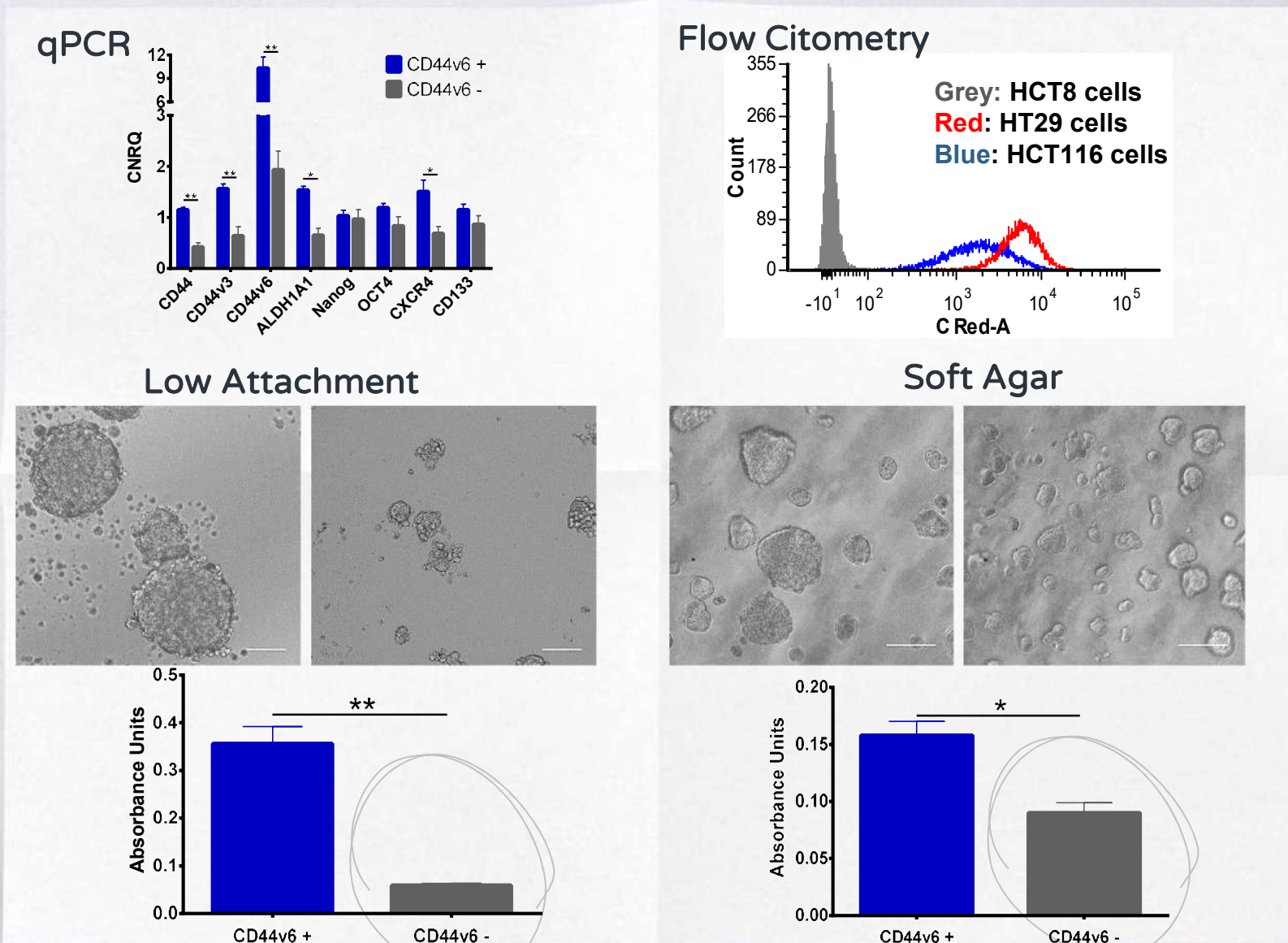
Todaro, et al, Cell Stem Cell 2014, 14, 342–356
Wang, et al, Oncotarget, 2017, 8(8), 12866-12876
Wang, et al, Mol Med Rep. 2015, 11(5):3505-10



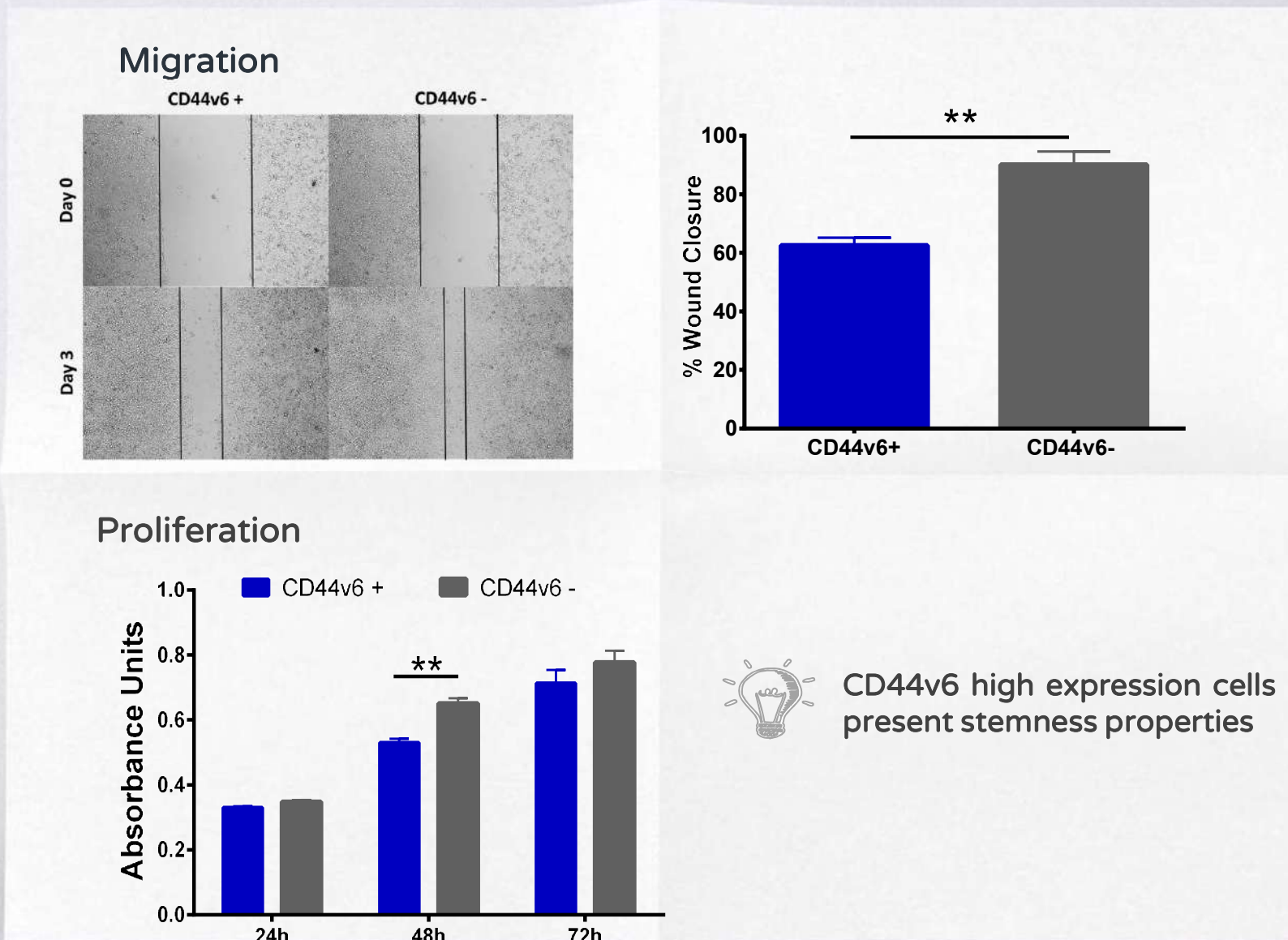
CD44v6 – Biomarker of CSC

Ma, et al, Cell Death & Disease 2019, 10:30

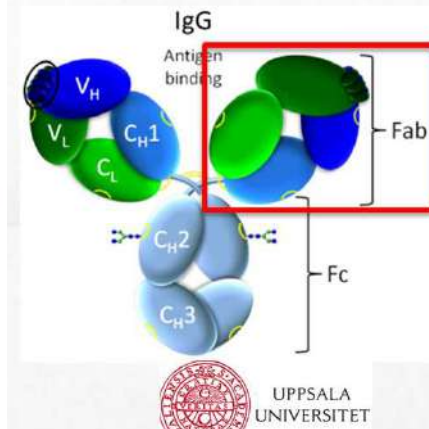
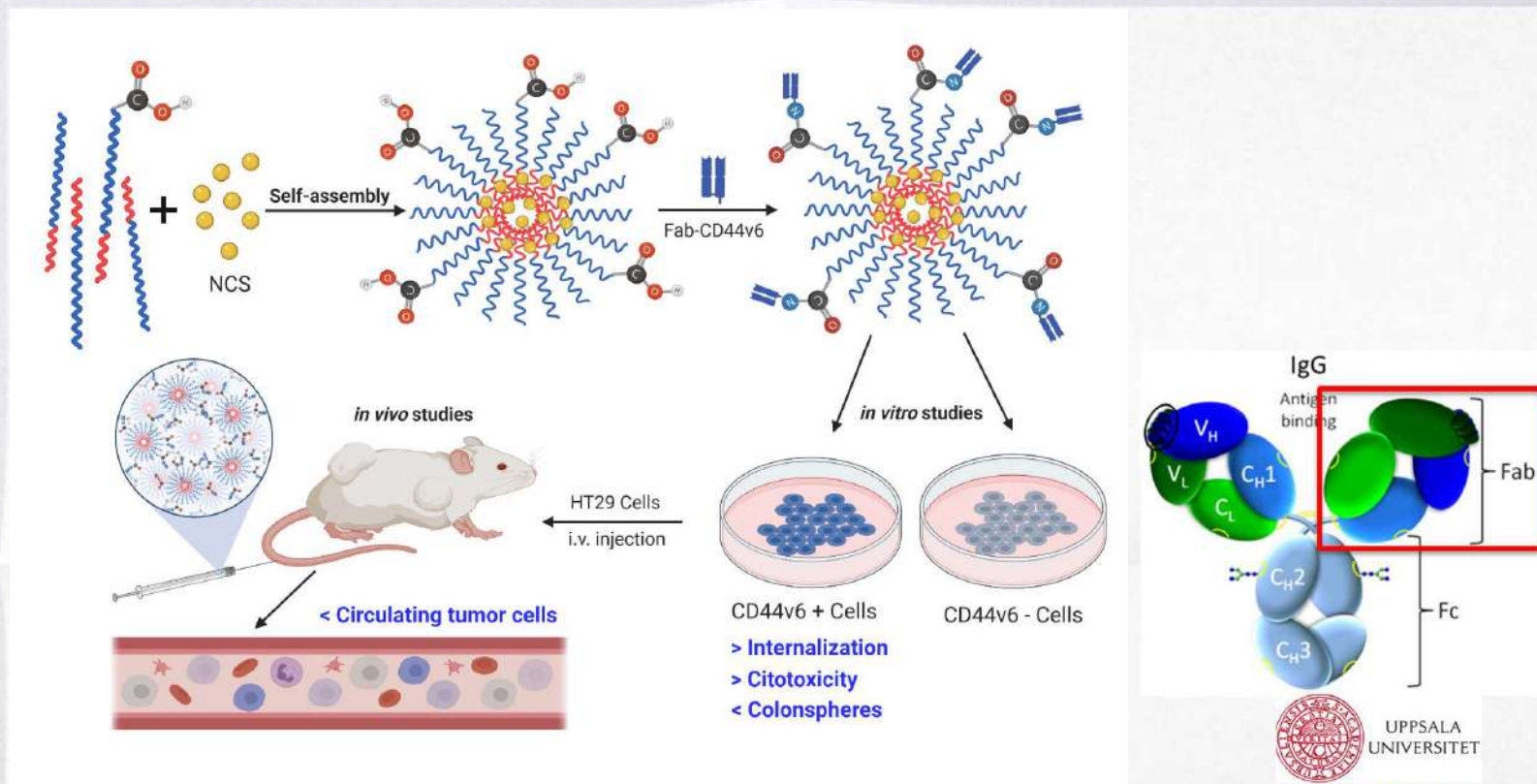
In vitro validation of CD44v6 as targeting for CSC



In vitro validation of CD44v6 as targeting for CSC

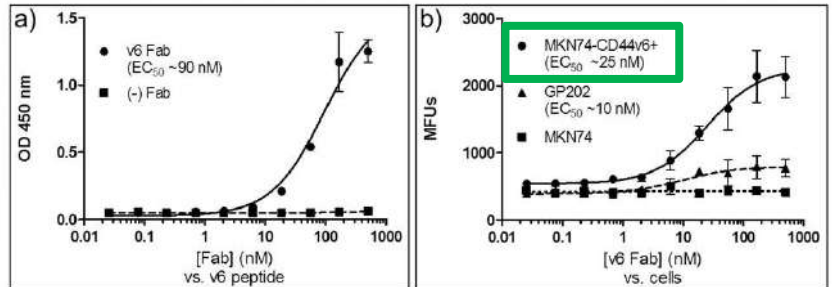


Objective



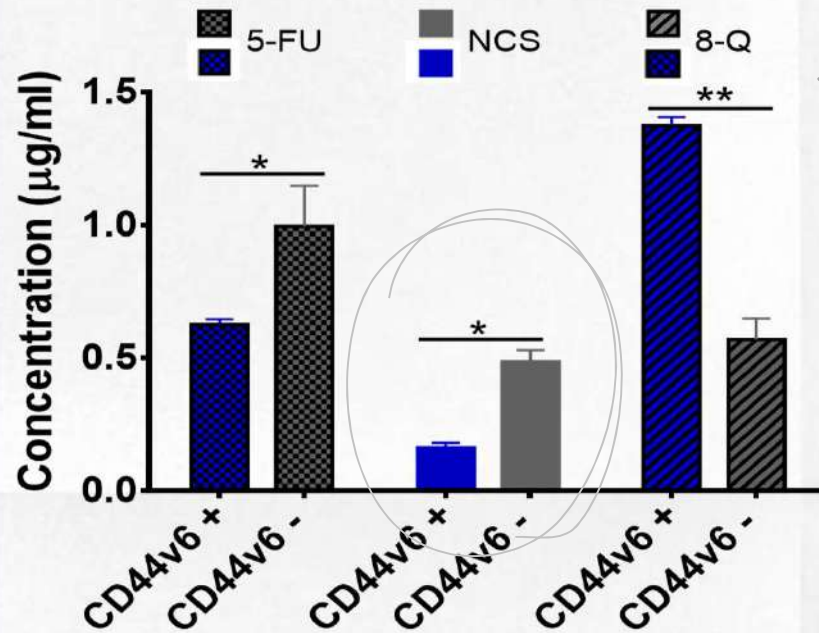
UPPSALA UNIVERSITET
Marika Nestor
 (HNSCC diagnosis)

FACS – fixed cells



Antigen Presentation	K _D (nM)
Recombinant CD44v3-10	6
CD44v6 peptide	60
CD44v6+ cell line	10

Drug Selection



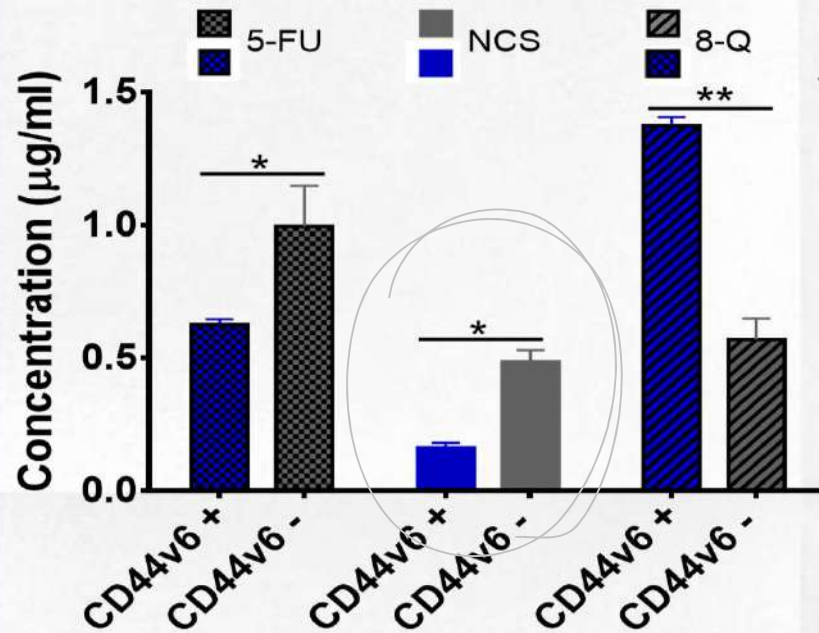
Niclosamide (NCS) present activity against CD44v6+ cells and is more potent than the standard 5-FU

Drug/Cell subpopulation	IC ₅₀ (µg/ml)
5-FU/CD44v6 +	0.62 ± 0.04
5-FU/CD44v6 -	0.99 ± 0.26
NCS/CD44v6 +	0.17 ± 0.03
NCS/CD44v6 -	0.48 ± 0.08
8-Q/CD44v6 +	1.37 ± 0.05
8-Q/CD44v6 -	0.57 ± 0.14



Arend, et al, *Oncotarget*. 2016, 7(52): 86803–86815

Drug Selection



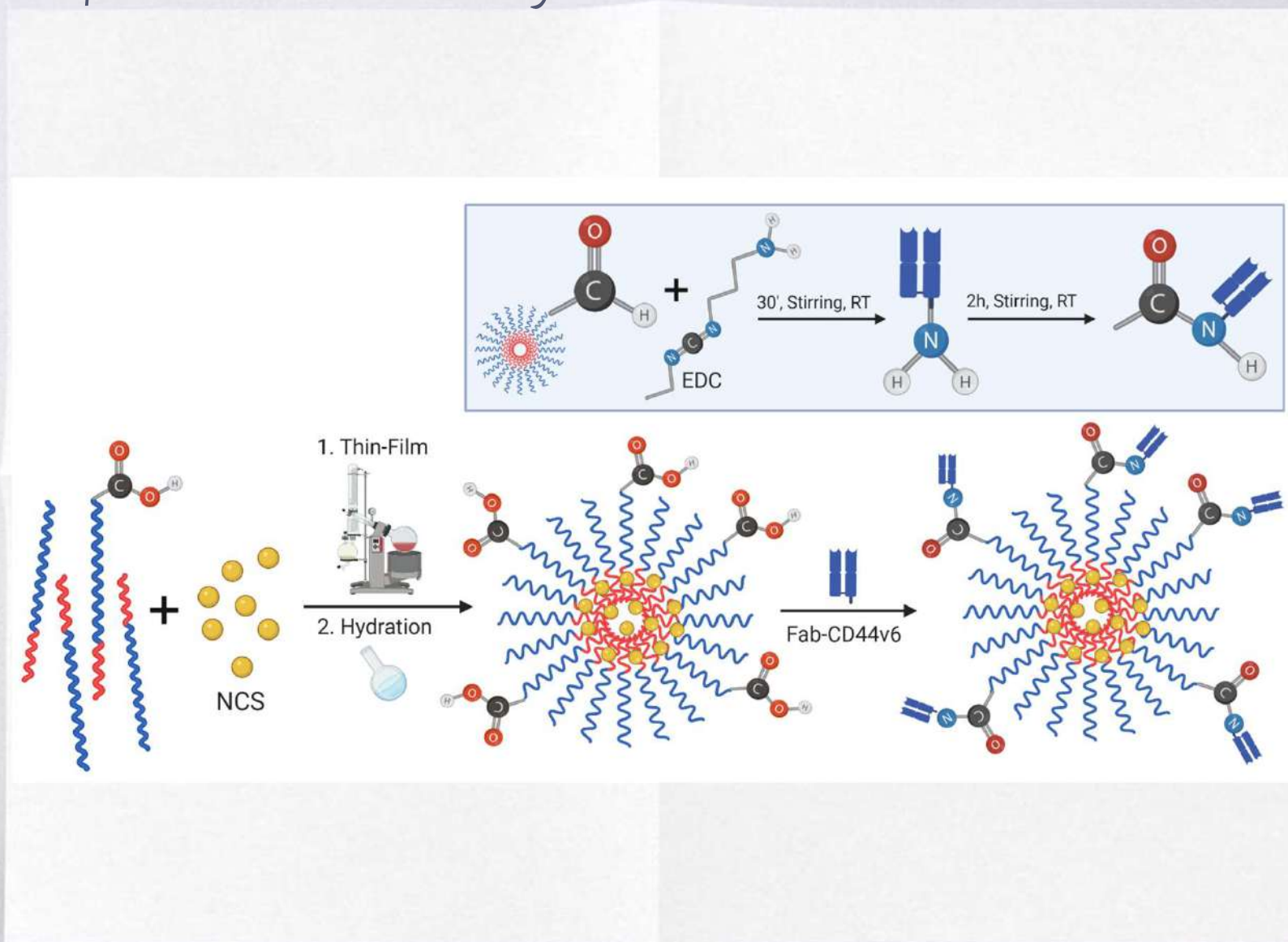
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NCS/CD44v6 -	0.48 ± 0.08
8-Q/CD44v6 +	1.37 ± 0.05
8-Q/CD44v6 -	0.57 ± 0.14



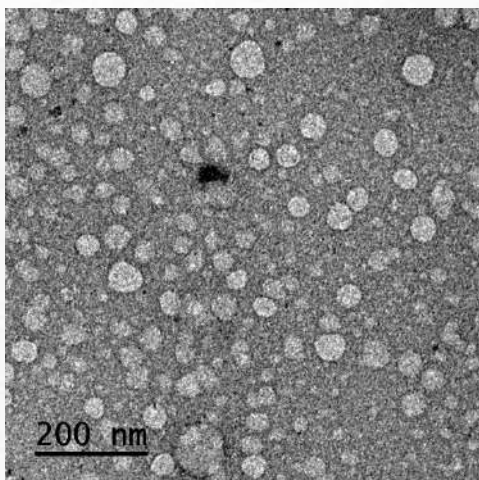
Arend, et al, *Oncotarget*. 2016, 7(52): 86803–86815

Polymeric Micelles Design

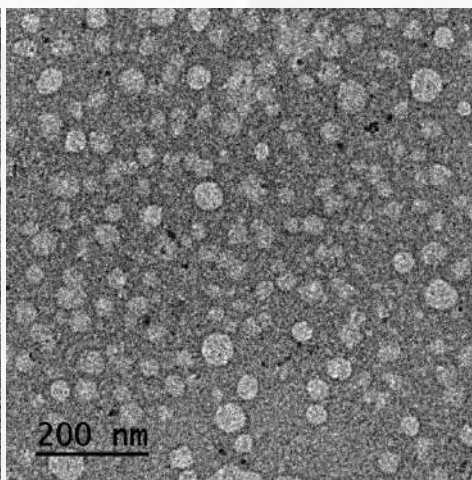


Polymeric Micelles-Niclosamide:CD44v6 Fab - characterization

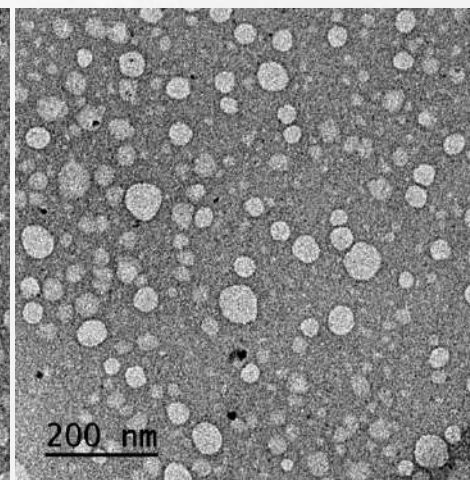
Formulation	Mean Diameter (nm)	Pdl	Zeta Potential (mV)	AE (%)
PM	23.2 ± 1.1	0.332 ± 0.067	-0.7 ± 0.3	N.A.
PM-NCS	24.4 ± 0.7	0.206 ± 0.011	-3.4 ± 2.8	99.8 ± 4x10 ⁵
PM-NCS:Fab	29.7 ± 1.2	0.338 ± 0.055	-6.5 ± 0.7	99.7 ± 4x10 ⁵



PM



PM-NCS

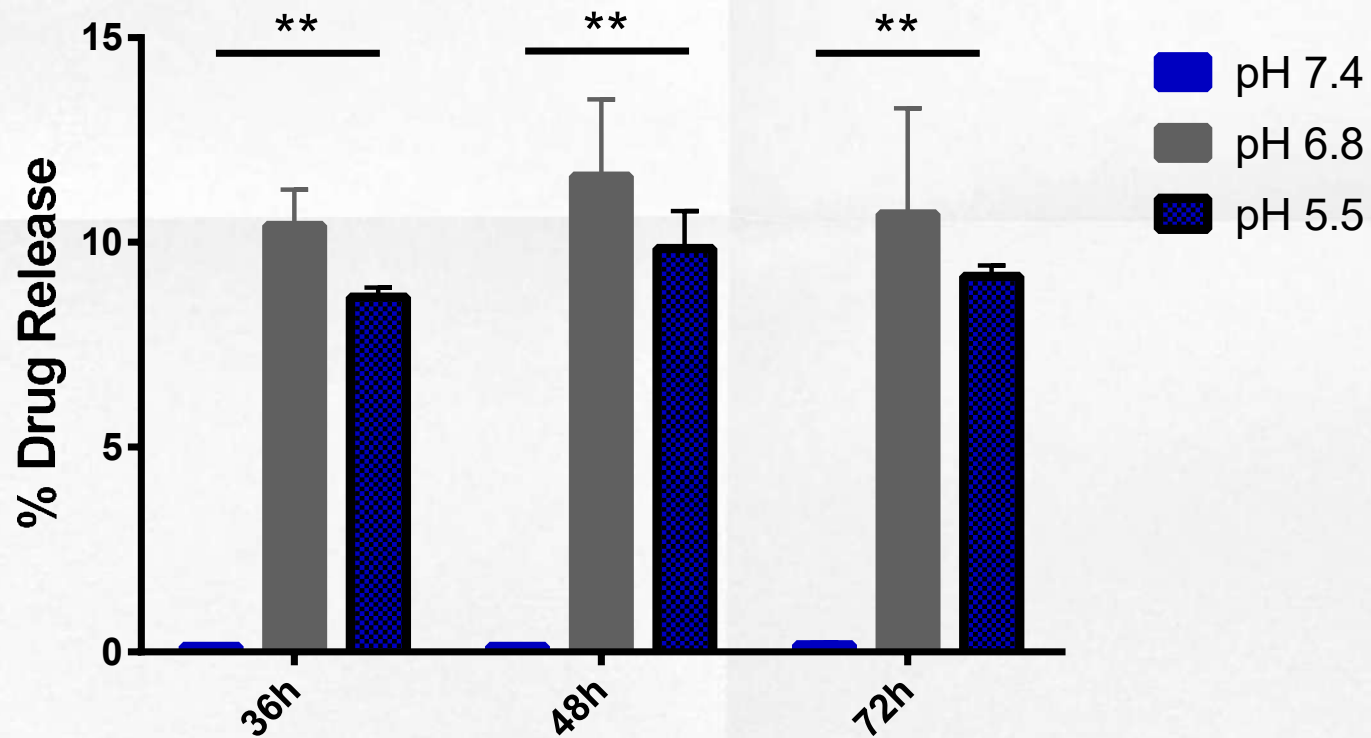


PM-NCS:Fab

Polymeric Micelles-Niclosamide:CD44v6 Fab - characterization



Drug release dependent on pH
Preferential release at tumor microenvironment

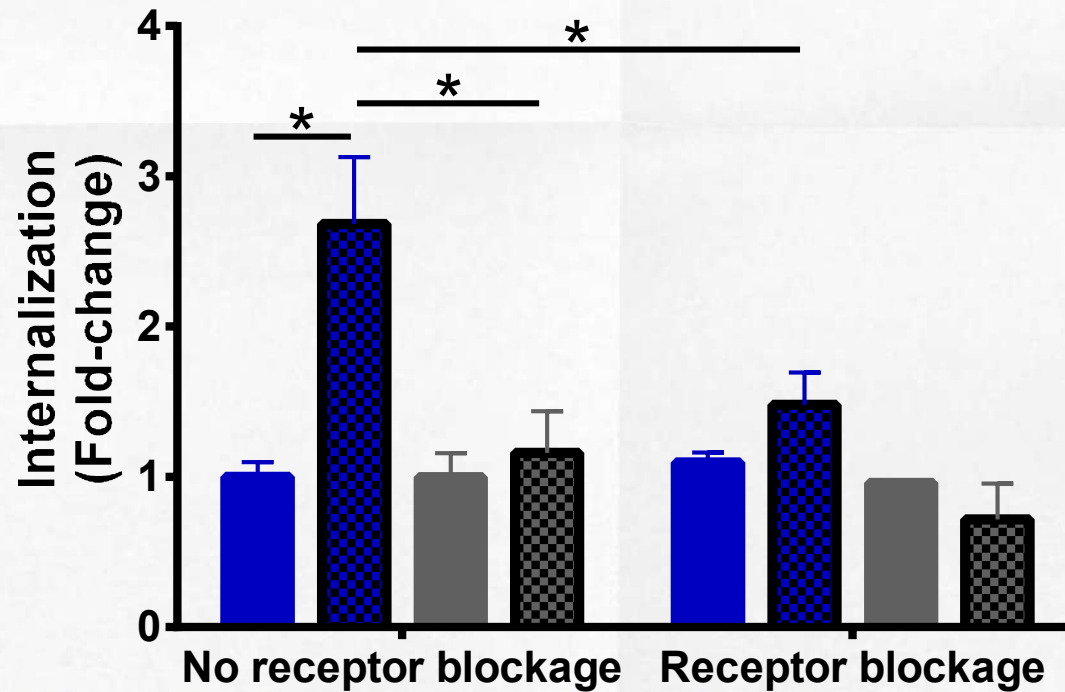


Polymeric Micelles-Niclosamide:CD44v6 Fab – *in vitro* results



Internalization: Fab-CD44v6 PM surface modification increase internalization in CD44v6+ (CSC) population

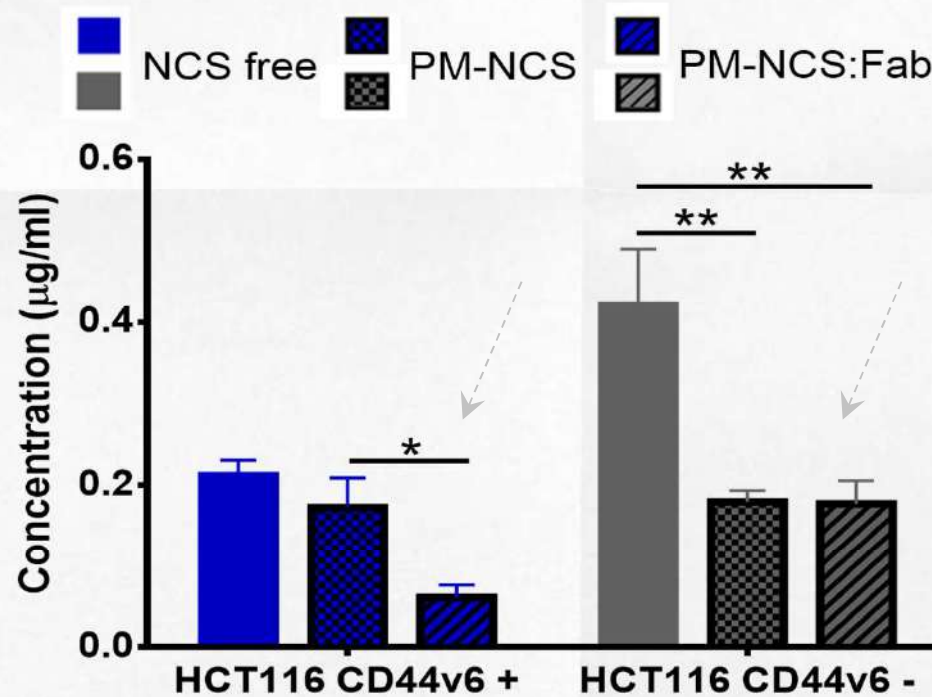
■ CD44v6 + PM ■ CD44v6 - PM
■ CD44v6 + PM:Fab ■ CD44v6 - PM:Fab



Polymeric Micelles-Niclosamide:CD44v6 Fab – *in vitro* results



Efficacy: NCS encapsulation into PM increase its efficacy and Fab presence increase the efficacy in CD44v6+ (CSC) population

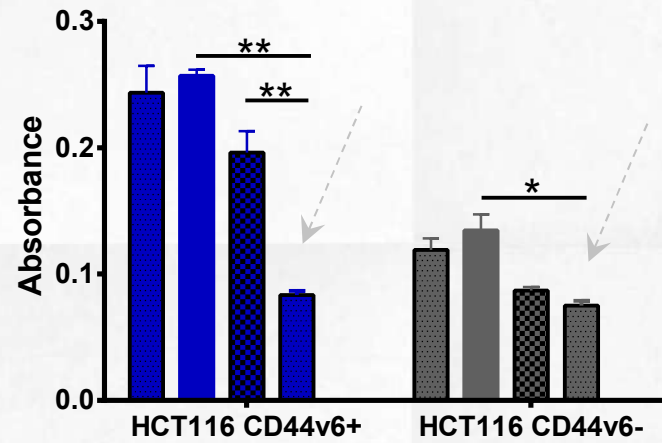


Polymeric Micelles-Niclosamide:CD44v6 Fab – *in vitro* results



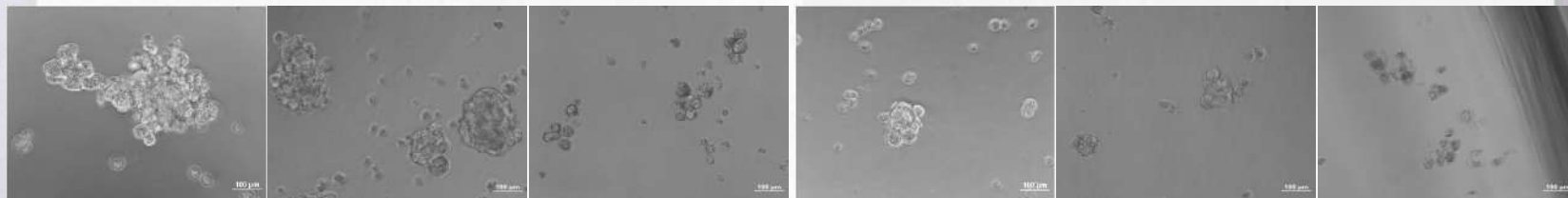
Efficacy: PM-NCS:Fab impairs colonpheres formation

■ Control
 ■ NCS free
 ■ PM-NCS
 ■ PM-NCS:Fab



HCT116 CD44v6+

HCT116 CD44v6-



Control

NCS free

PM-NCS-COOH-Fab

Control

NCS free

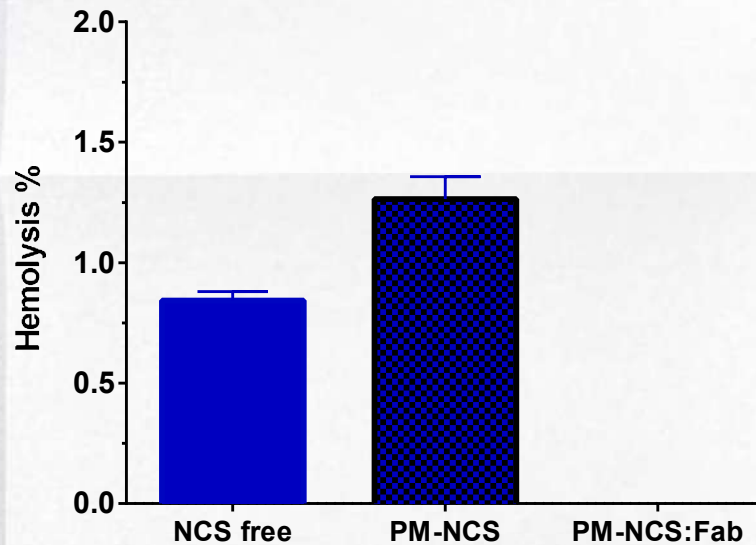
PM-NCS-COOH-Fab

Polymeric Micelles-Niclosamide:CD44v6 Fab – *in vitro* results



Hemocompatibility: PM-NCS:Fab are hemocompatible and well tolerated

Hemolysis

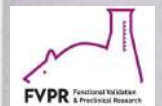


NV: < 5% of hemolysis

Plasma Coagulation

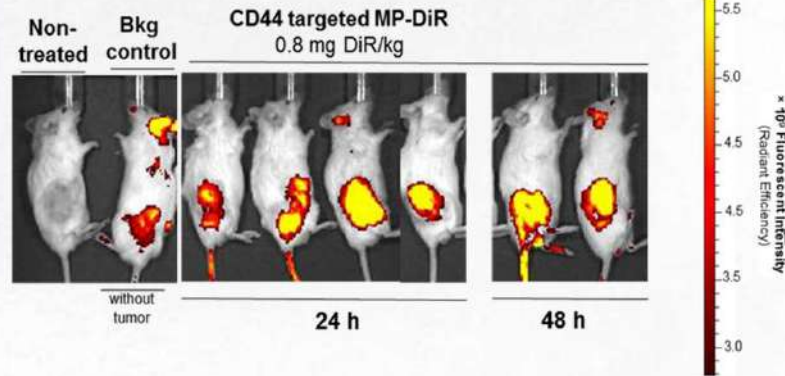
Sample	Time (s)	
	PT	TT
Healthy Patient Control	12.4 ± 0.0	15.9 ± 0.0
Sick Patient Control	19.45 ± 0.1	-
Negative Control	11.65 ± 0.1	17.3 ± 0.3
Control PBS	12.15 ± 0.1	17.45 ± 0.1
Control Methanol	13.1 ± 0.1	15.3 ± 0.1
NCS free	13.8 ± 0.1	19.05 ± 0.2
PM-NCS	12.35 ± 0.2	15.15 ± 0.1
PM-NCS:Fab	12.4 ± 0.1	15.3 ± 0.3

NV: PT ≤ 13.4s and TT ≤ 21s

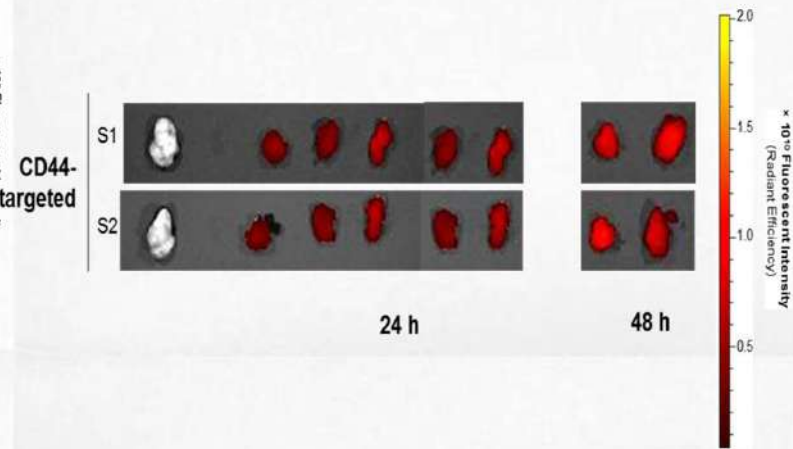


Polymeric Micelles-Niclosamide:CD44v6 Fab – *in vivo* results

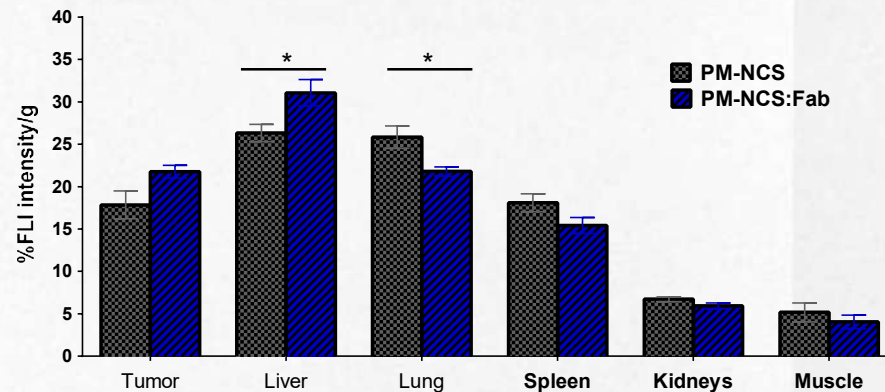
In vivo tumor accumulation



Ex vivo tumor accumulation



Ex vivo organs accumulation



Biodistribution:

PM-NCS:Fab reach and accumulates in tumor for at least 48h

NOD-SCID mice bearing subcutaneous HCT116 tumors

Polymeric Micelles-Niclosamide:CD44v6 Fab – *in vivo* results

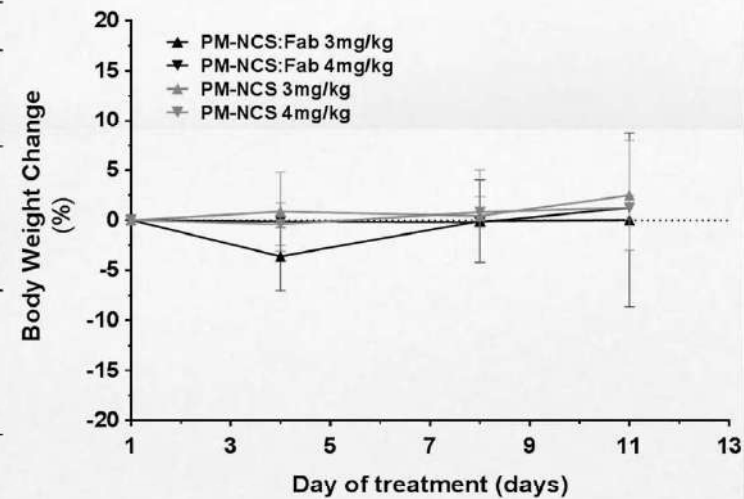


Safety: PM reduce the *in vivo* toxicity of NCS

Survival

Group	Dose (mg/kg)	Number of doses		
		1	2	3
NCS free	0.5	100%	78%	67%
	1	60%	ND	ND
PM-NCS	3	80%	80%	80%
	4	100%	100%	67%
	6	33%	0%	0%
PM-NCS:Fab	3	80%	80%	60%
	4	100%	67%	67%
	6	0%	0%	0%

Body Weight



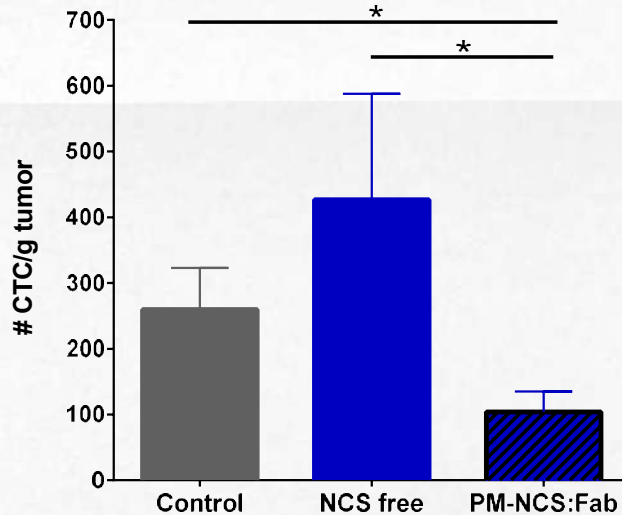
NOD-SCID mice bearing subcutaneous HCT116 tumors

Polymeric Micelles-Niclosamide:CD44v6 Fab – *in vivo* results



in vivo Efficacy .PM-NCS:Fab decrease the tumor circulating cells and are a promising therapeutic adjuvant of CRC treatment to prevent development of mCRC

Tumor circulating cells



Plasma Concentration

Group	Dose (mg/Kg)	% of dose injected
NCS free	0.5	45.33 ± 0.54
PM-NCS	4	5.69 ± 0.06
PM-NCS:Fab	4	1.13 ± 2.52

NOD-SCID mice bearing subcutaneous HT29 tumors

Conclusions



Cancer Stem Cells are responsible for resistance to treatment and tumor relapse.



Targeting CSC through nanomedicine improve treatment outcomes through reduction of circulating tumor cells and metastasis.

Aknowlegments

Drug Delivery & Targeting (DDT)

Area of Functional Validation & Preclinical Research (FVPR)

- Diana Rafael
- Francesc Martinez
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- Zamira V Díaz-Riascos
- Júlia German
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Collaborations

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UNIVERSITAT DE
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i Ciències de l'Alimentació



ciber-66n
Centro de Investigación Biomédica en Red
Bioingeniería, Biomateriales y Nanomedicina



Thank You!

Any questions?

fernanda.silva@vhir.org
fernanda.dasilva@ub.edu