Modeling bacteria-based therapy in tumor spheroids

Pietro Mascheroni^a, Michael Meyer-Hermann^{a,b,c,*}, Haralampos Hatzikirou^{a,*}

^aBraunschweig Integrated Centre of Systems Biology and Helmholtz Centre for Infection Research, Braunschweig, Germany.

^bCentre for Individualized Infection Medicine, Hannover, Germany.

^cInstitute for Biochemistry, Biotechnology and Bioinformatics, Technische Universität Braunschweig.

Abstract

Tumor-targeting bacteria elicit anticancer effects by infiltrating hypoxic regions, releasing toxic agents and inducing immune responses. As the mechanisms of action of bacterial therapies are still to be completely elucidated, mathematical modeling could aid the understanding of the dynamical interactions between tumor cells and bacteria in different cancers. Here we propose a mathematical model for the anti-tumor activity of bacteria in tumor spheroids. We consider constant infusion and time-dependent administration of bacteria in the culture medium, and analyze the effects of bacterial chemotaxis and killing rate. We show that active bacterial migration towards tumor hypoxic regions is necessary for successful spheroid infiltration and that intermediate chemotaxis coefficients provide the smallest spheroid radii at the end of the treatment. We report on the impact of the killing rate on final spheroid composition, and highlight the emergence of spheroid size oscillations due to competing interactions between bacteria and tumor cells.

Keywords: Cancer, Bacterial therapy, Mixture theory, Chemotaxis, Space competition

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^{*}Correspondence: mmh@theoretical-biology.de (M.M.H.); haralampos.hatzikirou@helmholtz-hzi.de (H.H.)

1 1. Introduction

Cancers display huge variability between different patients and even in 2 the same patient. Nonetheless, cancer cells share a finite set of hallmarks 3 such as sustained proliferation, invasion and metabolic reprogramming, which shape their behavior in solid tumors (Hanahan and Weinberg, 2011). Among 5 other hallmarks, tumor cells are known to recruit new blood vessels to sustain their proliferation, in a process known as *tumor angiogenesis* (Folkman, 1971). This neovasculature is generally altered in terms of architecture and morphology of the vessels, leading to poor perfusion of certain areas of the 9 tumor (Carmeliet and Jain, 2000). Hypoxic regions are thus created and 10 maintained during tumor development, concurring to the progression of can-11 cer cells towards malignant phenotypes (Vaupel and Mayer, 2007). More-12 over, low nutrient levels can lead to cell quiescence, a situation in which 13 tumor cells delay metabolic activities and become less sensitive to standard 14 chemotherapies (Challapalli et al., 2017). Such hypo-perfused areas are gen-15 erally associated with poor patient outcome but, on the other hand, could 16 be exploited for tumor targeting (Wilson and Hay, 2011). The same hypoxic 17 areas provide indeed a niche for bacteria to colonize the tumor and exert a 18 therapeutic action (Forbes, 2010; Zhou et al., 2018). The use of bacteria for 19 cancer therapy dates back hundreds of years, with doctors reporting tumor 20 regression in several patients (Kramer et al., 2018). However, such treatments 21 also caused some fatalities and the limited understanding of the mechanisms 22 of action of these therapies shifted research efforts towards other strategies 23 - especially radiotherapy (Kramer et al., 2018). In the last few years the 24 use of live bacteria for cancer treatment has gained new interest, and several 25 bacterial strains have been tested in animal models and even advanced to 26 clinical trials (Torres et al., 2018). Nevertheless, clinical development of such 27 therapies is still facing significant issues due to infection-associated toxicities 28 and incomplete knowledge of infection dynamics (Kramer et al., 2018; Zhou 29 et al., 2018). 30

Mathematical modeling emerges as a promising candidate to assist the understanding of the mechanism of action of bacterial therapy in cancer. Mathematical models have been applied in the context of cancer to elucidate its progression and treatment (Byrne, 2010; Altrock et al., 2015). The authors in (Kasinskas and Forbes, 2006) performed experiments to quantify the accumulation of bacteria in an *in vitro* tumor tissue. Using fluorescent microscopy they measured the accumulation of *Salmonella typhimurium* into

cylindroids of different size. Their results were fitted to a mathematical 38 model quantifying bacterial growth and infiltration in the cellular aggregate, 39 showing that bacteria accumulate for longer times in larger cylindroids. Us-40 ing a similar approach in a different *in vitro* setting, another group analyzed 41 the impact of bacterial motility on tumor accumulation (Toley and Forbes, 42 2011). They considered different bacterial strains belonging to Salmonella 43 typhimurium and Escherichia coli, and observed that only the most motile of 44 them was able to colonize the tumor at low inoculation densities. Through a 45 mathematical model informed by the experiments the authors showed that 46 bacterial dispersion provides deeper infiltration in the tumor, whereas bac-47 terial growth leads to increased bacterial densities. A cytotoxic protein in 48 *Escherichia coli* was cloned to investigate its effects on tumors as discussed in 40 (Jean et al., 2014). The authors of the article showed that bacteria were able 50 to secrete this protein when injected in tumors, leading to cell death and tu-51 mor volume reduction. The authors measured the distribution of the protein 52 in the tissue and observed a large necrotic area following treatment. They 53 introduced a mathematical model for molecular transport and showed that 54 the protein efficacy in killing cancer cells primarily depends on the colony size 55 and rate of production. More recently, a mathematical model for immune 56 recruitment in tumors by bacterial infections was proposed in (Hatzikirou 57 et al., 2017). Calibrated on mice data, the model showed that increasing 58 bacterial loads does not always produce long-term tumor control, suggesting 59 the existence of optimal bacterial loads depending on tumor size. In addi-60 tion, the model predicted that the combined effect of intermediate bacterial 61 loads and low administration of a proinflammatory cytokine may lead to im-62 proved therapeutic outcomes. The infiltration of nanoparticles and bacteria 63 in *in vitro* tumors was analyzed in (Suh et al., 2018). Through mathematical 64 modeling the authors showed that bacteria display higher effective diffusivi-65 ties compared to nanoparticles, suggesting their use as drug vectors in future 66 cancer treatments. Notably, they validated their modeling procedure with 67 experiments using tumor spheroids. The latter are aggregates of tumor cells 68 (approximately spherical) that can be grown in vitro, mimicking the growth 69 dynamics and generation of hypoxic areas in small avascular tumors. 70

Here we describe a mathematical model for bacteria-based cancer therapy
within tumor spheroids. The model is formulated in the context of mixture
theory, a continuum theory with a long history of applications to biological
problems - see for example Ambrosi and Preziosi (2002); Breward et al. (2001,
2002, 2003); Byrne and Preziosi (2003); Chaplain et al. (2006); Preziosi and

Tosin (2009) and the recent reviews of Siddique et al. (2017); Pesavento 76 et al. (2017). Our aim is to evaluate the impact of bacterial chemotaxis 77 and anti-tumor activity on spheroid size and composition. We consider two 78 regimes, i.e. a constant infusion of bacteria in the culture medium and an 79 administration after the spheroid is fully established. We describe the effects 80 of the treatment on the behavior of the spheroid constituents, e.g. tumor 81 cells and bacteria volume fractions, at different time points and over the 82 spheroid radius. 83

The remainder of the paper is organized as follows. In Section 2 we describe the mathematical model and its derivation. In Section 3 we present model results, first focusing on continuous infusion of bacteria and then analyzing time-controlled bacterial administration. Finally, in Section 4 we discuss the biological implications of the results and suggest new research directions.

90 2. Mathematical model

We propose a mathematical model describing the impact of bacterial cells 91 on tumor spheroid growth. The model is based on mixture theory, follow-92 ing the approach discussed in Preziosi (2003); Byrne (2012). Specifically, we 93 follow the derivation in Boemo and Byrne (2019) which deals with a mix-94 ture model for macrophage-based therapies in tumor spheroids. We describe 95 the tumor as being composed of three main constituents (or *phases* in the 96 language of mixture theory): tumor cells (TCs), bacteria and extracellular 97 material. The variables referring to these quantities will be identified by the 98 indexes c, b and f, respectively. The model equations are derived by applying 99 conservation of mass and linear momentum to each phase. Then, we close the 100 model by imposing suitable constitutive assumptions regarding the material 101 properties of the phases and their interaction terms. 102

¹⁰³ The balance of mass for each phase reads:

$$\partial_t \phi_{\mathbf{i}} + \operatorname{div}\left(\phi_{\mathbf{i}} \boldsymbol{v}_{\mathbf{i}}\right) = S_{\mathbf{i}},\tag{1}$$

¹⁰⁴ in which ϕ_{i} , v_{i} and S_{i} are the volume fraction, velocity and mass ex-¹⁰⁵ change term related to the i-th phase (i = c, b, f). Note that Equation (1) ¹⁰⁶ implicitly assumes that the phases have the same constant mass density. In ¹⁰⁷ the following we will also assume that the mixture is closed with respect to ¹⁰⁸ mass, so that mass can only be converted from one phase to the other, i.e. ¹⁰⁹ $S_{\rm f} = -S_{\rm c} - S_{\rm b}$. In mixture theory velocity fields are determined by considering the mechanical response of the phases to mutual interactions. Neglecting inertial effects, as usually done for growth phenomena (Preziosi, 2003; Byrne, 2012), the balance of linear momentum can be written as:

div
$$(\boldsymbol{\sigma}_{i}) + \sum_{i \neq j} \boldsymbol{m}_{ij} + p \operatorname{grad}(\phi_{i}) = \boldsymbol{m}_{i}.$$
 (2)

Here σ_i is the partial stress tensor of the i-th phase, m_{ij} represent the forces exerted on the i-th phase by the j-th phase, and m_i describes an external force acting on the i-th phase (i, j = c, b, f). Note that, for the action-reaction principle, $m_{ij} = -m_{ji}$. Finally, the terms $p \operatorname{grad}(\phi_i)$ represent interfacial effects between phases, with p being the interfacial pressure (Byrne, 2012). In this modeling framework, p emerges as a Lagrange multiplier due to the saturation constraint

$$\sum_{i=c,b,f} \phi_i = 1, \tag{3}$$

meaning that we assume that there are no empty spaces within the mixture (Preziosi, 2003; Byrne, 2012).

We conclude the set of governing laws by stating an equation for the normalized nutrient concentration n in the mixture, i.e. the tumor:

$$\partial_t n = D_{\rm n} {\rm div} \, ({\rm grad} \, n) + S_{\rm n}, \tag{4}$$

in which D_n is the nutrient diffusion coefficient and S_n represents the nutrient mass exchange with the model phases. In the following we will consider a single nutrient, i.e. oxygen.

128 2.1. Constitutive relationships

We close the model by selecting suitable constitutive assumptions. First, we assume that the interaction terms m_{ij} depend linearly on the relative phase velocities (Preziosi, 2003; Byrne, 2012):

$$\boldsymbol{m}_{ij} = -\mu \phi_i \phi_j \left(\boldsymbol{v}_i - \boldsymbol{v}_j \right), \qquad (5)$$

with the same linearity constant μ for all the phases (i = c, b, f). We consider only a single external force $m_{\rm b}$ acting on bacteria. This term describes bacteria chemotaxis following spatial hypoxic gradients and models active cell migration towards waste products from dying cancer cells (Forbes,
2010; Toley and Forbes, 2011). We assume a linear relationship,

$$\boldsymbol{m}_{\mathrm{b}} = \phi_{\mathrm{b}} \chi_{\mathrm{b}} \mathrm{grad} \, n,$$
 (6)

in which $\chi_{\rm b}$ describes the strength of chemoattraction.

Following Breward et al. (2001, 2002); Byrne (2012); Boemo and Byrne (2019) we consider the phases as inviscid fluids and associate an interfacial pressure to each of them. For simplicity, we take the pressure in the extracellular material to be equal to that in the fluid surrounding the spheroid, p. The partial stress tensors in Equation (2) are defined such that the interfacial pressure of each phase is given by the pressure in the extracellular material plus a correction term, specific to its phase (Boemo and Byrne, 2019):

$$\boldsymbol{\sigma}_{\rm f} = -p\boldsymbol{I},\tag{7}$$

$$\boldsymbol{\sigma}_{\rm b} = -(p + \pi_{\rm b})\boldsymbol{I},\tag{8}$$

$$\boldsymbol{\sigma}_{\rm c} = -(p + \pi_{\rm c})\boldsymbol{I},\tag{9}$$

where I is the identity tensor. The ratio π_i/μ characterizes the movement of the i-th phase in the mixture and is generally identified as the phase motility coefficient D_i (i = c, b) (Boemo and Byrne, 2019). In the following we will also define $\chi = \chi_b/\mu$ as the bacterial chemotactic coefficient.

To formulate the mass exchange terms in Equations (1) and (4) we assume the following assumptions:

 A1 TCs proliferate when oxygen is available. As soon as the latter decreases below a critical threshold, they stop proliferating and start necrosis (Chaplain et al., 2006; Gerlee and Anderson, 2007; Agosti et al., 2018).

A2 Bacteria compete with TCs for space and exert an anti-tumor effect
by a variety of mechanisms (e.g. by realising toxins and therapeutic
agents, or stimulating an immune response). (Forbes, 2010; Osswald
et al., 2015; Torres et al., 2018; Zhou et al., 2018).

A3 Bacteria die when oxygen is above a critical threshold and thrive in
 hypoxic conditions (*anaerobic* bacteria) (Toley and Forbes, 2011; Phai boun et al., 2015; Osswald et al., 2015).

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A4 TCs consume oxygen provided by the culture medium (Matzavinos et al., 2009; Grimes et al., 2014).

The resulting mass exchange terms read:

$$S_{\rm c} = \gamma_{\rm c} \phi_{\rm c} \phi_{\rm f} \mathcal{H} \left(\frac{n}{n_{\rm cr}} - 1 \right) - \delta_{\rm c} \phi_{\rm c} \mathcal{H} \left(1 - \frac{n}{n_{\rm cr}} \right) - \kappa \phi_{\rm c} \phi_{\rm b}, \tag{10}$$

$$S_{\rm b} = \gamma_{\rm b} \phi_{\rm b} \phi_{\rm f} \mathcal{H} \left(1 - \frac{n}{n_{\rm cr}} \right) - \delta_{\rm b} \phi_{\rm b} \mathcal{H} \left(\frac{n}{n_{\rm cr}} - 1 \right), \tag{11}$$

$$S_{\rm n} = -\delta_{\rm n}\phi_{\rm c}n.\tag{12}$$

Here γ_i and δ_i are the proliferation and death rate of the i-th phase respectively (i = c, b), whereas δ_n is the oxygen consumption rate. We indicate with $\mathcal{H}(\cdot)$ a smooth version of the step function, and with $n_{\rm cr}$ the critical oxygen value below which hypoxic conditions develop. Finally, we do not consider a specific form for the anti-tumor effect of bacteria and introduce an effective TC killing rate κ in the equation for $S_{\rm c}$.

170 2.2. Spherical symmetry, initial and boundary conditions

In the following we will be interested in the case of tumor spheroids, for which the assumption of spherical symmetry applies. Therefore, we enforce the problem symmetry and rewrite the equations in terms of one-dimensional, radially symmetric spherical coordinates. We introduce the radial coordinate r defining the radial distance from the center of the spheroid. Recasting Equation (1) in spherical symmetry, after imposing the saturation constraint in Equation (3), gives:

$$v_{\rm c}\phi_{\rm c} + v_{\rm b}\phi_{\rm b} + v_{\rm f}\phi_{\rm f} = 0, \tag{13}$$

in which v_i is the radial velocity of the i-th phase (i = c, b, f). Substituting Equations (5), (7)-(9) and (13) in Equation (2) we obtain for the radial velocities:

$$v_{\rm c} = D_{\rm b} \frac{\partial \phi_{\rm b}}{\partial r} + D_{\rm c} \left(1 - \frac{1}{\phi_{\rm c}} \right) \frac{\partial \phi_{\rm c}}{\partial r} + \chi \phi_{\rm b} \frac{\partial n}{\partial r}, \tag{14}$$

$$v_{\rm b} = D_{\rm b} \left(1 - \frac{1}{\phi_{\rm b}} \right) \frac{\partial \phi_{\rm b}}{\partial r} + D_{\rm c} \frac{\partial \phi_{\rm c}}{\partial r} - \chi \left(1 - \phi_{\rm b} \right) \frac{\partial n}{\partial r},\tag{15}$$

after summing over the phases in Equation (2) to express p as a function of the other model quantities (Boemo and Byrne, 2019). Substituting Equations (14)-(15) in (1) and rewriting the system in spherical symmetry leads to

$$\frac{\partial\phi_{\rm c}}{\partial t} = \frac{1}{r^2} \frac{\partial}{\partial r} \left\{ r^2 \left[D_{\rm c} \left(1 - \phi_{\rm c} \right) \frac{\partial\phi_{\rm c}}{\partial r} - D_{\rm b}\phi_{\rm c} \frac{\partial\phi_{\rm b}}{\partial r} - \chi\phi_{\rm c}\phi_{\rm b} \frac{\partial n}{\partial r} \right] \right\} + S_{\rm c}, \quad (16)$$

$$\frac{\partial\phi_{\rm b}}{\partial t} = \frac{1}{r^2} \frac{\partial}{\partial r} \left\{ r^2 \left[D_{\rm b} \left(1 - \phi_{\rm b} \right) \frac{\partial\phi_{\rm b}}{\partial r} - D_{\rm c}\phi_{\rm b} \frac{\partial\phi_{\rm c}}{\partial r} + \chi\phi_{\rm b} \left(1 - \phi_{\rm b} \right) \frac{\partial n}{\partial r} \right] \right\} + S_{\rm b}, \quad (17)$$

$$\frac{\partial n}{\partial t} = \frac{1}{r^2} \frac{\partial}{\partial r} \left(r^2 D_{\rm n} \frac{\partial n}{\partial r} \right) + S_{\rm n}.$$
(18)

Note that we do not solve for $\phi_{\rm f}$ since it can be obtained as $\phi_{\rm f} = 1 - \phi_{\rm c} - \phi_{\rm b}$ through Equation (3).

We model growth of the spheroid as a free-boundary problem, in which the outer tumor radius r = R(t) moves with the same velocity as the TC phase,

$$\frac{dR}{dt} = v_{\rm c}(R, t). \tag{19}$$

Finally, we define a set of boundary and initial conditions to close the differential problem in Equations (16)-(18). Due to the problem symmetry no-flow boundary conditions are enforced at the spheroid center, whereas we fix the values of TC volume fraction, bacterial volume fraction and normalized nutrient concentration on the spheroid boundary:

$$\partial_r \phi_c = \partial_r \phi_b = \partial_r n = 0, \quad r = 0$$
 (20)

$$\phi_{\rm c} = \phi_{\rm c0}, \quad \phi_{\rm b} = \phi_{\rm b0}, \quad n = 1, \quad r = R(t).$$
 (21)

In the following, we assume a uniform initial tumor volume fraction $\phi_{c0} =$ 0.8 across the spheroid (Byrne and Preziosi, 2003) and consider a small value for the bacterial volume fraction at the spheroid outer radius, i.e. $\phi_{b0} = 0.01$. Regarding the initial conditions, we consider a spheroid devoid of bacteria and displaying a uniform TC volume fraction and nutrient concentration over its radius:

$$\phi_{\rm c}(r,0) = \phi_{\rm c0}, \quad \phi_{\rm b} = 0, \quad n = 1.$$
 (22)

Finally, we prescribe an initial spheroid radius, i.e. $R(0) = 150 \,\mu\text{m}$.

8

| Parameter | Value | Description | Reference |
|------------------|---|-----------------------------------|----------------------------------|
| $D_{\rm c}$ | $8.64 \times 10^{-2} \mathrm{mm^2 d^{-1}}$ | TC motility coefficient | (Chaplain et al., 2006) |
| $\gamma_{\rm c}$ | $1 d^{-1}$ | TC proliferation rate | (Chaplain et al., 2006) |
| $n_{\rm cr}$ | 0.6 | Critical oxygen concentration | (Gerlee and Anderson, 2007) |
| $\delta_{\rm c}$ | $0.5 \mathrm{d}^{-1}$ | TC death rate | (Martínez-González et al., 2012) |
| $D_{ m b}$ | $5 \times 10^{-2} \mathrm{mm^2 d^{-1}}$ | Bacterial motility coefficient | (Toley and Forbes, 2011) |
| $\gamma_{ m b}$ | $15 \mathrm{d}^{-1}$ | Bacterial proliferation rate | (Gibson et al., 2018) |
| $\delta_{ m b}$ | $0.24{\rm d}^{-1}$ | Bacterial death rate | (Phaiboun et al., 2015) |
| D_{n} | $1 \times 10^2 \mathrm{mm}^2 \mathrm{d}^{-1}$ | Oxygen diffusion coefficient | (Matzavinos et al., 2009) |
| $\delta_{ m n}$ | $8.64 \times 10^3 \mathrm{d}^{-1}$ | Oxygen consumption rate | (Colombo et al., 2015) |
| χ | $[0, 8.64 \times 10^{-1}] \mathrm{mm^2 d^{-1}}$ | Bacterial chemotactic coefficient | estimated |
| κ | $[0, 10] d^{-1}$ | Bacterial killing rate | model specific |

Table 1: Summary of the parameter estimates used to carry out the model simulations.

201 2.3. Parameter estimation

The parameters used in the model simulations are reported in Table 1. 202 As we do not focus on a specific cell line we use the generic estimate for 203 TC motility and proliferation rate reported in (Chaplain et al., 2006). For 204 the critical oxygen concentration, below which cells experience hypoxic con-205 ditions, we take a value similar to the one in (Gerlee and Anderson, 2007; 206 Agosti et al., 2018). Also, we select the TC death rate in accordance to the 207 estimate in (Kolokotroni et al., 2011; Martínez-González et al., 2012). The 208 work in (Toley and Forbes, 2011) provides a value for the bacterial motility 209 coefficient and proliferation rate in *in vitro* cellular aggregates. Regarding 210 bacterial proliferation, (Gibson et al., 2018) supply a similar value using evo-211 lutionary arguments. We estimate the bacterial death rate from (Phaiboun 212 et al., 2015), in which cellular death dynamics are quantified under starva-213 tion at different bacteria densities. Finally, we use the values in (Schaller and 214 Meyer-Hermann, 2005; Matzavinos et al., 2009; Grimes et al., 2014; Colombo 215 et al., 2015; Alfonso et al., 2016) for the oxygen diffusion coefficient and con-216 sumption rate in tumor tissues. When carrying out the simulations, we vary 217 the chemotactic coefficient in the interval $[0, 8.64 \times 10^{-1}] \,\mathrm{mm^2 d^{-1}}$. Since it 218 was not possible to find in the literature an estimate for the chemotactic 219 coefficient of bacteria in tissues, we considered the value of χ in bacterial 220 solutions (Ford et al., 1991; Lewus and Ford, 2001) and divided it for the 221 ratio between the motility coefficient in solution and in tissue - about 100, 222 (Ford et al., 1991; Lewus and Ford, 2001). Since we do not consider a specific 223 mechanism for the anti-tumor activity of bacteria, we select the killing rate 224 κ to be in the interval [0, 10] d⁻¹, i.e. spanning characteristic times between 225

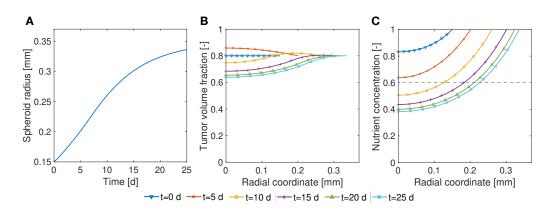


Figure 1: Spatio-temporal description of a tumor spheroid suspended in the culture medium. A Spheroid growth curve. Tumor volume fraction (**B**) and nutrient concentration (**C**) over the spheroid radius at different time points. The dashed line in **C** displays the critical nutrient level. After an initial stage of fast growth, the size of the aggregate saturates as a result of poor nutrient availability.

²²⁶ several days and a few hours.

227 3. Results

228 3.1. Growth of spheroids in culture medium

We start the analysis by considering the growth of a spheroid suspended 229 in culture medium, in the absence of bacteria. Results for this condition are 230 reported in Figure 1, using the parameters in Table 1 for the simulation. 231 The model is able to reproduce the two phases of spheroid growth usually 232 described in the literature (Conger and Ziskin, 1983; Sutherland, 1988; Vinci 233 et al., 2012). The spheroid radius (see Figure 1A) displays a first stage of 234 rapid increase, followed by a saturation phase. This behavior is detailed 235 in Figures 1B,C, showing the evolution of the tumor volume fraction and 236 nutrient concentration over the spheroid radius at different time points. The 237 tumor volume fraction, i.e. $\phi_{\rm c}$, increases over the spheroid at early time points 238 (Figure 1B). Then, as TCs consume oxygen to proliferate, its concentration 230 decreases in the centre of the aggregate (Figure 1C). When the oxygen level 240 drops below the critical threshold $n_{\rm cr}$ (dashed line in Figure 1C), TCs stop 241 proliferating and die. This results in a decrease of $\phi_{\rm c}$ in the spheroid core, 242 displayed at longer times in Figure 1B. Close to saturation, the amount of 243 cells that proliferate is balanced by the number of cells that die, turning into 244

extracellular material. Therefore, even if cell growth continues to take place 245 in the outer rim of the spheroid, it is not enough to advance the spheroid 246 front, which reaches a steady state. These results match qualitatively what 247 is observed in the experimental (Landry et al., 1982; Montel et al., 2011; 248 Grimes et al., 2014; Sarkar et al., 2018) and modeling (Ward and King, 1999; 249 Byrne and Preziosi, 2003; Ambrosi and Mollica, 2004; Schaller and Meyer-250 Hermann, 2005; Mascheroni et al., 2016; Boemo and Byrne, 2019) literature 251 for tumor spheroids and will serve as a basis for the discussion in the next 252 sections. 253

²⁵⁴ 3.2. Spheroid growth in the presence of bacteria

In this subsection, we investigate the growth of a spheroid that is co-255 cultured with bacteria immediately after its formation. From the modeling 256 point of view, this results in assuming a constant bacterial volume fraction 257 at the spheroid boundary, i.e. $\phi_{\rm b}(R,t) = \phi_{\rm b0}$. First, we analyse the case 258 of bacteria infiltrating the spheroid with different chemotactic coefficients 259 χ , without considering the anti-tumor activity of bacteria (i.e. $\kappa = 0 d^{-1}$). 260 Then, we fix the chemotactic coefficient and analyze the evolution of the 261 spheroid for increasing effectiveness of bacteria anti-tumor activity, quantified 262 by the killing coefficient κ . 263

²⁶⁴ 3.2.1. Effects of chemotactic coefficient on spheroid growth

The impact of bacterial chemotactic coefficient on spheroid infiltration 265 is shown in Figure 2. The presence of bacteria in the culture medium sig-266 nificantly influences the growth dynamics, as displayed by the growth curve 267 in Figure 2A. For low chemotactic coefficients the saturation radius of the 268 spheroid decreases. However, by increasing the chemotactic coefficient the 260 growth curve loses the saturation phase (at least for the time observed in the 270 simulation). The spheroid reaches the largest size for the highest value of 271 χ , being still in a fast-growing regime. Figure 2B shows how the tumor vol-272 ume fraction at the end of the simulation is affected by bacterial chemotaxis. 273 Bacteria progressively displace TCs for increasing values of the chemotactic 274 coefficient, leading to spheroids that are significantly depleted from TCs at 275 higher χ values. We note that chemotaxis is necessary for bacteria to effec-276 tively colonize the core of the spheroid, as displayed by the plot of bacterial 277 volume fraction at the end of the simulation in Figure 2C. Bacteria that are 278 not subject to chemotaxis ($\chi = 0 \,\mathrm{mm^2 d^{-1}}$) do not colonize successfully the 279 spheroid, and populate the aggregate through a low uniform volume fraction. 280

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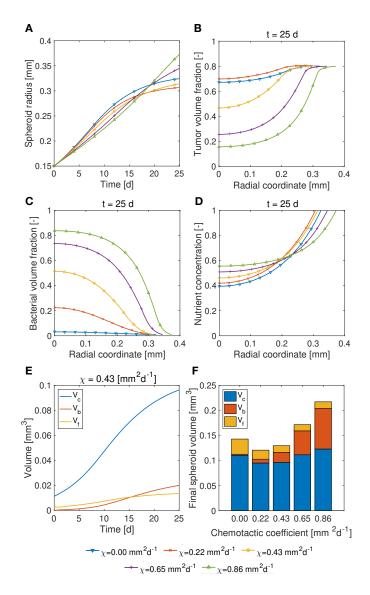


Figure 2: Influence of bacterial chemotactic coefficient on spheroid infiltration. A Spheroid growth over time. Profiles of tumor (**B**) and bacterial (**C**) volume fractions, and nutrient concentration (**D**) over the spheroid radius for different values of χ at the end of the simulation. **E** Variation of TC, bacterial and extracellular volumes over time for an intermediate value of χ . **F** Contribution of the different constituents to the final spheroid volume. The model shows that chemotaxis is necessary for bacteria to localize in the hypoxic core of the spheroid. Moreover, high chemotactic coefficients lead to spheroids with larger radii.

On the other hand, higher values of χ lead to large bacterial volume frac-281 tions in the center of the spheroid, where a hypoxic region is localized. As 282 a result, the core of these spheroids is filled with bacterial cells, as observed 283 in experimental works (Osswald et al., 2015; Suh et al., 2018). Such hypoxic 284 zones occupy most of the spheroid, as shown by the plot for the nutrient con-285 centration over the spheroid radius (Figure 2**D**). The nutrient level generally 286 elevates for higher values of the chemotactic coefficient, since in those cases 287 there are fewer TCs that consume oxygen. As displayed in Figures $2\mathbf{B}$ and 288 2C, high values of the chemotactic coefficient lead to spheroids with large 280 final radii but low TC volume fraction in the core. The growth of bacteria 290 pushes cancer cells towards the spheroid boundary, leading only a small frac-291 tion of them above the hypoxic threshold. Figure $2\mathbf{E}$ shows the evolution 292 of TC (V_c) , bacterial (V_b) and extracellular (V_f) volumes over time for an 293 intermediate chemotactic coefficient. These quantities are calculated as 294

$$V_{\rm i} = \int_{V_{\rm sf}} \phi_{\rm i} \, dV, \tag{23}$$

where the integral is performed over the spheroid volume $V_{\rm sf}$ (i = c, b, f). 295 At early time points, $V_{\rm c}$ is in a phase of fast growth, since nutrient is available 296 throughout the spheroid and bacterial presence is minimal. At later times, 297 hypoxic regions develop and TC proliferation decreases. On the contrary, 298 these conditions are favourable for bacteria, leading to a higher growth rate 299 for $V_{\rm b}$. The growth of both TCs and bacteria over time contributes to a 300 slow increase of extracellular material, as displayed by the plot of $V_{\rm f}$ over 301 time. Figure $2\mathbf{F}$ shows the contribution of TCs, bacteria and extracellular 302 fluid to the final spheroid volume. Note that lower volumes are attained 303 for intermediate chemotactic coefficients ($\chi = 0.22, 0.43 \,\mathrm{mm^2 d^{-1}}$). For these 304 cases, bacteria compete with TCs for space and lead to low TC volumes. On 305 the other hand, higher values of χ lead to considerable colonization of the 306 spheroid by bacteria, contributing to higher bacterial and spheroid volumes. 307

308 3.2.2. Effects of killing rate on spheroid growth

Figure 3 shows the influence of the killing rate κ on the growth of a tumor spheroid. For these simulations, we considered an intermediate value of the chemotactic coefficient ($\chi = 0.43 \,\mathrm{mm^2 d^{-1}}$), to allow for spheroid infiltration by bacteria. Increasing κ leads to significant changes in spheroid morphology. As shown in Figures **3A**,**B** TCs display higher volume fractions for higher values of the killing coefficient, whereas the opposite is true for bioRxiv preprint doi: https://doi.org/10.1101/683839; this version posted June 27, 2019. The copyright holder for this preprint (which was not certified by peer review) is the author/funder. All rights reserved. No reuse allowed without permission.

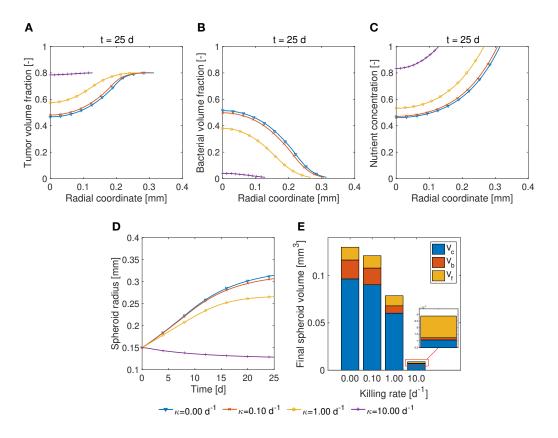


Figure 3: Influence of bacterial killing coefficient on spheroid growth. Plots of tumor (**A**) and bacterial (**B**) volume fractions, and nutrient concentration (**C**) over the spheroid radius for different values of κ at the end of the simulation. Spheroid growth curve (**D**) and contribution of the different constituents to the final spheroid volume (**E**). Increasing the killing rate leads to smaller spheroids and lower final bacterial volumes.

bacteria. Consistently with the behavior of the previous quantities, nutri-315 ent concentration (Figure 3C) increases for higher values of κ , since smaller 316 spheroids are formed and nutrient can adequately diffuse to their cores. The 317 effect of the killing rate on the spheroid radius is displayed in Figure 3D. By 318 increasing the value of κ , the growth rate of the spheroid decreases, turning 319 even to negative for the highest κ value. The final volume of the spheroids 320 decreases with increasing the cell killing rate (Figure 3E), a trend that is 321 also followed by the ratio of the bacterial to TC volumes. The extracellular 322 volume also decreases with increasing κ , indicating that spheroids denser in 323 TCs are obtained. 324

325 3.3. Administration of bacteria to established spheroids

In this subsection, we evaluate the effects of adding bacteria in the culture medium after the spheroid is fully formed, i.e. when hypoxic regions have developed. We analyze the effects of different bacterial chemotactic and killing coefficients on the behavior of the model constituents and on the overall growth of the spheroid at later times after bacteria administration.

331 3.3.1. Effects of chemotactic coefficient on spheroid growth after bacterial 332 administration

Figure 4A shows the growth curves of spheroids that have been admin-333 istered to bacteria carrying different chemotactic coefficients. The spheroid 334 grows in standard culture medium until day 25, when a bacterial administra-335 tion (black arrow) is performed. The boundary condition $\phi_{\rm b}(R,t) = \phi_{\rm b0}$ is 336 applied for three days and then bacteria are removed at day 28 (first dashed 337 line). In the absence of chemotaxis ($\chi = 0 \,\mathrm{mm^2 d^{-1}}$) the presence of bacteria 338 leads to a small perturbation in the growth curve, which is resolved at the 330 end of the simulation. On the contrary non-zero values of χ substantially al-340 ter the growth pattern, resulting in spheroids of smaller (intermediate values 341 of χ) or larger (high values of χ) final radii (Figure 4B). 342

The behavior of the different components of the model at day 28, 33 (dashed lines in Figure 5) and 53 is reported in Figure 5. TC volume fraction is considerably affected by the chemotactic behavior of bacterial cells, in all the three observation times (Figures 5A,D,G). Chemotactic coefficients greater than $\chi = 0.22 \,\mathrm{mm^2 d^{-1}}$ lead to lower ϕ_c at the spheroid center with respect to the no-chemotactic case ($\chi = 0 \,\mathrm{mm^2 d^{-1}}$). For the highest value of χ the spheroid core is mostly composed of bacteria, a situation that persists

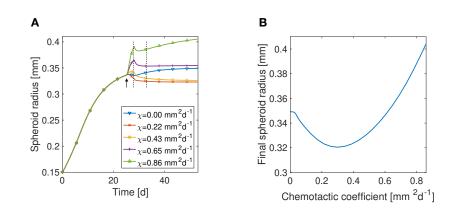


Figure 4: **A** Influence of bacterial chemotactic coefficient on tumor spheroids growth curve after bacterial administration. The black arrow indicates the time of bacterial administration, whereas the dashed lines highlight the observation time points in the following plots. Intermediate values of χ lead to smaller saturation radii if compared to bacterial infiltration in the absence of chemotaxis. On the other hand, higher chemotactic coefficients give rise to larger spheroids. **B** Final spheroid radius as a function of the chemotactic coefficient. The minimum radius is for $\chi \approx 0.3 \text{mm}^2 \text{d}^{-1}$.

even at 53 days, far from the administration time. Bacteria have success-350 fully colonized the spheroid and TCs are pushed towards the outer rim of the 351 spheroid, where oxygen is still above the critical limit. The plots for bacterial 352 volume fraction (Figures 5B, E, H) clearly show that chemotaxis is necessary 353 to allow for bacterial colonization of the spheroid. The case of $\chi = 0 \text{ mm}^2 \text{d}^{-1}$, 354 indeed, shows bacterial cells only right after the administration at day 28 355 (Figure 5B). At later time points (Figures 5E,H) the bacterial volume frac-356 tion is zero across the whole spheroid radius, indicating that bacteria have 357 not managed to adequately infiltrate the aggregate. Regarding the other 358 chemotactic coefficients, the plots for $\phi_{\rm b}$ mirror those for $\phi_{\rm c}$, i.e. the fraction 359 of spheroid occupied by bacteria increases with the chemotactic coefficient. 360 Concerning the nutrient concentration, the case without chemotaxis shows 361 the lowest nutrient level across the spheroid for all the time points (Figures 362 5C, F, I). In this case, the spheroid is almost entirely composed of TCs which 363 consume oxygen to proliferate. As in the other conditions ($\chi \neq 0 \,\mathrm{mm^2 d^{-1}}$) 364 bacteria take the place of TCs over the spheroid radius, lower TC volume 365 fractions lead to diminished nutrient consumption. 366

Finally, we consider in Figure 6 how the model components add to the spheroid volume at the different observation time points. Consistently with Figure 5 bacteria moving without chemotaxis do not contribute to the spheroid bioRxiv preprint doi: https://doi.org/10.1101/683839; this version posted June 27, 2019. The copyright holder for this preprint (which was not certified by peer review) is the author/funder. All rights reserved. No reuse allowed without permission.

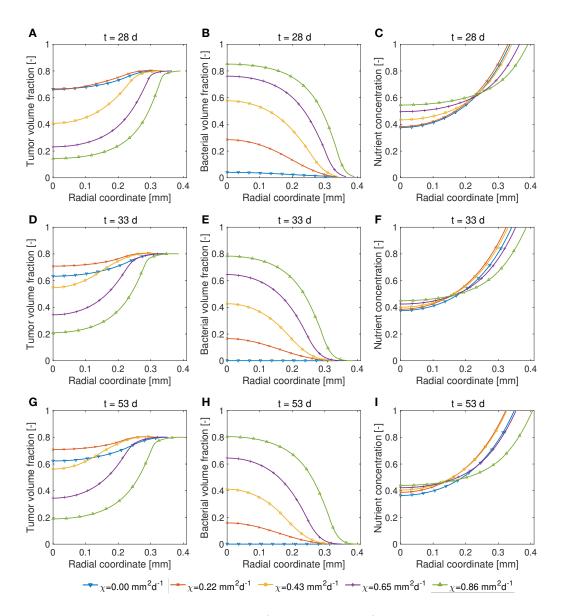


Figure 5: Plots for the volume fractions (TCs and bacteria) and nutrient concentration over the spheroid radius at different observation time points after bacterial administration. Different chemotactic coefficients are considered. TCs: **A**, **D**, **G**; bacteria: **B**, **E**, **H**; nutrient: **C**, **F**, **I**. Chemotaxis is necessary for successful colonization of the spheroid by bacteria. High values of the chemotactic coefficient lead to larger spheroids populated by high bacterial volume fractions.

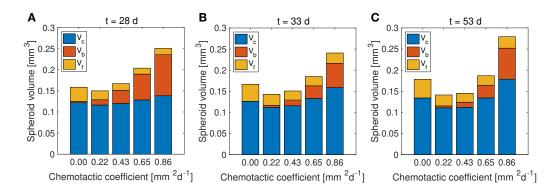


Figure 6: Composition of the spheroid volume at day 28 (A), 33 (B) and 53 (C) for different chemotactic coefficients in the case of bacterial administration. Intermediate chemotactic coefficients lead to smaller spheroid volumes. The fraction of bacterial volume increases with the value of the chemotactic coefficient.

volume at later time points (Figures 6B,C). Intermediate values of the chemotactic coefficient lead to small spheroid volumes, in which the bacterial volume is small if compared to the TC volume. As the value for χ increases, larger spheroids are formed, with a significant fraction of bacteria in their volume. In all the cases for which chemotaxis is present the volume of extracellular material is greater than for the case of no-chemotaxis, indicating that bacteria compete for the space of both extracellular material and TCs.

3.3.2. Effects of killing rate on spheroid growth after bacterial administration 377 Figure 7A shows the growth curves of spheroids infiltrated by bacteria 378 characterized by different killing rates. For these simulations we allowed the 379 bacteria to colonize the spheroid by selecting an intermediate chemotactic co-380 efficient ($\chi = 0.43 \,\mathrm{mm^2 d^{-1}}$). By increasing the cell killing rate the spheroids 381 reach decreasing saturation radii. For the highest value of the killing rate the 382 spheroid size shows a damped oscillation that dies out approaching the end of 383 the simulation. In Figure 7B, we analyze the effects of TC proliferation rate 384 and bacterial killing rate on the number of sign changes in spheroid radial 385 velocity (i.e. dR/dt) after bacterial administration. This quantity is corre-386 lated to the frequency of the damped oscillations that occur after bacteria are 387 added to the culture medium. No oscillations are present for low proliferation 388 and killing rates. For increasing γ_c and κ , however, the oscillation frequency 389 increases. As in the previous section, we analyze the behavior of the model 390 components at different time points after the bacterial administration, i.e. 391

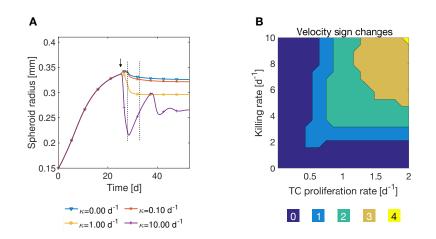


Figure 7: **A** Influence of cell killing rate on tumor spheroid growth curves after bacterial administration. The black arrow indicates the time of bacterial administration, whereas the dashed lines highlight the observation time points in the following plots. The final spheroid radius decreases with increasing cell killing rates. The highest killing rate ($\kappa = 10 \, d^{-1}$) gives rise to oscillations of the spheroid size, which die out at longer times. **B** Number of sign changes in spheroid radius velocity after administration, corresponding to the frequency of the oscillations in spheroid radius. The number of sign changes increases with increasing rate and killing rate.

³⁹² at day 28, 33 (dashed lines in Figure 7) and 53 (end of the simulation).

Figure 8 provides an account of the variation of the volume fractions (of 393 TCs and bacteria) and the nutrient concentration over the spheroid radius 394 at the three observation times. Right after bacterial administration (day 28) 395 the TC volume fractions are similar between the different conditions, with 396 the exception of the highest killing rate case ($\kappa = 10 \, d^{-1}$). This condition 397 leads to the smallest spheroid, characterized by the highest TC volume frac-398 tion (Figure 8A). At longer times after administration the differences in TC 399 volume fraction between the various killing ratios reduce (Figures 8D.G). 400 albeit the higher volume fractions are still obtained for the higher values of 401 κ . The bacterial volume fraction shows a gradual decrease from higher values 402 after administration to lower values at later time points (Figures 8B,E,H). 403 A different scenario occurs for the highest killing rate case, for which the 404 bacterial population oscillates. Starting from an observable volume fraction 405 at day 28 (Figure 8B) bacteria have almost disappeared from the spheroid 406 at day 33 (Figure 8E). However, at day 53 a non-zero bacterial population 407 is still visible in Figure 8H; as the administration phase was concluded at 408

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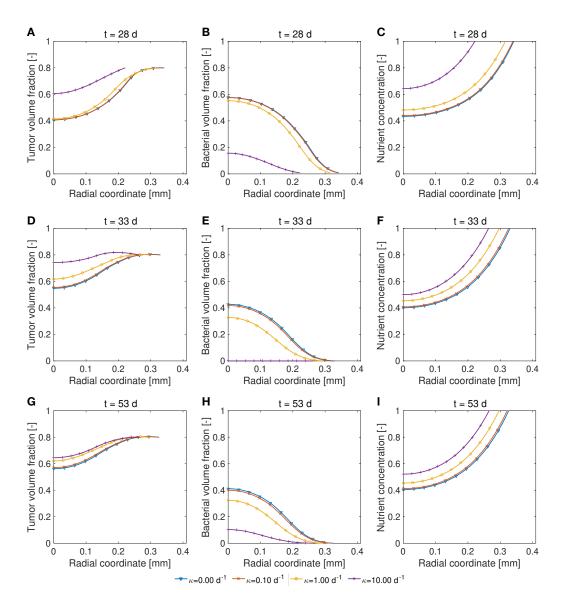


Figure 8: Plots for the volume fractions (TCs and bacteria) and nutrient concentration over the spheroid radius at different observation time points after bacterial administration. Different cell killing rates are considered. TCs: **A**, **D**, **G**; bacteria: **B**, **E**, **H**; nutrient: **C**, **F**, **I**. Increasing the killing rate leads to smaller spheroids with higher TC volume fractions in the core. Bacterial volume fractions are lower over the spheroid radius for larger values of κ , whereas the opposite occurs for nutrient concentration.

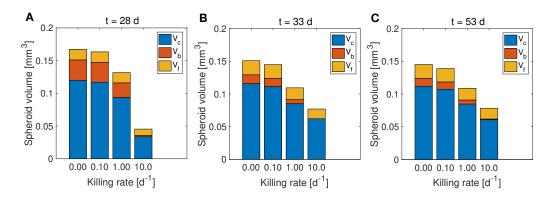


Figure 9: Composition of the spheroid volume at day 28 (**A**), 33 (**B**) and 53 (**C**) for different cell killing rates κ in the case of bacterial administration. The overall spheroid volume decreases with increasing cell killing rates. This also occurs for both TC (V_c) and bacteria (V_b) volumes, the latter showing a larger reduction with increasing values of κ .

day 28 and there are no bacteria in the culture medium, this volume fraction 409 derives from regrowth of the surviving bacteria. The volume of bacteria, 410 indeed, decreases at the end of bacteria administration and then increases 411 again over time (Figure S1). Regarding the nutrient concentration, hypoxic 412 regions are present in the spheroid at all the observation points for almost 413 all the killing ratios (Figures 8C,F,I). Again, this does not occur for the case 414 with the highest killing ratio at day 28 (Figure 8C), for which the nutrient 415 level is above the critical threshold. At later times (Figures 8F,I) hypoxic 416 regions appear also for this case, although of minor extension if compared to 417 the other conditions. 418

The contribution of TCs, bacteria and extracellular material to the spheroid 419 volume at the three observation points is shown in Figure 9. Generally the 420 total volume of the spheroids decreases over time and for increasing values 421 of the killing rate κ . Both the fractions of spheroid volume occupied by TCs 422 and bacteria decrease with increasing κ , however the reduction for bacterial 423 cells is more evident. For the highest value of κ the TC volume grows from 424 day 28 to day 33 (Figures 9B,C) and then stabilizes at day 53 (Figure 9C) 425 as a consequence of the oscillations in spheroid radius observed in Figure 7. 426

427 4. Discussion

We have adapted a continuum model for macrophage-mediated tumor treatment originally developed by Boemo and Byrne (2019) to study the

influence of bacteria on avascular tumor growth. We considered anaerobic 430 bacteria which thrive in hypoxic environments and actively migrate towards 431 nutrient deprived regions in solid tumors. We applied the model to tumor 432 spheroids and tested the impact of bacteria chemotaxis and killing rate on 433 spheroid dynamics. In our analysis, we considered both continuous infusion 434 and time-dependent administration of bacteria in the culture medium. We 435 found that chemotaxis is necessary for successful tumor infiltration, as only 436 for non-zero values of the chemotactic coefficient bacteria were able to col-437 onize the inner regions of the spheroid. Model results also showed that the 438 best treatment effect in terms of minimum spheroid size is obtained at in-439 termediate values of the chemotactic coefficient, and that spheroid volume 440 increases for increasing chemotaxis strength. Next, we considered the im-441 pact of the effective rate at which bacteria perform an anti-tumor activity on 442 the cancer cells. As expected, increasing the killing rate at an intermediate 443 chemotactic coefficient reduces the total spheroid size. However, the ratio 444 between the fraction of spheroid volume occupied by bacteria to TCs also 445 decreases, suggesting that bacteria are not able to support their own survival 446 by exerting an anti-tumor activity on TCs. In the case of time-dependent ad-447 ministration of bacteria, the model predicted the onset of oscillations in the 448 spheroid volume. These oscillations occur only for high TC proliferation and 449 bacterial killing rates, with a frequency that increases for increasing values 450 of the latter parameters. 451

For simplicity, we considered a general effective anti-tumor activity of 452 TCs by bacteria without focusing on specific mechanisms, e.g. cytotoxic 453 agents, prodrug-converting enzymes, etc. (Torres et al., 2018; Zhou et al., 454 2018; Kramer et al., 2018). Such treatment modalities could be incorpo-455 rated by extending the model, to provide a more accurate description of the 456 therapeutic action. Moreover, we focused on tumor spheroids, an *in vitro* 457 approximation of avascular tumors. As such, they lack all the interactions 458 between the tumor and its immune environment. Including the cross-talk 459 between bacteria and the components of the immune system would be a 460 fundamental step to address questions coming from *in vivo* tumors. We 461 modeled the mechanical response of cells and bacteria in the simplest way, 462 considering the phases as inviscid fluids. Although this description is still 463 able to qualitatively describe the experimental results, more detailed consti-464 tutive assumptions for the mechanical behavior of the phases would lead to 465 new insights into the interactions between bacteria and TCs in the aggregate 466 (Sciumè et al., 2013; Giverso et al., 2015; Ambrosi et al., 2017; Mascheroni 467

et al., 2018; Fraldi and Carotenuto, 2018; Giverso and Preziosi, 2019). We also considered ideal spherical spheroids to reduce the mathematical problem to one dimension. Even if the qualitative results will be maintained in a three-dimensional geometry, adopting the latter will be crucial to translate the model to *in vivo* situations.

In this modeling approach, space competition between bacteria and tumor 473 cells arises naturally from the conservation of mass and momentum imposed 474 by the governing equations. As no void regions are allowed into the spheroid, 475 when cells move or die one of the model components automatically fills the 476 space. At intermediate chemotaxis levels, bacteria and TCs compete for 477 space in the spheroid core and the expansion of TCs becomes limited. In 478 this condition, indeed, we find the lowest fractions of TCs and bacteria in the 479 spheroid volume. On the other hand, for increasing values of the chemotactic 480 coefficient, bacteria localize predominantly in the spheroid core and displace 481 TCs to the outer region of the spheroid. Both types of cell can proliferate 482 in each of the two spheroid areas (hypoxic for spheroids, well-oxygenated for 483 TCs), giving rise to high fractions of TCs and bacteria in the overall spheroid 484 volume. As a matter of fact, chemotaxis could be a target for bacteria-based 485 anticancer therapies. This mechanism arises as a pure physical effect from 486 the competition for space and nutrients between cancer and bacteria cells and 487 could be optimized to obtain the highest tumor volume reduction. Currently, 488 even though researchers are aware of the benefits coming from active bacteria 489 migration towards hypoxic regions in tumors (Forbes, 2010; Kramer et al., 490 2018), this knowledge has not been efficiently exploited in the clinical trials 491 carried out so far (Torres et al., 2018). 492

Since bacteria thrive in hypoxic conditions, removal of TCs improves 493 oxygenation of the spheroid, which leads to less favourable conditions for 494 bacterial cells. Better oxygenation of the spheroids could also be exploited 495 to improve the sensitivity of cancer cells to standard chemotherapies, in the 496 context of synergistic treatments (Zhou et al., 2018). In (Owen et al., 2004), 497 the authors noted a similar effect when modeling macrophages in spheroids. 498 another example showing that mathematical models could help identifying 499 situations when TC sensitization to therapies might be possible - see also 500 (Kim et al., 2013; Michor and Beal, 2015; Mascheroni et al., 2017). 501

Finally, we point out two straightforward developments that emerge from the findings of this work. First, one could think about extending the model to consider different bacterial administration schedules. The duration of bacteria administration, the time of administration and single vs. multiple dosing could be investigated to determine the optimal conditions for this kind of treatment. Secondly, the tight coupling between the dynamics of TCs and bacteria in terms of regulating their reciprocal environment could be addressed via mathematical models, in order to control the bacterial infection or identify the optimal timing of the therapy.

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517 References

Agosti, A., Cattaneo, C., Giverso, C., Ambrosi, D., Ciarletta, P., 2018.
A computational framework for the personalized clinical treatment of glioblastoma multiforme. ZAMM-Journal of Applied Mathematics and Mechanics/Zeitschrift für Angewandte Mathematik und Mechanik 98 (12), 2307–2327.

- Alfonso, J., Köhn-Luque, A., Stylianopoulos, T., Feuerhake, F., Deutsch, A.,
 Hatzikirou, H., 2016. Why one-size-fits-all vaso-modulatory interventions
 fail to control glioma invasion: in silico insights. Scientific reports 6, 37283.
- Altrock, P. M., Liu, L. L., Michor, F., 2015. The mathematics of cancer: integrating quantitative models. Nature Reviews Cancer 15 (12), 730.
- Ambrosi, D., Mollica, F., 2004. The role of stress in the growth of a multicell
 spheroid. Journal of mathematical biology 48 (5), 477–499.
- Ambrosi, D., Pezzuto, S., Riccobelli, D., Stylianopoulos, T., Ciarletta, P.,
 2017. Solid tumors are poroelastic solids with a chemo-mechanical feedback
 on growth. Journal of Elasticity 129 (1-2), 107–124.
- Ambrosi, D., Preziosi, L., 2002. On the closure of mass balance models for
 tumor growth. Mathematical Models and Methods in Applied Sciences
 12 (05), 737–754.

Boemo, M. A., Byrne, H. M., 2019. Mathematical modelling of a hypoxiaregulated oncolytic virus delivered by tumour-associated macrophages.
Journal of Theoretical Biology 461, 102–116.

Breward, C., Byrne, H., Lewis, C., 2001. Modelling the interactions between
tumour cells and a blood vessel in a microenvironment within a vascular
tumour. European Journal of Applied Mathematics 12 (5), 529–556.

Breward, C., Byrne, H., Lewis, C., 2002. The role of cell-cell interactions in
a two-phase model for avascular tumour growth. Journal of Mathematical
Biology 45 (2), 125–152.

- Breward, C. J., Byrne, H. M., Lewis, C. E., 2003. A multiphase model describing vascular tumour growth. Bulletin of mathematical biology 65 (4),
 609–640.
- 548 Byrne, H., 2012. Mathematics and life sciences.

⁵⁴⁹ Byrne, H., Preziosi, L., 2003. Modelling solid tumour growth using the theory
⁵⁵⁰ of mixtures. Mathematical medicine and biology: a journal of the IMA
⁵⁵¹ 20 (4), 341–366.

- ⁵⁵² Byrne, H. M., 2010. Dissecting cancer through mathematics: from the cell ⁵⁵³ to the animal model. Nature Reviews Cancer 10 (3), 221.
- ⁵⁵⁴ Carmeliet, P., Jain, R. K., 2000. Angiogenesis in cancer and other diseases.
 ⁵⁵⁵ nature 407 (6801), 249.
- ⁵⁵⁶ Challapalli, A., Carroll, L., Aboagye, E. O., 2017. Molecular mechanisms of
 ⁵⁵⁷ hypoxia in cancer. Clinical and translational imaging 5 (3), 225–253.
- ⁵⁵⁸ Chaplain, M. A., Graziano, L., Preziosi, L., 2006. Mathematical modelling of
 ⁵⁵⁹ the loss of tissue compression responsiveness and its role in solid tumour
 ⁵⁶⁰ development. Mathematical medicine and biology: a journal of the IMA
 ⁵⁶¹ 23 (3), 197–229.
- Colombo, M. C., Giverso, C., Faggiano, E., Boffano, C., Acerbi, F., Ciarletta,
 P., 2015. Towards the personalized treatment of glioblastoma: integrating
 patient-specific clinical data in a continuous mechanical model. PLoS One
 10 (7), e0132887.

- ⁵⁶⁶ Conger, A. D., Ziskin, M. C., 1983. Growth of mammalian multicellular
 ⁵⁶⁷ tumor spheroids. Cancer Research 43 (2), 556–560.
- Folkman, J., 1971. Tumor angiogenesis: therapeutic implications. New eng land journal of medicine 285 (21), 1182–1186.
- Forbes, N. S., 2010. Engineering the perfect (bacterial) cancer therapy. Nature Reviews Cancer 10 (11), 785.
- Ford, R. M., Phillips, B. R., Quinn, J. A., Lauffenburger, D. A., 1991.
 Measurement of bacterial random motility and chemotaxis coefficients: I.
 stopped-flow diffusion chamber assay. Biotechnology and bioengineering
 37 (7), 647–660.
- Fraldi, M., Carotenuto, A. R., 2018. Cells competition in tumor growth
 poroelasticity. Journal of the Mechanics and Physics of Solids 112, 345–367.
- Gerlee, P., Anderson, A. R., 2007. An evolutionary hybrid cellular automaton
 model of solid tumour growth. Journal of theoretical biology 246 (4), 583–
 603.
- Gibson, B., Wilson, D. J., Feil, E., Eyre-Walker, A., 2018. The distribution
 of bacterial doubling times in the wild. Proceedings of the Royal Society
 B: Biological Sciences 285 (1880), 20180789.
- Giverso, C., Preziosi, L., 2019. Influence of the mechanical properties of the
 necrotic core on the growth and remodelling of tumour spheroids. International Journal of Non-Linear Mechanics 108, 20–32.
- Giverso, C., Scianna, M., Grillo, A., 2015. Growing avascular tumours as
 elasto-plastic bodies by the theory of evolving natural configurations. Mechanics Research Communications 68, 31–39.
- Grimes, D. R., Kelly, C., Bloch, K., Partridge, M., 2014. A method for
 estimating the oxygen consumption rate in multicellular tumour spheroids.
 Journal of The Royal Society Interface 11 (92), 20131124.
- Hanahan, D., Weinberg, R. A., 2011. Hallmarks of cancer: the next generation. cell 144 (5), 646–674.

Hatzikirou, H., Alfonso, J. C. L., Leschner, S., Weiss, S., Meyer-Hermann,
M., 2017. Therapeutic potential of bacteria against solid tumors. Cancer
research 77 (7), 1553–1563.

- Jean, A. T. S., Swofford, C. A., Panteli, J. T., Brentzel, Z. J., Forbes, N. S., 2014. Bacterial delivery of staphylococcus aureus α -hemolysin causes regression and necrosis in murine tumors. Molecular Therapy 22 (7), 1266– 1274.
- Kasinskas, R. W., Forbes, N. S., 2006. Salmonella typhimurium specifically
 chemotax and proliferate in heterogeneous tumor tissue in vitro. Biotechnology and bioengineering 94 (4), 710–721.
- Kim, M., Gillies, R. J., Rejniak, K. A., 2013. Current advances in mathemat ical modeling of anti-cancer drug penetration into tumor tissues. Frontiers
 in oncology 3, 278.
- Kolokotroni, E. A., Dionysiou, D. D., Uzunoglu, N. K., Stamatakos, G. S.,
 2011. Studying the growth kinetics of untreated clinical tumors by using an advanced discrete simulation model. Mathematical and Computer
 Modelling 54 (9-10), 1989–2006.
- Kramer, M. G., Masner, M., Ferreira, F. A., Hoffman, R. M., 2018. Bacterial
 therapy of cancer: Promises, limitations, and insights for future directions.
 Frontiers in Microbiology 9, 16.
- Landry, J., Freyer, J., Sutherland, R., 1982. A model for the growth of multicellular spheroids. Cell Proliferation 15 (6), 585–594.
- Lewus, P., Ford, R. M., 2001. Quantification of random motility and chemotaxis bacterial transport coefficients using individual-cell and populationscale assays. Biotechnology and bioengineering 75 (3), 292–304.
- Martínez-González, A., Calvo, G. F., Romasanta, L. A. P., Pérez-García,
 V. M., 2012. Hypoxic cell waves around necrotic cores in glioblastoma: a
 biomathematical model and its therapeutic implications. Bulletin of mathematical biology 74 (12), 2875–2896.
- Mascheroni, P., Boso, D., Preziosi, L., Schrefler, B. A., 2017. Evaluating the
 influence of mechanical stress on anticancer treatments through a multiphase porous media model. Journal of theoretical biology 421, 179–188.

Mascheroni, P., Carfagna, M., Grillo, A., Boso, D., Schrefler, B., 2018.
An avascular tumor growth model based on porous media mechanics and evolving natural states. Mathematics and Mechanics of Solids 23 (4), 686– 712.

Mascheroni, P., Stigliano, C., Carfagna, M., Boso, D. P., Preziosi, L., Decuzzi, P., Schrefler, B. A., 2016. Predicting the growth of glioblastoma
multiforme spheroids using a multiphase porous media model. Biomechanics and modeling in mechanobiology 15 (5), 1215–1228.

Matzavinos, A., Kao, C.-Y., Green, J. E. F., Sutradhar, A., Miller, M.,
Friedman, A., 2009. Modeling oxygen transport in surgical tissue transfer.
Proceedings of the National Academy of Sciences 106 (29), 12091–12096.

Michor, F., Beal, K., 2015. Improving cancer treatment via mathematical
modeling: surmounting the challenges is worth the effort. Cell 163 (5),
1059–1063.

Montel, F., Delarue, M., Elgeti, J., Malaquin, L., Basan, M., Risler, T.,
Cabane, B., Vignjevic, D., Prost, J., Cappello, G., et al., 2011. Stress
clamp experiments on multicellular tumor spheroids. Physical review letters 107 (18), 188102.

Osswald, A., Sun, Z., Grimm, V., Ampem, G., Riegel, K., Westendorf,
A. M., Sommergruber, W., Otte, K., Dürre, P., Riedel, C. U., 2015. Threedimensional tumor spheroids for in vitro analysis of bacteria as gene delivery vectors in tumor therapy. Microbial cell factories 14 (1), 199.

Owen, M. R., Byrne, H. M., Lewis, C. E., 2004. Mathematical modelling of
the use of macrophages as vehicles for drug delivery to hypoxic tumour
sites. Journal of theoretical biology 226 (4), 377–391.

Pesavento, F., Schrefler, B. A., Sciumè, G., 2017. Multiphase flow in deforming porous media: a review. Archives of Computational Methods in
Engineering 24 (2), 423–448.

Phaiboun, A., Zhang, Y., Park, B., Kim, M., 2015. Survival kinetics of starving bacteria is biphasic and density-dependent. PLoS computational biology 11 (4), e1004198.

⁶⁵⁸ Preziosi, L., 2003. Cancer modelling and simulation. CRC Press.

Preziosi, L., Tosin, A., 2009. Multiphase modelling of tumour growth and extracellular matrix interaction: mathematical tools and applications. Journal of mathematical biology 58 (4-5), 625.

Sarkar, S., Peng, C.-C., Kuo, C. W., Chueh, D.-Y., Wu, H.-M., Liu, Y.-H.,
 Chen, P., Tung, Y.-C., 2018. Study of oxygen tension variation within live
 tumor spheroids using microfluidic devices and multi-photon laser scanning
 microscopy. RSC Advances 8 (53), 30320–30329.

Schaller, G., Meyer-Hermann, M., 2005. Multicellular tumor spheroid in an
 off-lattice voronoi-delaunay cell model. Physical Review E 71 (5), 051910.

Sciumè, G., Shelton, S., Gray, W. G., Miller, C. T., Hussain, F., Ferrari, M.,
Decuzzi, P., Schrefler, B., 2013. A multiphase model for three-dimensional
tumor growth. New journal of physics 15 (1), 015005.

Siddique, J., Ahmed, A., Aziz, A., Khalique, C., 2017. A review of mixture
theory for deformable porous media and applications. Applied Sciences
7 (9), 917.

Suh, S., Leaman, E., Zhan, Y., Behkam, B., 2018. Mathematical modeling of
bacteria-enabled drug delivery system penetration into multicellular tumor
spheroids. In: 2018 40th Annual International Conference of the IEEE
Engineering in Medicine and Biology Society (EMBC). IEEE, pp. 6162–
6165.

⁶⁷⁹ Sutherland, R. M., 1988. Cell and environment interactions in tumor mi-⁶⁸⁰ croregions: the multicell spheroid model. Science 240 (4849), 177–184.

Toley, B. J., Forbes, N. S., 2011. Motility is critical for effective distribution
and accumulation of bacteria in tumor tissue. Integrative Biology 4 (2),
165–176.

Torres, W., Lameda, V., Olivar, L. C., Navarro, C., Fuenmayor, J., Pérez, A.,
Mindiola, A., Rojas, M., Martínez, M. S., Velasco, M., et al., 2018. Bacteria
in cancer therapy: beyond immunostimulation. J Cancer Metastasis Treat
4, 4.

Vaupel, P., Mayer, A., 2007. Hypoxia in cancer: significance and impact on
clinical outcome. Cancer and Metastasis Reviews 26 (2), 225–239.

- Vinci, M., Gowan, S., Boxall, F., Patterson, L., Zimmermann, M., Lomas,
 C., Mendiola, M., Hardisson, D., Eccles, S. A., et al., 2012. Advances
 in establishment and analysis of three-dimensional tumor spheroid-based
 functional assays for target validation and drug evaluation. BMC biology
 10 (1), 29.
- Ward, J., King, J., 1999. Mathematical modelling of avascular-tumour
 growth ii: modelling growth saturation. Mathematical Medicine and Biology: A Journal of the IMA 16 (2), 171–211.
- Wilson, W. R., Hay, M. P., 2011. Targeting hypoxia in cancer therapy. Nature
 Reviews Cancer 11 (6), 393.
- Zhou, S., Gravekamp, C., Bermudes, D., Liu, K., 2018. Tumour-targeting
 bacteria engineered to fight cancer. Nature Reviews Cancer, 1.