Task Book Report Generated on: 03/29/2024

| Fiscal Year: | FY 2022 | Task Last Updated: | FV 01/24/2022 |
|--|---|--|-----------------------------------|
| PI Name: | Chung, Caroline M.D. | rask Last Opuateu: | 1 1 V1/27/2022 |
| Project Title: | Quantitative Imaging and Biofluid Biomarke | rs Predictive of Neurocognitive Toxicity | from Brain Irradiation |
| rioject fine. | Qualititative imaging and biomid biomarke | is Fredictive of Neurocognitive Toxicity | Holli Braili Irradiation |
| Division Name: | Human Research | | |
| Program/Discipline: | | | |
| Program/Discipline Element/Subdiscipline: | | | |
| Joint Agency Name: | | TechPort: | No |
| Human Research Program Elements: | (1) SR:Space Radiation | | |
| Human Research Program Risks: | (1) BMed :Risk of Adverse Cognitive or Beh (2) Cardiovascular :Risk of Cardiovascular Outcomes | | |
| Space Biology Element: | None | | |
| Space Biology Cross-Element Discipline: | None | | |
| Space Biology Special Category: | None | | |
| PI Email: | CChung3@mdanderson.org | Fax: | FY |
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| Organization Name: | University of Texas MD Anderson Cancer C | enter | |
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| PI Web Page: | | | |
| City: | Houston | State: | TX |
| Zip Code: | 77030 | Congressional District: | 9 |
| Comments: | | | |
| Project Type: | GROUND | Solicitation / Funding Source: | Directed Research |
| Start Date: | 03/15/2019 | End Date: | 03/14/2023 |
| No. of Post Docs: | 0 | No. of PhD Degrees: | |
| No. of PhD Candidates: | | No. of Master' Degrees: | |
| No. of Master's Candidates: | | No. of Bachelor's Degrees: | |
| No. of Bachelor's Candidates: | | Monitoring Center: | NASA JSC |
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| Contact Email: | shona.elgart@nasa.gov | | |
| Flight Program: | | | |
| Flight Assignment: | NOTE: End date changed to 3/14/2023 per NSSC information. (Ed., 3/21/22) NOTE: Period of performance is now 3/15/2019-3/14/2022 per NSSC information since now goes through NSSC; original POP was 1/14/2019-1/13/2022 (Ed., 5/29/19) | | |
| Key Personnel Changes/Previous PI: | | | |
| COI Name (Institution): | Wefel, Jeffrey Ph.D. (Co-PI: University of Shaitelman, Simona M.D. (The University | Texas MD Anderson Cancer Center) of Texas MD Anderson Cancer Center) | |
| Grant/Contract No.: | 80NSSC19K0659 | | |
| Performance Goal No.: | | | |
| Performance Goal Text: | | | |
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> NASA is concerned about the functional consequences of inflight acute exposure to space radiation and the probability of radiation exposure enhancing or accelerating late neurodegenerative conditions post-mission. This proposed research aims to acquire data on neurocognitive/behavioral impairments and associated biomarkers observed in patients who are undergoing cranial exposure to ionizing radiation with an emphasis on non-invasive imaging modalities and serum biomarkers to quantify predictive changes linked to acute and late neurocognitive impairment and radiation dose. This work will provide benchmark data on structural and functional changes in patients resulting from photon (X-ray) and proton exposures during radiotherapy of head and neck and intracranial neoplasms. Existing research data suggest that animals and humans may share similar pathophysiological mechanisms following brain radiation exposure that lead to adverse cognitive or behavioral conditions or the exacerbation or acceleration of late degenerative conditions. To establish thresholds of permissible exposure for effects on the central nervous system, it is crucial to understand scaling relationships between humans and animals. In the proposed research, the broader range in radiation dose exposure in a more neurocognitively vulnerable population will facilitate more rapid signal finding investigations of these biomarkers that can be further refined for subsequent investigation in astronauts. There is complementary overlap between this work and proposed directed work at MD Anderson involving radiation-induced cardiotoxicities that will tie in common pathways between CVD (cardiovascular) and CNS (central nervous system) decrements through the investigation of common biomarkers. The gaps Degen-2 and -3 and CNS-1, -2, and -6 involve identification of adverse outcome pathways, progression rates and latency periods, and early surrogate markers for radiation-induced cardiovascular/cerebrovascular disease and early and late CNS decrements. Research deliverables from this work will help close the above gaps and serve as quantifiable measures of response to guide countermeasure development and validation in animal studies with HZE (high energy) exposures. Results will also drive predictive model development (Degen-5 and CNS-5). Specific Aims:

Task Description:

Aim 1: In patients receiving proton and photon radiotherapy involving radiation exposure to the brain, evaluate serial multidimensional, multimodal tests of neurocognitive function (clinical neurocognitive testing and digital testing including NASA Cognition, CogState C3), biofluid biomarkers (including markers associated with vascular dysfunction and cardiotoxicity following radiation exposure), and quantitative multiparametric magnetic resonance imaging data.

Aim 2: Identify brain subregions vulnerable to radiation toxicity using quantitative multiparametric magnetic resonance images that are associated with changes in neurocognitive function and characterize changes in specific neurocognitive domains in relation to radiation dosimetry.

Aim 3: Establish predictive models of neurocognitive decline integrating clinical characteristics, quantitative multiparametric magnetic resonance imaging parameters, and biofluid biomarkers pre- and post-irradiation.

Highly constrained research.

Time constraint: There is insufficient time for competitive solicitation through a NASA Research Announcement (NRA) due to the Degen Risk accelerated schedule and milestone delivery. The early results from this clinical pilot study will be used in the formulation of the FY22 CVD/CNS NASA Specialized Center of Research (NSCOR) solicitation which needs to be released in early FY21 in order to meet our PRR (Path to Risk Reduction) schedule (which has the studies selected from the FY22 NSCOR commencing at the beginning of FY22). This NSCOR feeds into the 2026 PRR Rationale for HRP Directed Research: milestone of "Identify Late CNS Countermeasures."

Research constraint: This work is also highly constrained research involving a pilot study with human radiotherapy cohorts and the advanced imaging expertise available at MD Anderson. In addition to the FY22 NSCOR, the findings from this pilot study are expected to inform future solicited animal studies. Retrospective studies are not possible because the biomarkers are newly identified and are not yet fully validated, which this study will help to do.

Research Impact/Earth Benefits:

The consequences of radiation exposure to astronaut health during and after space flight remain unknown and the possibility of radiation exposure enhancing or accelerating neurodegenerative conditions is not well understood. This study aims to provide comprehensive data on structural, physical, and functional imaging changes in cancer patients whose brains were exposed to radiation as part of their cancer treatment. We will also investigate biomarker changes in these patients. We expect to identify changes in the brain and biomarkers, whilst also exploring the relationship between changes in the brain and radiation exposure to different sections of the brain. Our results will be used to identify potential non-invasive biomarkers that indicate neurocognitive decline, which can be used to identify brain disease in astronauts. The biomarkers may also serve as surrogates for future investigations of countermeasures to prevent neurocognitive decline following radiation exposure to the brain.

RESULTS: We received initial MD Anderson Cancer Center Institutional Review Board (IRB) approval of protocol PA18-0719 (PI: C. Chung) on 2/14/2019 and the trial was activated on 8/22/2019. The enrollment of patients in the trial has continued to struggle largely due to COVID-19.

However, we have made further progress on enriching the insights we hope to generate from this study. We were able to secure additional complementary grant funding to incorporate resting state-functional magnetic resonance imaging (rs-fMRI) acquisition as part of the imaging biomarker assessment; this required a protocol amendment submission and a new protocol revision approval by the IRB. To support this additional analysis, we have completed preparatory work, including preclinical development work for the rs-fMRI portion of the project, for which we received additional, complementary, independent funding. This workflow has produced structural connectomes from neuroimaging data of several patients, and a network analysis of the connectomes has yielded both global and local metrics that characterize these brain networks and the nodes therein, respectively. Radiotherapy dose maps have been registered to the connectome space, which sets up analysis of radiation dose to each of the brain network nodes and correlation with changes in the network metrics between two imaging time points. Network analysis and dose map registration is directly applicable to functional connectomes, and this workflow has been generalized for application to future patient neuroimaging data. The preliminary data for this work is being presented at an upcoming NASA meeting.

DISCUSSION: We are actively screening brain, and head and neck cancer patients to be enrolled in the IRB protocol associated with this project. Due to delays and pauses in trial enrollment associated with COVID-19, we will request an extension on this project to allow for enrollment of the target number of patients. In addition, we plan to discuss expanding the eligibility criteria to include patients receiving stereotactic radiation treatment in fewer treatment fractions

Task Progress:

Task Book Report Generated on: 03/29/2024

| | to increase and accelerate study enrollment. |
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| Bibliography Type: | Description: (Last Updated: 08/07/2023) |