# Generalized Net Model of the Prostate Cancer Early Stages of Development



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#### Facts about (prostate cancer) and its treatment



The most frequent non-skin cancer diagnosed in males 1 600 000 cases annually



The second most common reason for cancer-related death in males 366 000 deaths annually



The two main obstacles in front of major

advances in prostate cancer research:

the limited efficacy in cases of metastatic disease, and



the observed significant overtreatment for clinically indolent cases, that never have clinical consequences during the life-time of the patient.

Three different stages of development



Precancerous states such as **atypical small acinar proliferation (ASAP**) and high-grade intraepitelial neoplasia (HGPIN), defined by the hyperplasia of acinar luminal cells and progressive disruption and loss of basal cells layer;

ASAP and HGPIN are believed to be precursor lesions of prostate cancer owing to two facts, based on significant evidence:

of prostate cancer, identified on the basis of molecular, pathological, clinical and imaging characteristics

Androgen-dependent prostate cancer, characterized by the complete loss of basal cells layer and the overt malignant microscopic phenotype; because at this stage prostate cancer is still and rogendependent, it is sensitive to androgen deprivation therapy (ADT); and

Androgen-independent (castration resistant) prostate cancer, which is an inevitable step in natural progression of prostate cancer and is insensitive to ADT.

- epidemiological data that connects 1) their existence with following finding of invasive carcinoma during follow-up, and
- microscopic structural resemblance of 2) epithelial cells of precancerous lesions and prostate cancer; and their colocalization in the prostate tissue, as well as shared genetic changes, vastly investigated in the last decade.

false false true  $Z_6 = \langle \{l_6, l_{17}, l_{20}\}, \{l_{15}, l_{16}, l_{17}\},$  $_{7}|W_{17.15}$  true true  $l_{20}$  false false true

#### $Z_7 = \langle \{l_2, l_7, l_9, l_{11}, l_{13}, l_{16}, l_{20}, l_{22}, l_{24}\}, \{l_{18}, l_{19}, l_{20}, l_{21}, l_{22}\},\$

 $l_{19} \quad l_{20}$  $l_{21}$   $l_{22}$ false false false false true false false false false true false false false false true  $|l_{13}|$  false false false false true,  $\rangle$ .  $l_{16}$  false false false false true  $l_{20}$  false false false false true  $l_{22}|W_{22,18}|W_{22,19}|W_{22,20}|W_{22,21}|true$  $l_{24}$  false false false false true



## Generalized net model

In the paper, we propose a generalized net model of the early stages of prostate cancer development through the different stages of precursor lesions, incorporating the influence of endocrine, respiratory, gastro-intestinal and circulatory system on this process.

The GN model contains 8 transitions, 26 places and 12 types of tokens.



This GN model represents a broad frame in which different genetic events and the influence of the surroundings as well as regulatory systems in the human body can define their interactions in

early stages of prostate cancer development. This model should be a sound basis for gaining additional insight on the subject, helping to elucidate multiple and complex connections and correlations.

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