PATHOPHYSIOLOGY AND MECHANISMS OF RADIOPHARMACEUTICAL LOCALIZATION

20140818 morning meeting 胡蓮欣

The Pathophysiological basis of Nuclear Medicine 2nd ed. Springer.

The mechanisms of radioisotope localization

| 1. | Isotope dilution In vivo, MUGA, RBC scan |
|----|---|
| 2. | Capillary blockade MAA lung perfusion |
| 3. | Physicochemical adsorption MDP bone scan |
| 4. | Cellular migration and sequestration WBC scan, denatured RBC spleen scan |
| 5. | Membrane transport Simple diffusion Diffusion and intracellular metabolism/binding Diffusion and mitochondrial binding Diffusion and increased capillary and plasma membrane permeability Facilitated diffusion FDG, IDA derivatives Active transport Radioiodine, pertecnetate, TICI, Rb + Phagocytosis SC Receptor-mediated endocytosis Gallium |
| 6. | Metabolic Substrates and Precursors FDG Precursors: Radiolabeled Amino Acids Amino acids |
| 7. | Tissue Hypoxia F-MISO |
| 8. | Cell Proliferation |
| 9. | Specific Receptor Binding Radiolabeled Peptides |

Adrenergic Presynantic Receptors and Storage

Cell Proliferation

- Increased mitotic rate, cell proliferation, and lack of differentiation... main factors of malignant tissue
- Growth rate of tumors correlates with their level of differentiation
- Increased requirement of substrates (nucleotides) for DNA synthesis in tumors

8. Cell proliferation tracers

H-3 TdR (H-3 thymidine)

- in vitro use (thymidine labeling index)
- Transported into cells by both passive diffusion & facilitated transport by Na+ dependant carriers

C-11 TdR (C-11 thymidine)

- PET tracer, used in head & neck tumors
- But tumor uptake not optimal due to rapid metabolism in blood
- I-125 ludR (125 I-5-iodo-2'-deoxyuridine)
 - Analog of thymidine
 - Be phosphorylated and incorporated in DNA

Cell proliferation tracers

- F-18 FLT (18 F-Fluoro-3'-deoxy-3'-l-fluorothymidine)
 - passive diffusion & facilitated transport by Na+ dependant carriers
 - Then, phosphorylated by thymidine kinase 1 (TK1) into FLTmonophosphate → trapped in the cells
 - Using H-3 FLT, it has been shown that FLT is not incorporated into DNA because it acts as a chain terminator (due to no 3'-OH group)



Nucleotides(核苷酸): 構成nucleic acids的基本單元

Structure of nucleotides



Nucleic acid: include RNA & DNA

RNA (ribonucleic acid, 核醣核(苷)酸): GMP, TMP, AMP, CMP →皆為核苷單磷酸,為30種核苷酸中的4種

| | | | 核醣+鹼基 | 單純鹼基 | |
|-------------------|------------------|---------------------|-------------------------------|----------------------------|------------|
| Nucleotide 核苷酸 | Nucleoside 核苷 | Nucleobases 含氮鹽基 | Adenosine 腺苷 | Adenine (A) 腺嘌呤 | purine |
| | | | Uridine 尿苷;尿嘧啶核苷 | Uracil (U) 尿嘧啶 | pyrimidine |
| | | | Cytidine 胞苷;胞嘧啶核苷 | Cytosine (C) 胞嘧啶 | pyrimidin |
| | | | Guanosine 鳥苷; 鳥嘌呤核苷 | Guanine (G) 鳥糞嘌呤 | purine |
| | | 五碳糖 (核醣) | | | |
| | 磷酸根 | 1 (M) | | | |
| | | 2 (D) | | | |
| | | 3 (T) | | | |

Nucleic acid: include RNA & DNA

DNA (deoxyribonucleic acid, 去氧核醣核(苷)酸): dGMP, dTMP, dAMP, dCMP 皆為去氧核苷單磷酸,為30種核苷酸中的4種

| | | | 核醣+鹼基 | 單純鹼基 | |
|-----------------------|------------------|---------------------|------------------------|----------------------------|------------|
| Nucleotide (去氧)核苷酸 | Nucleoside 核苷 | Nucleobases 含氮鹽基 | Adenosine 腺苷 | Adenine (A) 腺嘌呤 | purine |
| | | | Thymidine 胸苷;胸腺嘧啶核苷 | Thymine (T) 胸腺嘧啶 | pyrimidine |
| | | | Cytidine 胞苷;胞嘧啶核苷 | Cytosine (C) 胞嘧啶 | pyrimidin |
| | | | Guanosine 鳥苷; 鳥嘌呤核苷 | Guanine (G) 鳥糞嘌呤 | purine |
| | | 五碳糖(去氧核醣) | | | |
| | 磷酸根 | 1 (M) | | | |
| | | 2 (D) | | | |
| | | 3 (T) | | | |

A=T(A與T 配對→有二個氫鍵) G=C(G與C 配對→有三個氫鍵) 二股間的寬度為2nm(2x10⁻⁹m, 20Å)







- F-18 FLT 比起F-18 FDG sensitivity較差 (in malignant tumors)的可能原因:
- Substitution in the 3'- position by F → decreased affinity for the pyrimidine transporter compared to thymidine
- 2. The affinity of FLT for TK is lower than that of thymidine

9. Specific Receptor Binding Receptor binding radioisotopes, 各種會影響target tissue uptake的因素:

blood clearance

- Specific activity
- affinity of the tracer
- Immunoreactivity or the relative biological potency
- in vivo stability
- nonspecific binding
- blood flow and perfusion of the tumor tissue

Specific Receptor Binding

Radiolabeled Peptides

SST receptors

- VIP receptors
- Steroid Hormone Receptors
- Adrenergic Presynaptic Receptors and Storage
- LDL Receptors
- Radiolabeled Antibodies

- Somatostatin receptors
 - Somatostatin

- Somatostatin analogues
- Radiolabeled SST analogs
- VIP Receptors
 - I-123 VIP

Somatostatin

- SST14 & SST28: two naturally occurring bioactive somatostatin products
- Phe 7, Trp 8, Lys 9, Thr 10: are necessary for biological activity in SST 14
- Trp and Lys: essential; Phe and Thr: can undergo minor substitutions



Somatostatin

- Secretion: throughout the body
- Function: inhibition of secretion of GH, glucagon, insulin, gastrin, and other hormones by the pituitary and GI tract
- Receptors: G-protein-coupled receptors
 - 5 subtypes: SSTR1 to SSTR5
 - On cells of neuroendocrine origin as well as on lymphocytes
 - Neuroendocrine tumors (small cell lung cancers, and medullary thyroid carcinomas)

Somatostatin analogues

- have greater biological stability than SST 14
- consist of hexapeptide and octapeptide molecules, which incorporate the biologically active core of SST 14
- Seglitide

- Octreotide
- Somatuline
- Lanreotide

RC-160





Octreotate





from: Wikipedia, octreotate

Octreotide



Octreotide

But a reduced amino alcohol

from: Wikipedia, octreotide





Somatostatin14 → Octreotide → DOTATOC

重新組裝&thr→throl

Phe³ \rightarrow tyr³ 並加上DOTA

= Edotreotide (USAN, codenamed SMT487)

DOTATOC





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The relationship between...

- Somatostatin: SST14 or SST28
- Octreotate: 8 amino acid
- Octreotide: 8 amino acid, thre→ throl
- DOTA-TATE: octreotate phe→ tyr + DOTA
- DOTA-TOC: octreotide phe \rightarrow tyr + DOTA
- Pentreotide: octreotide + DTPA
- DOTA-LAN: lanreotide + DOTA
- Y90-DOTA-Tyr³-octreotide: DOTATOC+Y90

DOTA

DOTA (chelator)



- 1,4,7,10-tetraazacyclododecane-1,4,7,10tetraacetic acid, formula (CH₂CH₂NCH₂CO₂H)₄
- The molecule consists of a central 12-membered tetraaza (i.e., containing four nitrogen atoms) ring
- DOTA is used as a complexing agent (錯合劑、 複合劑), especially for lanthanide(30%元素) ions
- Its complexes have medical applications as contrast agents and cancer treatments.

Radiolabeled SST Analogs

1. [¹²³l-Tyr³]-octreotide

- The 1st radiotracer introduced for imaging SSTR-positive tumors
- in vivo dehalogenation and biliary excretion → accumulation of activity in the intestines and bladder → interpretation difficulty
- 2. [¹¹¹In-DTPA-d-Phe¹]-octreotide
 - In-111 pentetreotide, Octreoscan[®]
 - High specific activity (5-6 mCi of In-111/10 ug octreotide)
 - Filtrated by glomerulus, and reabsorbed in renal tubules partially → prolonged residence time of renal activity
 - Rapidly cleared from kidneys (50% within 5h) → less intestinal activity than [123 I-Tyr 3]-octreotide

Specific Receptor Binding-Radiolabeled peptides
Radiolabeled SST Analogs
3. 90Y/111In-DOTA-lanreotide
90Y/111In-DOTA-LAN
SSTR1: low affinity (Kd 200 nM)

- SSTR2-5: high affinity (Kd 1-10 nM)
- 9°Y-DOTA-LAN: Tx potential under investigation
- 4. ⁹⁰Y/¹¹¹In-DOTA-TOC
 - 9°Y-DOTA-TOC: Tx potential under investigation
- 5. ^{99m}Tc-P829

- NeoTect[®], Amersham Inc
- approved by the FDA for imaging lung tumors

- Somatostatin receptors
 - Somatostatin

- Somatostatin analogues
- Radiolabeled SST analogs
- VIP Receptors
 - I-123 VIP

Vasoactive intestinal peptide (VIP) & VIP receptors

- 28-amino-acid neuroendocrine mediator
- broad range of biological activity in diverse cells and tissues:
 - Vasodilator
 - promotes the growth and proliferation of normal and malignant cells.
- VIP receptors

- Cell membrane of GI tract: widely distributed
- various other cell types
- Icreased VIP receptor expression:
 - Adenocarcinomas
 - breast cancers
 - Melanomas
 - Neuroblastomas
 - pancreatic carcinomas

- High-specific-activity 123 I-VIP (150–200 MBq/µg)
- Specific uptake:

- primary tumors
- metastases (in liver, lung, and LNs) of pancreatic adenocarcinoma, colon adenocarcinoma, or GI neuroendocrine tumors
- Interaction between VIP and SST on various cell types
 - high-affinity binding of 123 I-VIP to SSTR 3 suggests that the SSTR 3 receptor subtype might be the site of crosscompetition between VIP and SST