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E. I. M. MEIJNE, R. E. PLOEMACHER and R. HUISKAMP

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## Sensitivity of murine haemopoietic stem cell populations to X-rays and 1 MeV fission neutrons in vitro and in vivo under hypoxic conditions

#### E. I. M. MEIJNE†, R. E. PLOEMACHER‡ and R. HUISKAMP†

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Abstract. The radiosensitivity of primitive haemopoietic stem cells that repopulate the bone marrow with precursors of granulocytes and macrophages (MRA[CFU-C]), mature stem cells capable of forming spleen colonies in lethally irradiated recipients (CFU-S-7) and colony-forming units in culture (CFU-C) were determined in vitro and under hypoxic conditions in vivo for 1 MeV fission neutrons and 300 kV X-rays. The obtained  $D_0$ 's were compared with previously observed  $D_0$ 's after irradiation in vivo under normal oxic conditions. With 1 MeV fission neutron irradiation no significant difference in radiosensitivity of the cell populations was observed between normal in vivo irradiation and in vitro irradiation. With 300 kV X-rays a lower radiosensitivity for all three cell populations was observed after in vitro compared to in vivo irradiation. In vivo irradiation with fission neutrons under hypoxic conditions led to a small decrease in radiosensitivity. The obtained oxygen enhancement ratio (OER) for fission neutrons varied from 1.2 for MRA[CFU-C] to 1.5 for CFU-C. After in vivo irradiation with 300 kV X-rays under hypoxic conditions much higher *OER*'s were observed. An *OER* = 1.8was obtained for CFU-S and for MRA[CFU-C] and for CFU-C OER 3:0 and 2:9 were observed. These results indicate that the radioresistance of primitive haemopietic stem cells (MRA[CFU-C]) compared to mature stem cells (CFU-S-7) is mainly due to intrinsic factors and not to differences in localization or oxygenation between primitive and mature stem cells.

#### 1. Introduction

In a previous study we determined the radiosensitivity of various haemopoietic stem cell and progenitor cell populations after *in vivo* irradiation with 300 kV X-rays (Meijne *et al.* 1991) and 1 MeV fission neutrons (Meijne *et al.*, submitted). Primitive haemopoietic stem cells, which repopulate the irradiated bone marrow with secondary CFU-S or *in vitro* clonable progenitors of granulocytes and macrophages (MRA[CFU-S-12], MRA[CFU-C]) (Hodgson and Bradley 1979, Ploemacher and Brons 1989), were found to be more resistant to ionizing irradiation than more mature stem cells (CFU-S). When mature stem cells differentiated into in vitro clonable progenitors of granulocytes and macrophages (CFU-C) their radiosensitivity decreased again. The radiosensitivity of the various cell populations may however be influenced by local conditions in the irradiated femora. Variations in the atomic composition of the various tissue in the mammalian body may lead to inhomogeneities in dosedistribution, especially at the bone-soft tissue interface (Broerse and Barendsen 1968a). Dependent on their location in the bone marrow, some cell populations may therefore absorb more or less dose than other cell populations. Another factor that may influence the observed radiosensitivity of the haemopoietic cell populations are local differences in oxygen tension (Broerse et al. 1968b, Allalunis et al. 1983, Allalunis-Turner and Chapman 1986). To investigate to what extent these two factors influence the in vivo radiosensitivity of haemopoietic stem cell and progenitor cell populations we irradiated bone marrow cells in vitro and in vivo under hypoxic conditions.

#### 2. Materials and methods

#### 2.1. Mice

Inbred CBA/H mice (H-2k) were bred at the Netherlands Energy Research Foundation (Petten, The Netherlands). The mice were maintained under clean conventional conditions. The animal care procedures have been described elsewhere (Davids 1970). Male donor mice were irradiated or sham-irradiated with graded doses of X-rays or fission neutrons at the age of 12−14 weeks. Male or female mice aged ≥14 weeks were used as recipients in the CFU-S and MRA assays.

The experiments were conducted with permission of the experimental animal welfare commission

<sup>†</sup>Department of Radiobiology and Radioecology, Netherlands Energy Research Foundation, PO Box 1, 1755 ZG Petten, The Netherlands.

<sup>‡</sup>Department of Hematology, Erasmus University, PO Box 1738, 3000 DR Rotterdam, The Netherlands.

(DEC) of the Netherlands Energy Research Foundation, as required by Dutch law.

#### 2.2. Irradiation procedures

Mice or cell suspensions were irradiated with fast fission neutrons from a  $^{235}$ U-converter in the Low Flux Reactor at Petten. The design of the exposure facility, the tissue dosimetry, and the neutron spectrometry have been described elsewhere (Davids et al. 1969). The animals were exposed bilaterally to a fast neutron dose-rate of 0.1 Gy/min. The absorbed doses are given as neutron centre-line doses; they do not include the 9%  $\gamma$ -ray contribution. The neutron spectrum has a mean energy of 1.0 MeV and the mean track average LET of the recoil protons produced in tissue is equal to 57 keV/ $\mu$ m in water.

Total body X-irradiation (TBI) was performed with a Philips Müller X-ray tube, operating at 300 kV constant potential and 5 mA (HVL 2·1 mm Cu). The dose-rate was equal to 0·30 Gy/min in the centre-line of the animals. The distance from the focus to the centre-line was 69 cm. During irradiation the animals were confined in polycarbonate tubes, which were mounted in a rotating disk of Perspex.

For irradiation under hypoxic conditions (Millard and Blackett 1981) mice were killed by CO2 gassing and subsequently kept at room temperature for 12 min before starting X-irradiations, or 30 min before starting the fission neutron irradiations. Due to the distance between the laboratory and the reactor and the start-up procedures it was not possible to shorten the time interval between killing of the mice and start of the neutron irradiations beyond 30 min. Immediately after irradiation both femurs were excised and placed in ice-cold Hanks (Gibco). In vitro irradiations were performed on marrow cell suspensions in 5-ml polystyrene tubes (Falcon) at 0°C. The tubes were agitated immediately before irradiation in order to keep the cells in suspension. During irradiation the cell suspensions were kept on ice.

#### 2.3. Haemopoietic cell suspensions

Mice were killed by CO<sub>2</sub> gassing. Femurs were freed from muscles and tendons and ground in a mortar using 1 ml RPMI (Flow) containing 0.04% bovine serum albumin (BSA; Sigma), penicillin (100 IU/ml) and streptomycin (100 mg/ml) per femur. The cell suspension was put in a Falcon

tube and the larger bone particles were allowed to settle for 45 s. The supernatant was sieved through a Nylon filter (pore size  $100 \mu m$ ) and the cellularity determined with a Coulter counter.

#### 2.4. CFU-S assay

CFU-S were assayed according to Till and McCulloch (1961). Recipient mice received 9 Gy X-rays 1-4 h before injection of cell suspensions. This dose reduced endogenous CFU-S-7 to 0. Cell suspensions were always made from at least three donor mice. Ten mice were used as recipient for the CFU-S-7 assay. Each recipient received 2×10<sup>4</sup> normal bone marrow cells or equivalent cell doses irradiated bone marrow cells in 0·2 ml Hanks (Gibco) by lateral tail vein injection. Seven days later the mice were killed, their spleens were excised and fixed in Telleyesniczky's solution. The macroscopic surface colonies were counted with a stereo-microscope at 10× magnification and their diameters measured with an eyepiece micrometer.

#### 2.5. CFU-C assay

CFU-C (including CFU-M, CFU-G and CFU-GM) were quantified in a semisolid (0.8% methylcellulose, Methocel, AP4 Premium; Dow Chemical) culture medium (Alpha medium) containing 1% BSA, 10% FCS and 10% Poke Weed Mitogen mouse spleen conditioned medium (PWM-MSCM).  $2 \times 10^4 - 1.5 \times 10^6$  cells were plated in 35-mm Costar dishes in 1 ml final culture medium. Duplicate cultures were incubated at 37°C in a humidified atmosphere containing 5% CO<sub>2</sub> in air. Colonies (>50 cells) were counted after 7 days of culture using an inverted microscope.

#### 2.6. Marrow repopulating ability (MRA)

For the repopulation assays five lethally irradiated recipients were injected with 1–5 times the number of donor bone marrow cells as used for the CFU-S assays. Twelve days after transplantation aliquots of their femoral marrow were assayed for the presence CFU-C. MRA was expressed as the number of haemopoietic precursor cells (MRA[CFU-C]) generated over a 12-day period in one femur of a lethally irradiated recipient per 10<sup>5</sup> cells injected (Hodgson *et al.* 1982). Control irradiated mice, which received no bone marrow transplantation, were included in each experiment,

and precursor cell contents were corrected for endogenous precursors if present.

#### 2.7. Experimental procedures and statistics

Log-linear dose-effect curves were obtained by least squares regression analysis.  $D_0$ 's were obtained from the slope of these curves.  $D_0$ 's from three-to-four individual experiments were pooled. Each experiment in which mice or cells were irradiated with X-rays contained seven dose groups and experiments in which mice or cells were irradiated with fission neutrons contained five dose groups. Statistical comparison of  $D_0$ 's was performed with a Chi-square test.

#### 3. Results

### 3.1. In vitro radiosensitivity of haemopoietic cell populations

The survival curves for MRA[CFU-C], CFU-S-7 and CFU-C irradiated *in vitro* and *in vivo* with graded doses 1 MeV fission neutrons or X-rays are shown in figures 1–3 respectively. From these survival curves  $D_0$ 's were calculated, summarized in Table 1. *In vitro* irradiation of MRA[CFU-C] with fission neutrons led to a small increase in radiosensitivity compared to the *in vivo* situation. The  $D_0$  decreased from  $0.46 \pm 0.01$  Gy for *in vitro* irradiation to  $0.40 \pm 0.04$  Gy for *in vivo* irradiation. The decrease in  $D_0$  was however not significant. The radiosensitivity of CFU-S-7 and CFU-C irradiated *in vitro* with fission neutrons was similar to the

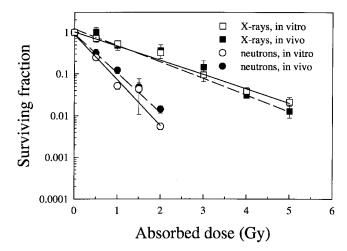


Figure 1. Dose-response curves for MRA[CFU-C] irradiated in vitro (solid lines) or in vivo (dashed lines) with X-rays or fission neutrons.

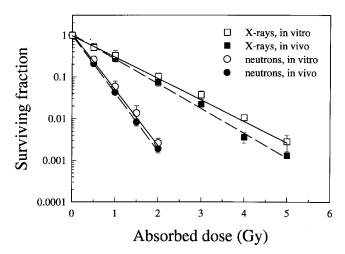


Figure 2. Dose-response curves for CFU-S-7 irradiated *in vitro* (solid lines) or *in vivo* (dashed lines) with X-rays or fission neutrons.

radiosensitivity observed after in vivo irradiation. The  $D_0$ 's observed for MRA[CFU-C], CFU-S-7 and CFU-C after in vitro irradiation with 300 kV X-rays were higher for all three cell populations. The  $D_0$ of 1.25 Gy observed after in vitro irradiation of MRA[CFU-C] was 13% higher than the  $D_0$  of 1.11 Gy observed after in vivo irradiation. The increase was however not significant. The  $D_0$ 's calculated for CFU-S-7 and CFU-C after in vitro irradiation with 300 kV X-rays were respectively 22 and 34% higher. Although the decrease in radiosensitivity observed after in vitro X-irradiation varied from 13% for MRA[CFU-C] to 34% for CFU-C, the radiosensitivity pattern within the stem cell hierarchy was identical after in vitro irradiation compared to in vivo radiation. Irrespective the mode of irradiation primitive MRA[CFU-C] stem cells were more resistant to ionizing radiation

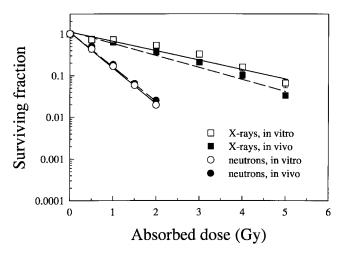


Figure 3. Dose-response curves for CFU-C irradiated *in vitro* (solid lines) or *in vivo* (dashed lines) with X-rays or fission neutrons.

Table 1. Radiobiological characteristics of haemopoietic stem and progenitor cell populations irradiated *in vivo* or *in vitro* with X-rays and 1 MeV fission neutrons.

	$D_0$ after in vivo irradiation (Gy)	$D_0$ after in vitro irradiation (Gy)
1 MeV fission neutrons		
MRA[CFU-C]	$0.46 \pm 0.01$	$0.40 \pm 0.04$
CFU-S-7	$0.31 \pm 0.01$	$0.33 \pm 0.02$
CFU-C	$0.51 \pm 0.01$	$0.50 \pm 0.01$
X-rays		
MRA[CFU-C]	$1.11 \pm 0.03$	$1.25 \pm 0.08$
CFU-S-7*	$0.74 \pm 0.01$	$0.90\pm0.03$
CFU-C*	$1.50\pm0.05$	$2.01\pm0.13$

<sup>\*</sup> $D_0$  observed after in vitro irradiation significantly differs from  $D_0$  observed after in vivo irradiation (CFU-S-7, p < 0.001; CFU-C, p < 0.025).

than more mature CFU-S-7. CFU-C which belong to the committed progenitor compartment, were most radioresistant to *in vivo* as well as *in vitro* irradiation.

## 3.2. Radiosensitivity of haemopoietic cell populations under hypoxic conditions

The survival curves for MRA[CFU-C], CFU-S-7 and CFU-C irradiated *in vivo* under hypoxic conditions are shown in figures 4–6. TBI with 1 MeV fission neutrons under hypoxic condition led to a significant decrease (p < 0.001) in radiosensitivity for all three cell populations compared to normal *in vivo* irradiation. The  $D_0$  of MRA[CFU-C] increased from  $0.46 \pm 0.01$  Gy for normal *in vivo* irradiation to  $0.55 \pm 0.02$  Gy for irradiation under hypoxic conditions and the  $D_0$ 's for CFU-S-7 and CFU-C increased from  $0.31 \pm 0.01$  to  $0.41 \pm 0.01$ 

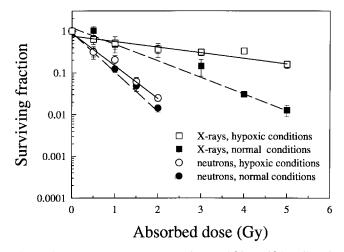


Figure 4. Dose-response curves for MRA[CFU-C] irradiated in vivo under hypoxic (solid lines) or normal oxic conditions (dashed lines) with X-rays or fission neutrons.

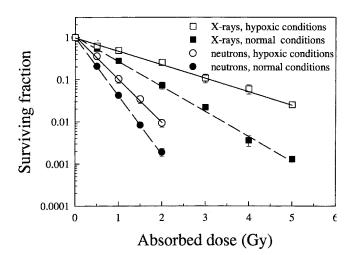


Figure 5. Dose-response curves for CFU-S-7 irradiated *in vivo* under hypoxic (solid lines) or normal oxic conditions (dashed lines) with X-rays or fission neutrons.

and from  $0.51 \pm 0.01$  to  $0.74 \pm 0.03$  Gy respectively. The calculated oxygen enhancement ratios (*OERs*) were small and ranged from 1.2 for MRA[CFU-C] to 1.5 for CFU-C.

Irradiation of the three haemopoietic cell populations with 300 kV X-rays under hypoxic conditions led to a large decrease in radiosensitivity. This decrease in radiosensitivity was most prominent for MRA[CFU-C] and CFU-C. The  $D_0$  for MRA[CFU-C] increased from  $1.11 \pm 0.01$  Gy for normal in vivo irradiation to  $3.27 \pm 0.32$  Gy for irradiation under hypoxic conditions and the  $D_0$ for CFU-C increased from  $1.50\pm0.01$  to  $4.33\pm$ 0.27 Gy. The calculated OERs were 3.0 for MRA[CFU-C] and 2.9 for CFU-C. The decrease in radiosensitivity of CFU-S-7 for X-irradiation under hypoxic conditions was much lower. The  $D_0$  increased from  $0.74 \pm 0.01$  to  $1.33 \pm 0.07$  Gy for

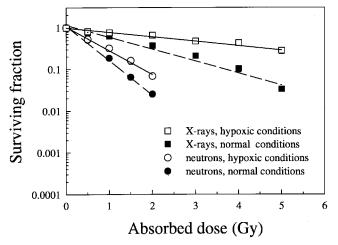


Figure 6. Dose-response curves for CFU-C irradiated *in vivo* under hypoxic (solid lines) or normal oxic conditions (dashed lines) with X-rays or fission neutrons.

irradiation in vivo under hypoxic conditions. The calculated OER was 1.8. The results are summarized in Table 2.

#### 4. Discussion

In the present study we determined the radiosensitivity of haemopoietic stem cell and progenitor cell populations in vitro and in vivo under hypoxic conditions in order to determine if the previously observed differences in radiosensitivity between these cell populations in normal air breathing mice are caused by local differences in absorbed dose and/or oxygen tension. These two factors can influence the radiosensitivity in vivo because the spatial distribution of cells in the bone marrow is by no means random and probably each definable cell type has its own specific distribution. CFU-C have been reported to have a bimodal distribution in the mouse femur. The maximal concentration of CFU-C is found at approximately 120 µm from the bone surface (Lord et al. 1975). The concentration of CFU-S decreases from the marginal zone to the longitudinal axis of the femur. A 2-3 times higher concentration of CFU-S can be found close the femur shaft than in the centre of the marrow spaces (Lord et al. 1975, Gong et al. 1978). Not only the concentration of CFU-S varies across the femoral axis, but also the quality of the CFU-S. The primitive CFU-S, which are proliferatively quiescent reside close to the centre of the marrow spaces, while the mature CFU-S (CFU-S-7) can be found close to the bone surface (Lord 1986). The concentration of MRA[CFU-S-12] is highest close to the centre of the bone (Lord 1992). Since MRA[CFU-C] can be considered a reflection of MRA[CFU-S-12] (Hodgson et al. 1982) it is most likely that the MRA[CFU-C] are also located near the centre of the femur.

The above described variations in the spatial distribution of the various cell populations leads to small differences in absorbed dose due to perturbation of the secondary particle equilibrium at the bone bone-marrow interface caused by the difference in atomic composition of these two tissues. Neutrons mainly transfer energy through elastic collisions with hydrogen nuclei. Due to the lower hydrogen content of the bone, the absorbed dose in bone marrow cells in a 30 µm thick layer adjacent to the bone is 12% lower and in the bone marrow layer remote from the bone 6% lower than in soft tissue after irradiation with 15 MeV neutrons (Broerse and Barendsen 1968a). The range of recoil protons produced by 15 MeV neutrons is on average large compared to the diameter of a cell. A proton of 10 MeV energy has a range of about 1200 μm compared to a range of about 25 µm observed for 1 MeV protons (Broerse and Barendsen 1968a). For 1 MeV fission neutrons, used in this study, a lower absorbed dose will only be observed in a small layer of approximately  $25 \,\mu \text{m}$  adjacent to the bone. At a larger distance from the bone a new secondary particle equilibrium will have been formed. Therefore, CFU-S located within the first 25 µm next to the bone will receive a lower dose compared to CFU-S irradiated in vitro. The Do observed after in vitro irradiation of CFU-S was however not significant different from the  $D_0$  observed after in vivo irradiation. This means that the difference in absorbed dose due to the local perturbation of the secondary charged particle equilibrium is not large enough to exert a substantial effect. Alternatively, the proportion of the CFU-S population, which is effectively located within the first 25 µm from the bone, might be small in the mouse strain used in our studies. The large difference in marginal and axial CFU-S concentration have not been observed by all authors (Maloney et al. 1978).

Table 2. Radiobiological characteristics of haemopoietic stem and progenitor cell populations irradiated under normal or under hypoxic conditions with X-rays or 1 MeV fission neutrons

	$D_0$ (Gy) in normal (air-breathing) mice	$D_0$ (Gy) in hypoxic (asphyxiated) mice	Oxygen enhancement ratio
1 MeV fission neutrons			
MRA[CFU-C]*	$0.46 \pm 0.01$	$0.55 \pm 0.02$	1.2
CFU-S7*	$0.31 \pm 0.01$	$0.43 \pm 0.01$	$1 \cdot 4$
CFU-C*	$0.51 \pm 0.01$	$0.74 \pm 0.03$	1.5
X-rays			
MRA[CFU-C]*	$1.11 \pm 0.01$	$3.27 \pm 0.32$	3.0
CFU-S-7*	$0.74 \pm 0.01$	$1.33 \pm 0.07$	1.8
CFU-C*	$1.50\pm0.05$	$4.33 \pm 0.27$	2.9

<sup>\*</sup>  $D_0$  observed after in vivo irradiation under hypoxic conditions significantly differs from  $D_0$  observed after in vivo irradiation under normal conditions (p < 0.001).

When an animal is exposed to whole-body Xirradiation, the energy absorbed by the bone marrow is greater than that absorbed by softtissue parts distant from bone. The bone marrow cells close to the femur shaft receive a relatively high dose owing to an excess of secondary electrons produced by photoelectric absorption in the minerals of the bone. The dose absorbed by cells in an adjacent layer of 30 µm next to the bone will receive a 17% higher dose and cells in a bone marrow layer remote from bone still receive a 3% higher dose compared to the mean absorbed dose in soft muscle tissue after irradiation with 250 kV X-rays (Epp et al. 1959, Broerse and Barendsen 1968a). For 300 kV X-rays identical percentages might be expected. The radiosensitivity of the haemopoietic cell populations irradiated in vitro in suspension was indeed lower (higher  $D_0$ 's) compared to cells irradiated within the animal. Surprisingly the increase in  $D_0$  for CFU-C irradiated in vitro compared to in vivo was higher than the increase observed for CFU-S-7. Because CFU-S-7 are located more closely to the bone a higher increase for CFU-S-7 would be expected. The OER for CFU-S-7 is however lower than the OER for CFU-C, indicating that the environmental conditions in which the CFU-S-7 reside in the airbreathing animal are more hypoxic than those of CFU-C. The higher dose the CFU-S-7 receive in vivo due to more short-range secondary electrons may therefore be partly compensated by a less oxygenated environment. The decrease in radiosensitivity observed for the three cell populations in however higher than expected based on microdosimetric factors. Possibly more cells survived irradiation in vitro because the cells in suspensions were not so well oxygenated as the cells in the animal.

Differences in oxygenation level between the various cell populations were determined by comparing the radiosensitivity of the cells under normal and under hypoxic conditions. In general the radiosensitivity of a tissue for neutron irradiation is not much dependent on the oxygenation level of the tissue. Indeed the OERs observed for MRA[CFU-C], CFU-S-7 and CFU-C after fission neutron irradiation were low and varied from 1.2 to 1.5. These values are comparable to the OER of 1.5 observed for human kidney cells after 1 MeV fission neutron irradiation (Broerse et al. 1968b). The  $(OER)_{Xrays}$  for MRA[CFU-C] and CFU-C were higher than the OER of 1.8 for CFU-S-7. This indicates that in normal air breathing mice, the oxygenation level at the location the CFU-S-7 reside is lower than the oxygenation level at the

place of MRA[CFU-C] and CFU-C, since induction of hypoxia increased the survival of CFU-S less than the survival of MRA[CFU-C] and CFU-C. The  $(OER)_{Xrays}$  of 1.8 for CFU-S is lower than the  $(OER)_{v_{ravs}}$  of 2.4 observed by Millard and Blackett (1981) for CFU-S irradiated with γ-rays. Also the  $(OER)_{Xravs}$  of 2.7 observed by Broerse and Barendsen (1973) after in vitro irradiation of CFU-S-9 was higher. The OER of 2 observed by Blackett (1974) and Hendry and Howard (1972) was however similar. On the other hand the (OER)<sub>Xravs</sub> of 2.9 observed for CFU-C was higher than the  $(OER)_{\gamma_{ravs}}$  of 2·1 (Allalunis et al. 1983) and 1.3 (Millard and Blackett 1981) observed for agar colony-forming units. It is however difficult to compare  $D_0$  and OER of various investigators. Differences in mouse strain, radiation source and conditions, days of colony culture, culture medium, and especially colony stimulating factor (Baird et al. 1990) used may cause large differences in the observed radiosensitivity. Therefore it is very important to compare the radiosensitivity of different cell population within one mouse strain and within one institute.

In summary our data show that differences in radiosensitivity between MRA[CFU-C], CFU-S and CFU-C are mainly caused by intrinsic differences between the cell populations and not by differences in oxygenation level of localization in the bone marrow.

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