CARTopiaX: an Agent-Based Simulation of CAR T-Cell Therapy built on BioDynaMo

Wrap-up of Google Summer of Code Project 2025

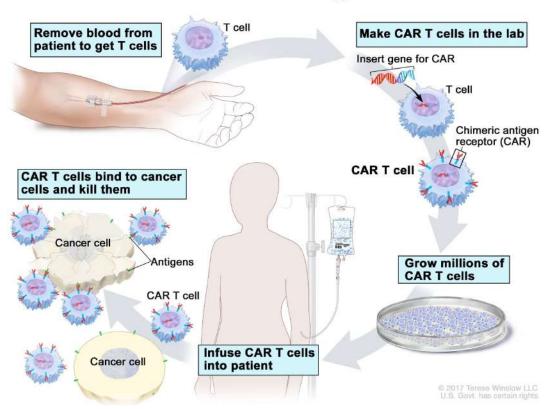


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CAR T-cell Therapy

CAR T-cell Therapy



CAR T-cell therapy: A type of immunotherapy that engineers T-cells to recognize and kill cancer cells.

Image ref:

https://www.cancer.gov/publications/diction aries/cancer-terms/def/car-t-cell-therapy

CAR T-cell Therapy: the Challenge

- It has been proven effective in leukemia and other hematological cancers.
 - In the literature, many robust models, typically based on differential equations, simulate CAR-T treatment in blood cancers.
- However, CAR T still remains limited in solid tumors due to unique tumor microenvironmental factors.
 - Researchers need models to try different treatment techniques and scenarios in order to improve CAR T performance. However, very few models exist for these types of cancers, and much less data is available.



State-of-the-art model

- Agent-Based Modeling (ABM) is a computational approach in which individual entities, such as cells, are represented as autonomous agents with defined behaviors and interactions. This makes it particularly suitable for studying the complex local dynamics of solid tumor microenvironments.
- "In silico study of heterogeneous tumour-derived organoid response to CAR T-cell therapy" (Nature) presents an ABM simulating CAR T-cell therapy in tumor-derived organoids.
 - Calibrated to replicate experimental observations from wet-lab studies.
 - Enables evaluation of multiple therapeutic strategies
 without the cost or time of laboratory experiments.
 - Captures intricate cell-cell and microenvironmental interactions.

www.nature.com/scientificreport

scientific reports

Orsolv for updates

OPEN In silico study of heterogeneous tumour-derived organoid response to CAR T-cell therapy

Luciana Melina Luque [12], Carlos Manuel Carlevaro 23, Enrique Rodriguez-Lomba 8. Enrique Lomba 5

Chimeric antigen receptor (CAB) T-cell threapy is a promising immunotherapy for treating concers. This method consists in modifying the patients' T-cells to directly target antigen-presenting cancer cells. One of the barriers to the development of this type of therapies, is target antigen heterogeneity. It is thought that intratumous heterogeneity is one of the leading determinants of therapeutic resistance and treatment failure. While understanding antiene heterogeneity is important for effective modernments.

Luque, L.M., Carlevaro, C.M., Rodriguez-Lomba, E. et al. In silico study of heterogeneous tumour-derived organoid response to CAR T-cell therapy. *Sci Rep* 14, 12307 (2024).

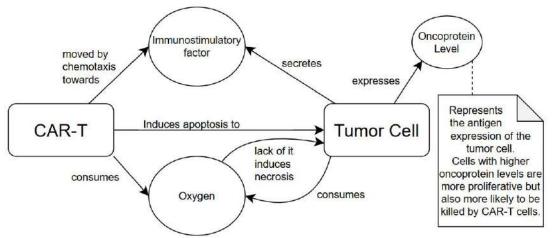
https://doi.org/10.1038/s41598-024-63125-5

The Project: CAR-T ABM on BioDynaMo

- Although Luciana Melina Luque et al. present a significant advancement from the biological perspective, we observe that aspects such as execution performance, code readability, extensibility, and maintainability could still be improved.
- Objective: Develop an agent-based simulation using the mathematical framework from the Nature paper to replicate its results. The simulation is built on BioDynaMo*, a high-performance, open-source platform designed for large-scale, modular, and efficient biological modeling.
- Key Advantages in contrast to the previous model:
 - <u>Faster simulations</u>: Quickly run scenarios to enable rapid iteration, robust analysis and **faster hypothesis testing**.
 - Clean, readable code: Built with C++ best practices, making it easy to understand, maintain and adapt for new experiments.
 - Extensible design: A modular structure supports easy customization, encourages collaboration, and fosters a growing open-source ecosystem for exploring new scenarios and adding relevant elements in CAR T research.

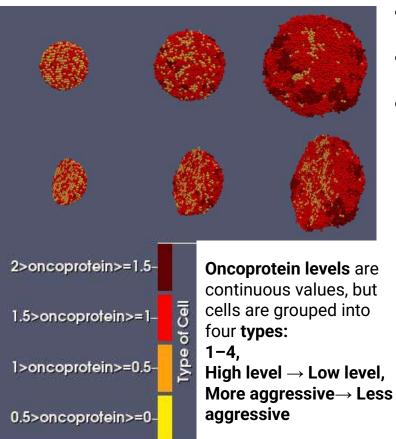
^{*:} BioDynaMo: https://doi.org/10.1093/bioinformatics/btab649 and https://doi.org/10.1145/3572848.3577480

CARTopiaX: Quick Overview

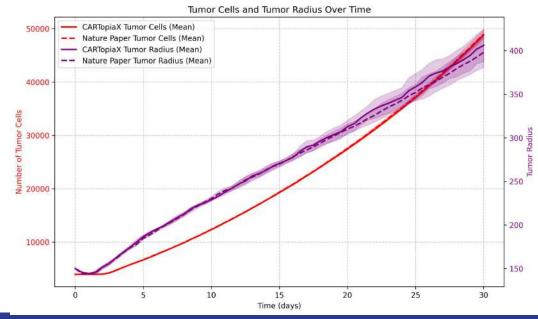


- Tumor inspired by and calibrated using liver carcinoma data.
- Main components implemented:
 - Chemical diffusion module solving the corresponding differential equations, with agents consuming and secreting substances.
 - Forces module computing repulsion between overlapping cells and adhesion dynamics.
 - Tumor cell agent with state control, volume changes, and division influenced by oxygen and oncoprotein levels, as well as apoptosis and necrosis with swelling and lysis phases.
 - CAR T-cell agent that moves via chemotaxis toward tumor cells and engages in stochastic CAR T-tumor interactions, including attachment, apoptosis induction, and mechanisms of cancer cell resistance and escape.
 - Module for user-defined hyperparameter configuration.

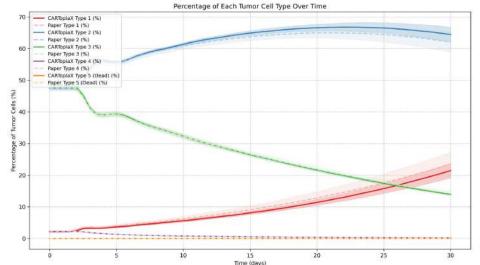
30-day evolution of a 150 µm radius tumor with no CAR T-cell treatment



- All graphs compare CARTopiaX results with the Nature paper model, demonstrating a successful replication.
- All simulations in this presentation were run five times to ensure statistical validity.
- The lines represent the average results, and the shaded areas indicate the standard deviation.

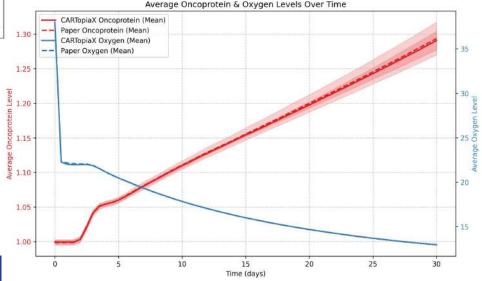


30-day evolution of a 150 µm radius tumor with no CAR T-cell treatment

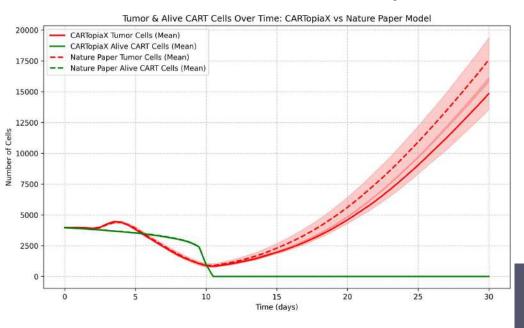


- The oxygen levels lessen: more cells means more oxygen consumption.
- The average oncoprotein level increases: cells with higher levels are more proliferative and since the oncoprotein is inherited in division the average value goes up in time.

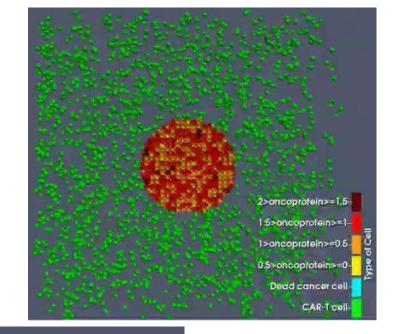
- As the tumor grows:
 - Type 1 cells: they are the **most proliferative** so their proportion in the tumor **increases**.
 - Type 3-4 cells: divide less frequently and lose oxygen in a resource-competitive environment. Therefore become less and less common.

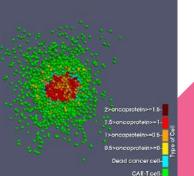


One dose of scale 1:1, 30-day evolution



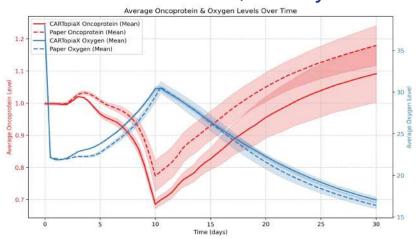
- A single dose containing the same number of CAR T cells as tumor cells is administered on day 0.
- Dead and resistant cells form a shield around the solid tumor, hindering CAR T-cell infiltration and therefore its effectiveness.

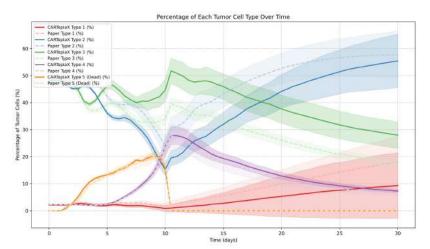




<u>Visualization of a sliced tumor</u> <u>with CAR-T cells (in green) in</u> <u>ParaView</u>

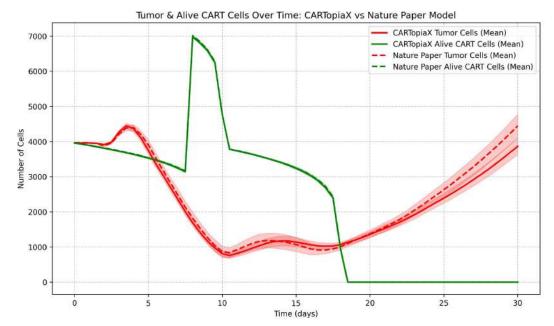
One dose of scale 1:1, 30-day evolution



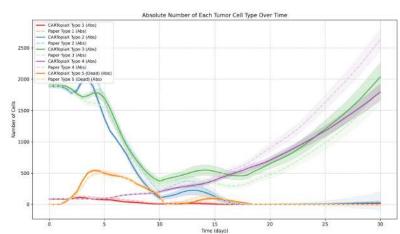


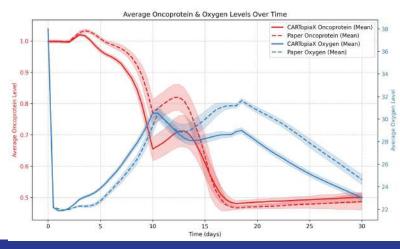
- Even though the graphs of CARTopiaX and the Nature paper model do not always overlap, this is due to substantial known differences in their modeling approaches and stochastic nature. What matters is that the overall behaviors are accurately replicated, as scientists are primarily interested in these peaks and trends when designing treatments.
- CAR-T cells are administered on day 0 and die stochastically until at most day 10.
- <u>Before day 10</u>: CAR-T cells are still present.
 - Oxygen levels increase as both CAR T and tumor cells die, leading to lower overall oxygen consumption.
 - The average **oncoprotein level and Type 1 and 2 cells decrease rapidly**, since CAR T-cells preferentially kill the most aggressive cancer cells.
- After day 10: CAR T-cells are completely gone.
 - Oxygen levels decrease again as the tumor resumes growth.
 - Oncoprotein levels rise, and Type 1 and 2 cells increase their proportion in the tumour at the expense of Type 3 and 4, as high-expressers proliferate faster.

Two doses with scale 1:1, 30-day evolution

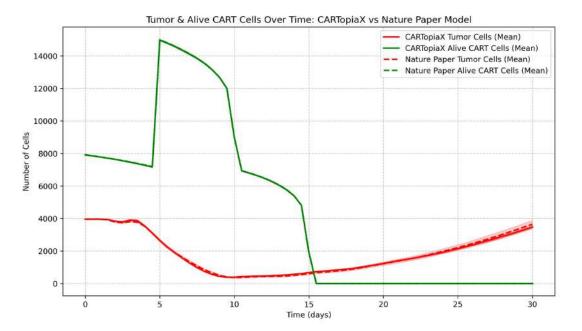


- Two-Dose Treatment: Administration of CAR T-cells in each dose equal to the number of cells in the initial tumor, delivered on day 0 and day 8.
- On day 30 there are around 4000 tumor cells ->this treatment is much more effective than applying a single 1:1 dose on day 0.





Example of replicated result: Less is better, increasing cellular dosage does not always increase efficacy

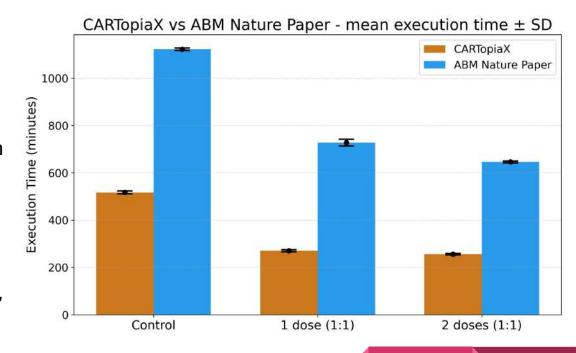


Increasing CAR T-cell dosage does **not necessarily improve** tumor killing and can **increase toxicity**. The model suggests two doses at a 1:1 CAR T-to-cancer cell ratio, balancing effectiveness and safety while minimizing inactive 'free' CAR T-cells.

- Two-Dose Treatment:
 Each dose contains
 CAR T-cells in a quantity
 twice the initial tumor cell
 count, delivered on day 0
 and day 5.
- By day 30, the number of tumor cells is roughly the same as before, despite using twice the amount of CAR T-cells.

Preliminary Performance Comparison:

- Time comparison for a 30-day simulation with 3957 initial cancer cells and:
 - No CAR-T treatment.
 - 1 Dose of 3957 CAR-T cells on day 0.
 - 2 Doses of 3957 CAR-T cells on days 0 and 8.
- Simulations were run 5 times varying the seed.
- Hardware used: AMD Ryzen 5 3600,
 6 cores / 12 threads, 16 GB RAM



CARTopiaX runs more than twice as fast, and we expect even greater gains once profiling and parameter tuning are applied.

Possible future research lines and model expansion

- One of <u>CARTopiaX</u>'s main advantages is its easy configuration, modularity, and <u>extensible design</u>.
- After successfully achieving the objectives of this Google Summer of Code, our intention is to extend the model and address biologically relevant questions of interest to researchers.
- These ideas are oriented toward increasing the model's impact and laying the groundwork for future publications.

