## **Molecular Mechanisms of DNA** and Chromosome Damage and Repair

Chapter 2

Eric J. Hall., Amato Giaccia, Radiobiology for the Radiologist

#### Introduction

- DNA is implicated to be the principal target for the biologic effects of radiation
- The damage is produced through breakage of molecular bonds by interaction with either fast electrons or free radicals
- Depending on the type of the damage it could be lethal to the cell or can be repaired (sublethal damage)



- DNA deoxyribonucleic acid is a polymer with the monomer units of
  - There are four different types of nucleotides in DNA, differing only in the nitrogenous base: adenine (A), guanine (G), cytosine (C),



#### **Structure of DNA**

- DNA molecule has many deoxyribo-nucleotides (bases) linked in a chain-like arrangement
  - Bases are held by hydrogen bonds and are paired complimentary:
    - adenine with thymine
    - cytosine with guanine
  - Each half is a template for reconstruction of the other half







#### **Radiation damage to DNA**



Indirect action is dominant for sparsely ionizing radiation (x-rays)

- Direct action: a secondary electron interacts with the DNA
  - Indirect action: the secondary electron interacts with a water molecule to produce a hydroxyl radical (OH·)
  - About 2/3 of the x-ray damage to DNA is caused by the OH<sup>.</sup>
  - The DNA helix has a diameter of ~ 2 nm; free radicals produced in a cylinder with a diameter ~ 4 nm can affect the DNA

Radiation dan

#### **Radiation damage to DNA**

- A: Two-dimensional representation of the normal DNA helix
- B: A break in one strand is of little significance because it is repaired using the opposite strand as a template
  C: Breaks in both strands, if separated,
- are repaired as independent breaks D: If breaks occur in both strands and are

directly opposite or separated by only a few base pairs, this may lead to a double-strand break in which the chromatin snaps into two pieces





Figure 17-1. (a) Schematic representation of DNA and the tracks of an electron and  $\alpha$ particle through it. The fast electron is depicted as depositing energy at 0.25 keV/µm. (b) Schematic drawing of a charged particle track illustrating the track, ion clusters, and  $\delta$  ray spurs.



## Measuring DNA strand breaks

- Both single-strand and double-strand DNA breaks can be measured readily
- Agarose gel electrophoresis
  - DNA is negatively charged, moves in electrical field
  - The DNA is isolated from irradiated cells and the pieces are passed through a porous filter or a gel
  - Can quantify induction and repair of breaks



• Polymerized agarose is porous, allowing for the movement of DNA Scanning Electron Micrograph of Agarose Gel (1×1 µm)



• Each well in the gel is filled with buffer solution (from www.rochester.edu/.../Gel%20Electorphoresis%20Lecture%202006.ppt)

#### **Measuring DNA strand breaks**



- Example: PFGE with break repair mechanism suppressed by putting sample on ice
- The larger the dose, the more the DNA is broken up into smaller pieces
- Smaller pieces move faster and farther



## Measuring DNA strand breaks

More recent technique: radiation-induced foci assay
 – Signaling and repair proteins localize near strand breaks



## **Experimental evidence**

- A dose of radiation that induces an average of one lethal event per cell leaves 37% still viable
- For this dose (1-2 Gy) the number of DNA lesions per cell detected immediately:
  - Base damage > 1,000; Single-strand breaks ~1,000
     Double-strand breaks ~ 40
- Cell killing does not correlate at all with singlestrand breaks, which can be easily repaired
- It relates better to double-strand breaks, due to induced chromosome aberrations

## **DNA repair pathways**

- Mammalian cells have developed a number of specialized pathways to sense and repair DNA damage
- Depending on a type of damage (base damage, SSB, DSB, sugar damage, crosslinks) different mechanisms are invoked
- Stage of a cell cycle also affects these pathways



#### **DNA repair pathways**



FIGURE 2.8 Illustration showing that nonhomologous recombination occurs in the G<sub>1</sub> phase of the cell cycle, at which stage, there is no sister chromatid to use as a template for repair. In contrast, homologous recombination occurs in the S and G<sub>2</sub> phases of the cell cycle, when there is a sister chromatid to use as a template in repair.

- DSB breaks (most lethal) are repaired by homologous recombination repair (HRR) or nonhomologous end joining (NHEJ) mechanisms depending on the phase of cell cycle
- HHR provides more reliable repair, but errors are possible in both mechanisms

### **Cell mitosis**

- Cell mitosis goes through several phases:
- Interphase: cell growth; near the end, the chromosomes of the cell duplicate in preparation for cell division
- Prophase: the chromosomes coil, becoming short and thick; the spindle fibers attach to the centromeres of the chromosomes and to both ends of the cell
- Metaphase: all of the chromosomes line up across the cell center
- Anaphase: the chromosomes separate, one copy of each is pulled to each end of the cell by the spindle fibers
- Telophase: a new nuclear membrane forms in each daughter cell







#### 4

#### **Radiation-induced aberrations**



Formation of a deletion by ionizing radiation in an interphase chromosome. After two breaks occur in such a way as to isolate a loop of DNA, the "sticky" ends rejoin, and the deletion is lost at a subsequent mitosis because it has no centromere (may include the loss of a tumor suppressor gene, leading to cancer)

#### **Radiation-induced aberrations**



- Frequency of chromosomal aberrations (dicentrics and rings) is a linear-quadratic function of dose because the aberrations are the consequence of the interaction of two separate breaks
- At low doses, both may be caused by the same electron; the probability of an aberration is ~D
- At higher doses, the two breaks are more likely to be caused by separate electrons; the probability of an exchange aberration is ~D<sup>2</sup>

#### **Cell Survival Curves**

Chapter 3

Eric J. Hall., Amato Giaccia, Radiobiology for the Radiologist

#### Introduction

- A cell **survival curve** describes the relationship between the radiation dose and the proportion of cells that survive
- "Survival" could have different meanings, e.g. if cell is not capable to divide - it did not survive (mitotic death)

## Mechanisms of cell death after irradiation

- The main target of radiation is cell's DNA; single breaks are often reparable, double breaks lethal
- Mitotic death cells die attempting to divide, primarily due to asymmetric chromosome aberrations; most common mechanism
- Apoptosis programmed cell death; characterized by a predefined sequence of events resulting in cell separation in apoptotic bodies
- Bystander effect cells directly affected by radiation release cytotoxic molecules inducing death in neighboring cells



#### **Cell survival curves**

- The capability of a single cell to grow into a large colony is a proof that it has retained its reproductive integrity
- Cell survival curves usually are presented in the form with dose plotted on a linear scale and surviving fraction on a log scale Straight-line dependence means that the surviving fraction is an exponential function of dose
- At higher doses the curve bends













#### Survival curves and LQ model

- Parameter α reflects intrinsic radio-sensitivity of cells, defining how many logs (base e) are killed or sterilized per Gray in a non-repairable way
- Parameter β represents a repairable portion of damage, requiring ~6 hours for complete repair
- When radiation is delivered in multiple fractions the initial portion (shoulder) of the curve is repeated (providing that fractions are separated by time interval long enough for complete repair of sublethal damage)

#### $\alpha/\beta$ ratios

• If the dose-response relationship is adequately represented by LQ-model:

$$S \sim e^{-\alpha D - \beta D^2}$$

- The dose at which  $\alpha D = \beta D^2$ , or  $D = \alpha/\beta$
- The  $\alpha/\beta$  ratios can be inferred from multi-fraction experiments
- The value of the ratio tends to be
  - larger (~10 Gy) for early-responding tissues
     lower (~2 Gy) for late-responding tissues



• In general, squamous cell carcinoma cells are more resistant than sarcoma cells





## Genetic control of radiosensitivity

- A number of genes is involved in determining radiosensitivity of mammalian cells
- In many cases this sensitivity has been related greatly reduced ability to repair double-strand DNA breaks
- Some of the inherited human syndromes are associated with high radiosensitivity
  - Ataxia telangiectasia (AT), Down's syndrome, etc.

## **Radiosensitivity of mammalian** cells vs. microorganisms



- Mammalian cells are more radiosensitive mainly due to their larger DNA content
- Simpler microorganisms are resistant up to very high doses

#### **Multi-fraction regimen**

- · Because multi-fraction regimens are used most often in clinical radiotherapy, it is frequently useful to think in terms of an *effective* survival curve
- If a radiation dose is delivered in a series of equal fractions, separated by sufficient time for repair of sublethal damage between doses, the effective dosesurvival curve becomes an exponential function of dose

$$S = \frac{N}{N_0} = e^{-D/I}$$



# • The D<sub>0</sub> of the effective

- survival curve, defined to be the dose required to reduce the fraction of cells surviving to 37% (e<sup>-1</sup>=0.37), has a value close to 3 Gy for cells of human origin
- This is an average value and can differ significantly for different tumor types

## **Calculations using cell survival** curves



- D<sub>0</sub> is the dose required to reduce the fraction of cells surviving to 37% (e<sup>-1</sup>=0.37)
- The dose to kill 90% of the cell population D<sub>10</sub> is often used in calculations:  $D_{10}=ln(10)D_0=2.3D_0$

## **Calculation of tumor cell kill** Example 1

• A tumor consists of 10<sup>9</sup> clonogenic cells. The effective dose-response curve, given in daily dose fractions of 2 Gy, has no shoulder and a  $D_0 = 3$  Gy. What total dose is required to give a 90% chance of tumor cure?

$$D_{10} = \ln 10 \times D_0 = 2.3 \times D_0 = 2.3 \times 3 = 6.9Gy$$

The total dose for 10 decades of cell killing is:  $10 \times 6.9 = 69 \text{ Gy}$ 

## **Calculation of tumor cell kill** Example 2

- Suppose that, in the previous example, the clonogenic cells underwent three cell doublings during treatment. About what total dose would be required to achieve the same probability of tumor control?
- Three cell doublings would increase the cell number by  $2 \times 2 \times 2 = 8$
- Consequently, about one extra decade of cell killing would be required, corresponding to an additional dose of 6.9 Gy. Total dose is 69 + 6.9 = 75.9 Gy.