Development of ¹⁵³Sm/¹⁷⁷Lu-EDTMP as a possible therapeutic complex

Hassan Ranjbar¹, Ali Bahrami-Samani¹, Davood Beiki², Mohammad Ghannadi-Maragheh¹

¹Radiopharmaceutical Research and Development Lab (RRDL), Nuclear Science and Technology Research Institute (NSTRI), P.O. Box 14395-836, Tehran, Iran

² Research Center for Nuclear Medicine, Tehran University of Medical Sciences, Tehran, Iran

(Received 12 April 2016, Revised 16 July 2016, Accepted 17 July 2016)

ABSTRACT

Introduction: Targeted radionuclide therapy (TRT) has been demonstrated to be an effective therapeutic tool in patients with disseminated bone metastasis. TRT is generally performed with a single radionuclide. In this study we investigated the feasibility of combined TRT with a high-energy beta emitter (¹⁵³Sm) and a low energy beta emitter (¹⁷⁷Lu) in wistar rats.

Methods: The cocktail complex of ¹⁵³Sm/¹⁷⁷Lu-EDTMP was prepared. To determine the effect of metal-to-ligand (Me:EDTMP) molar ratio on labeling yield, several complex were analyzed after changing Me:EDTMP molar ratio from 1:1 to 1:50. ¹⁵³Sm/¹⁷⁷Lu-EDTMP was administered intravenously through the tail vein of wistar rats. Biodistribution data were collected at 2 hours to 7 day post injection and scintigraphic images were taken at 24 hours and 1, 2 week after administration of radiopharmaceutical.

Results: The results revealed high skeletal uptake (3.5% and 3.4% ID/g at 24 hours post injection for ¹⁵³Sm and ¹⁷⁷Lu, respectively) with rapid blood clearance and minimal uptake in any of the major organs. Scintigraphic images verified high skeletal uptake.

Conclusion: Our results indicate that the combination of ¹⁵³Sm and ¹⁷⁷Lu is feasible and safe. This study suggests that the combination of different radionuclides with different radiation energies and half-life, such as ¹⁵³Sm and ¹⁷⁷Lu, could be advantageous in patients with tumoral lesions of different sizes.

Key words: ¹⁵³Sm/¹⁷⁷Lu-EDTMP; Radiopharmaceutical cocktail; Biodistribution; Radiolabeling; Bone pain palliation

Iran J Nucl Med 2017;25(1):11-16 Published: January, 2017 http://irjnm.tums.ac.ir

Corresponding author: Dr. Hasan Ranjbar, Radiopharmaceutical Research and Development Lab (RRDL), Nuclear Science and Technology Research Institute (NSTRI), P.O. Box 14395-836, Tehran, Iran. E-mail: hranjbar@aeoi.org.ir

INTRODUCTION

Metastasis is largely implicated in cancer aggressiveness and is a very common and often painful experienced by many cancer patients. It is responsible for more than 90% of fatality as documented in patients with solid tumors [1, 2]. Metastasis is a complex event leading to the formation of new tumoral sites arising from a primary tumor [3, 4]. In advanced stages, these are frequently associated with adverse clinical effects including pain, fractures, and hypercalcemia causing significant morbidity affecting functional status and quality of life [5].

Radiopharmaceuticals have a vital role in the treatment of patients with multiple metastatic lesions. Bone-seeking radiopharmaceuticals play an important role in reduction of pain from bone metastases [6].

Bone-targeted radionuclide therapy (BTRT) with agents such as Strontium-89 (89Sr), or radiolabelled bisphosphonates with Samarium-153 $(^{153}Sm),$ Rhenium-186 (186Re) and Rhenium-188 (188Re) may be effective in bone metastatic disease. predominantly in prostate and breast cancer patients [7-14]. These kinds of therapy do not have major limitations of other therapies, such as chemotherapy and external beam radiotherapy instead demonstrate many advantages including the ability to treat multiple sites of tumoral involvement simultaneously and lack of significant conflict with other treatments [15].

EDTMP or ethylene diamine tetra methylene phosphonic acid is nitrogenous, polyphosphonic acid chelator that complexes with various radiometals, particularly lanthanides (Figure 1). all the complexes have excellent pharmacological characteristics including rapid blood clearance and high bone affinity [16, 17].



Fig 1. Structure of EDTMP

The current practice in treatment of bone metastasis utilizes a single radioisotope such as ¹⁵³Sm or ¹⁷⁷Lu [18-21]. ¹⁷⁷Lu emits beta particles with a low maximum energy ($E_{\beta,max} = 0.497$ MeV) and short maximum particle range in tissues that allows concentration of most of its dose in small metastases, whereas ¹⁵³Sm has higher energy ($E_{\beta,max} = 0.81$ MeV)

and a longer particle range in tissues that allows for the deposition of high radiation doses in larger metastases. Furthermore, pain relief due to intravenous administration of ¹⁵³Sm-EDTMP, a betaemitter with a physical half-life of 1.9 days, typically occurs within 1 week post injection [22], whereas it occurs within 2 week in the case of ¹⁷⁷Lu-EDTMP, a beta-emitter with a physical half-life of 6.7 days. Because of these complementary characteristics [23], we hypothesized that the combination of different radionuclides with different characteristics (radiation energies, half-life) such as ¹⁵³Sm and ¹⁷⁷Lu could be more advantageous to patients with painful bone metastasis.

To our knowledge, there is no study in the literature evaluating the use of the combined radiopharmaceutical of ¹⁵³Sm/¹⁷⁷Lu-EDTMP for metastatic bone pain palliation therapy. This study aims to consider whether it is feasible to use combined radiopharmaceuticals for this purpose.

Therefore, the cocktail complex ¹⁵³Sm/¹⁷⁷Lu-EDTMP was prepared. Contrary to our previous work [24], in this paper contribution of each radionuclide in the biodistribution of compositional radiopharmaceutical of ¹⁵³Sm/¹⁷⁷Lu-EDTMP was separately evaluated. Also due to difference in radiolabeling of each component, radiolabeling yield of both components was separately measured by gamma spectroscopy method using HPGe detector. In order to find pharmacokinetics of ¹⁵³Sm/¹⁷⁷Lu-EDTMP, based on its short (¹⁵³Sm) and long half-lives (¹⁷⁷Lu) components, sequential scintigraphic imaging was acquired at different time intervals (24 hours and 1, 2 week) after administration of the radiopharmaceutical.

METHODS

Preparation and quality control of $^{153}\mathrm{Sm}/^{177}\mathrm{Lu-EDTMP}$

¹⁵³Sm/¹⁷⁷Lu-EDTMP was prepared according to the previously described procedure [24]. In the first step, ¹⁷⁷Lu was produced by neutron irradiation of 150 ug of enriched Lu₂O₃ (¹⁷⁷Lu, 64.1% from Trace Inc.), according to the previous procedures at Tehran Research Reactor for a period of 7 days. Furthermore, ¹⁵³Sm was produced by neutron irradiation of 1 mg of enriched ¹⁵²Sm₂O₃ (¹⁵²Sm, 98.7% from Trace Inc.) at a thermal neutron flux of 4×1013 n.cm-2.s-1 for 60 hours. The irradiated targets were dissolved in 1.0 M HCl to prepare 153Sm/ 177Lu chloride solution. In the second step, for labeling, an appropriate amount of the 153Sm/177Lu chloride solution containing the required activity was added to the desired amounts of EDTMP solution. The radiolabeling yield of the ligand was determined with paper chromatography

using Whatman No. 2 paper in NH4OH:MeOH:H2O (2:20:40) mixture.

Optimization study of ¹⁵³**Sm**/¹⁷⁷**Lu-EDTMP**

To determine the effect of metal-to-ligand molar ratio (Me:EDTMP) on labeling yield, five vials containing Me:EDTMP molar ratio from 1:1 to 1:50 were used. The labeling yields of solutions were determined for various molar ratios. The solutions to be used in animals were first adjusted to pH 7 and were made sterile by using a Millipore filter prior to injection. Labeling yields of all the complexes under study were analyzed after changing Me:EDTMP molar ratio from 1:1 to 1:50. The radiolabeling yields of complexes were determined by paper chromatography. Five microliters of the test solution was spotted at 1 cm from bottom end of Whatman 3MM chromatography paper strips (10×1.5 cm). The strips were eluted with NH4OH: methanol: water (0.2:2:4; v/v/v) mixture and then dried. Activity was measured using each 1 cm cut-sections of the strip separately in an HPGe detector. Labeled complex moved with the solvent front (Rf = 9-10), while ionic form remained at the point of spotting (Rf=0). Labeling yields of the complexes prepared at optimal parameters were also studied after 48 hours to evaluate the stability.

Biodistribution of ¹⁵³Sm/¹⁷⁷Lu-EDTMP in rats

In order to determine the biodistribution of the radiolabeled complex in wild type rats, 0.1 ml of the ¹⁵³Sm/¹⁷⁷Lu-EDTMP complex was injected intravenously into rats through their tail veins. The animals were sacrificed by CO₂ asphyxiation at the end of 2, 4, 24, 48 hours and 7 days post injection. The required tissues and the organs were excised for the calculations of percentage of activity per organ. The larger organs such as liver and intestines were weighed and then a small weighed portion was taken for the purpose of counting and adjusted for whole organ. Femur was taken as a representative for skeletal uptake. The associated activity was measured by a p-type HPGe detector using γ photons with energies of respective radionuclide.

Scintigraphic studies in rats

Scintigraphic studies were done on Wistar male rats to visually evaluate the distribution of EDTMP labeled with ¹⁷⁷Lu for comparison with ¹⁵³Sm. The Wistar rats were intravenously injected 0.15 ml of the complex solution containing ~150 μ Ci of each radionuclide through their tail vein. Planar images were acquired at the specified time intervals (24 hours and 1, 2 week after administration of the radiopharmaceutical) by a dual-head SPECT system

with a low-energy-higher resolution (LEHR) collimator.

RESULTS AND DISCUSSION

Results of preparation and quality control of $^{153}\mathrm{Sm}/^{177}\mathrm{Lu}\text{-}\mathrm{EDTMP}$

Specific activities of the produced ¹⁵³Sm and ¹⁷⁷Lu were 1.5 and 75 GBq/mg, respectively. In this work, the radiolabeling yield was calculated above 98% by using Whatman No. 2. The complex was found to be stable in final pharmaceutical sample.

The effect of molarities of EDTMP and radionuclide on labeling

Briefly, 0.1 ml of the complex solution containing ~100 μ Ci of ¹⁵³Sm and ~100 μ Ci of ¹⁷⁷Lu was added to five vials containing 0.1, 0.5, 1, 2, and 5 mg EDTMP which correspond to molar ratios (mole of Sm:mole of EDTMP) 1:1, 1:5, 1:10, 1:20 and 1:50, respectively. Radiolabelling yield of these formulations was determined to be 2.6%, 35.3%, 49.5%, 72.5% and 98.5%, respectively. Metal/ligand ratio versus percent labeling yields was depicted for ¹⁵³Sm/¹⁷⁷Lu-EDTMP and each of its components separately in Figure 2. The graph clearly demonstrates 1:50 metal/ligand ratio is the optimum value in labeling process in vitro. It is worth mentioning, as well demonstrated in prior literature, in vivo stability (human clinical studies) requires a much higher ligand/metal ratio than that used in this study.



Fig 2. Labelling yield for various Metal:EDTMP molar ratios

Results of biodistribution of ¹⁵³Sm/¹⁷⁷Lu-EDTMP in rats

 153 Sm/ 177 Lu-EDTMP prepared at optimum labeling parameters and giving labeling yields of ~ 98% as mentioned in the above section were used for biodistribution studies in wistar rats up to 7 days post injection. Distribution of the activity in different organs (Figure 3) was calculated as the percentage of injected activity (dose) per g of organ (% ID/g).



Fig 3. Biodistribution of 153 Sm/ 177 Lu-EDTMP in wistar type rats (n = 3) based on measurement of 153 Sm and 177 Lu, separately.

The results are plotted in Figure 3 from which we can draw some general conclusions:

- (i) The results of the biodistribution studies revealed significant bone uptake within 4 hours post injection. The observed uptake in femur was 2.5% and 2.7% ID/g at 4 hours post injection for ¹⁵³Sm and ¹⁷⁷Lu respectively. The femur uptake was observed to increase to 3.5% and 3.4% ID/g at 24 hours post injection.
- (ii) Almost all the activity from the blood was cleared within 4 hours post injection.
- (iii) Bone uptake remained almost constant until 1 week.
- (iv) No significant accumulation of activity was observed in any of the major organs.
- (v) Not only combined radiopharmaceutical is accumulated in target organ (bone) but also amount of distribution of its components and their quantities are similar. In other words, Results showed that both the radionuclides in the target organ are accumulated simultaneously and to the same extent.

Results of imaging Studies in Rats

The scintigraphic images of Wistar rats were recorded at 24 hours and 1, 2 week after the administration of 153 Sm/ 177 Lu-EDTMP complex. In Figure 4A, the gamma camera was calibrated for 103

keV gamma photons of 153 Sm whiles in Figure 4B, the gamma camera was calibrated for 208 keV gamma photons of 177 Lu.

Some of the results that may be obtained include:

- (i) The images (Figure 4) demonstrated selective uptake in the skeleton, findings which were in accordance with the biodistribution results.
- (ii) At 24 hours post injection, the total skeleton was clearly visible and no uptake was observed in any other organ.
- (iii) The skeletal activity was found to be retained without any significant leaching up to 2 week post injection.
- (iv) The images showed the radionuclide with short half-life (high radiation rate) is almost decayed after two weeks, while the longer half-life radionuclide still is present in the target.

As a comparison, the labeling and QC of the ¹⁵³Sm/¹⁷⁷Lu-EDTMP complex was more or less similar to both ¹⁵³Sm-EDTMP and ¹⁷⁷Lu-EDTMP.

Production of ¹⁵³Sm and ¹⁷⁷Lu with high radionuclide purity and sufficient specific activity makes them an desirable agent for therapeutic applications. The low energy β emission of ¹⁷⁷Lu can transfer high radiation doses to the small target. Because of its short emission range, most of its energy is deposited in 2017



Fig 4. Scintigraphic images of ¹⁵³Sm/¹⁷⁷Lu-EDTMP 24 hour and 1, 2 week post injection in wistar rat based on gamma photons: 103 keV for ¹⁵³Sm (A) and 208 keV for ¹⁷⁷Lu (B).

small metastases, whereas ¹⁵³Sm has higher energy and a longer particle range in tissues that allows for the deposition of high radiation doses in larger tumoral tissues. The high energy deposition of ¹⁵³Sm in larger tumoral tissues and the high deposition efficacy of ¹⁷⁷Lu in smaller tumors may result in desirable synergistic effects. Also the shorter half-life of ¹⁵³Sm leads to a higher dose rate and the longer half-life of ¹⁷⁷Lu leads to a lower and continuous dose rate. Because of these supplementary specifications, the combination of ¹⁵³Sm and ¹⁷⁷Lu would be quite reasonable. The results show that ¹⁵³Sm and ¹⁷⁷Lu could be simultaneously labeled with EDTMP with radiochemical purity of 98%. Also, the ¹⁵³Sm/¹⁷⁷Lu-EDTMP preparation of radiopharmaceutical is simple and the complex is stable.

¹⁵³Sm/¹⁷⁷Lu-EDTMP radiopharmaceutical was administered intravenously through the tail vein of wistar rats and biodistribution data were collected

from 2 hours to 7 day post injection. Biodistribution studies of ${}^{153}\text{Sm}/{}^{177}\text{Lu-EDTMP}$ revealed high skeletal uptake (3.5% and 3.4% ID/g at 24 hours post injection for ${}^{153}\text{Sm}$ and ${}^{177}\text{Lu}$ respectively) with rapid blood clearance and minimal uptake in any of the major organs. Uptake of both the radionuclides in the bone occurred simultaneously with similar extent.

Scintigraphic images of the wistar rats injected with ¹⁵³Sm/¹⁷⁷Lu-EDTMP at 24 hours and 1, 2 week after administration of radiopharmaceutical, verified high skeletal uptake. The skeleton was clearly visible, and no significant uptake in other organs was observed.

CONCLUSION

Our study indicates that using combined radiopharmaceutical is feasible and safe. Furthermore, ¹⁵³Sm/¹⁷⁷Lu-EDTMP could be specially advantageous when tumoral lesions of different sizes are present.

Acknowledgments

The authors would like to thank Mrs M. Mansurianfar for her support. We also would like to appreciate Mr M. Meftahi, Mr M. Yaghoobi, Mr E. Mirrezaei and Mr A. Yousefi, for all the help in assisting the gamma-ray spectroscopy studies.

REFERENCES

- Tannock IF, de Wit R, Berry WR, Horti J, Pluzanska A, Chi KN, Oudard S, Théodore C, James ND, Turesson I, Rosenthal MA, Eisenberger MA; TAX 327 Investigators. Docetaxel plus prednisone or mitoxantrone plus prednisone for advanced prostate cancer. N Engl J Med. 2004 Oct 7;351(15):1502-12.
- Roodman GD. Mechanisms of bone metastasis. N Engl J Med. 2004 Apr 15;350(16):1655-64.
- Lipton A. Implications of bone metastases and the benefits of bone-targeted therapy. Semin Oncol. 2010 Oct;37 Suppl 2:S15-29.
- Fizazi K, Lipton A, Mariette X, Body JJ, Rahim Y, Gralow JR, Gao G, Wu L, Sohn W, Jun S. Randomized phase II trial of denosumab in patients with bone metastases from prostate cancer, breast cancer, or other neoplasms after intravenous bisphosphonates. J Clin Oncol. 2009 Apr 1;27(10):1564-71.
- Pandit-Taskar N, Larson SM, Carrasquillo JA. Boneseeking radiopharmaceuticals for treatment of osseous metastases, Part 1: α therapy with 223Ra-dichloride. J Nucl Med. 2014 Feb;55(2):268-74.
- Ayati N, Aryana K, Jalilian A, Hoseinnejad T, Samani AB, Ayati Z, Shariati F, Zakavi SR. Treatment efficacy of (153)Sm-EDTMP for painful bone metastasis. Asia Ocean J Nucl Med Biol. 2013 Spring;1(1):27-31.
- Pirayesh E, Amoui M, Mirzaee HR, Tabei F, Rakhsha A, Kalantari BA, Shafiei B, Assadi M, Asli IN. Phase 2 study of a high dose of 186Re-HEDP for bone pain palliation in patients with widespread skeletal metastases. J Nucl Med Technol. 2013 Sep;41(3):192-6.
- Rubini G1, Nicoletti A, Rubini D, Asabella AN. Radiometabolic treatment of bone-metastasizing cancer: from 186rhenium to 223radium. Cancer. Cancer Biother Radiopharm. 2014 Feb;29(1):1-11.
- Sartor O, Reid RH, Bushnell DL, Quick DP, Ell PJ. Safety and efficacy of repeat administration of samarium Sm-153 lexidronam to patients with metastatic bone pain. Cancer. 2007 Feb 1;109(3):637-43.
- Kuroda I. Strontium-89 for prostate cancer with bone metastases: the potential of cancer control and improvement of overall survival. Ann Nucl Med. 2014 Jan;28(1):11-6.
- Iakovou I, Doumas A, Badiavas K, Mpalaris V, Frangos S, Farmakis G. Pain palliative therapy in women with breast cancer osseous metastatic disease and the role of specific serum cytokines as prognostic factors. Cancer Biother Radiopharm. 2014 Apr;29(3):116-23.
- Pacilio M, Ventroni G, Basile C, Ialongo P, Becci D, Mango L. Improving the dose-myelotoxicity correlation in radiometabolic therapy of bone metastases with 153Sm-EDTMP. Eur J Nucl Med Mol Imaging. 2014 Feb;41(2):238-52.

- Paes FM, Serafini AN. Systemic metabolic radiopharmaceutical therapy in the treatment of metastatic bone pain. Semin Nucl Med. 2010 Mar;40(2):89-104.
- 14. Biersack HJ, Palmedo H, Andris A, Rogenhofer S, Knapp FF, Guhlke S, Ezziddin S, Bucerius J, von Mallek D. Palliation and survival after repeated (188)Re-HEDP therapy of hormone-refractory bone metastases of prostate cancer: a retrospective analysis. J Nucl Med. 2011 Nov;52(11):1721-6.
- **15.** Ferreira S, Dormehl I, Botelho MF. Radiopharmaceuticals for bone metastasis therapy and beyond: a voyage from the past to the present and a look to the future. Cancer. Cancer Biother Radiopharm. 2012 Nov;27(9):535-51.
- Ando A, Ando I, Tonami N, Kinuya S, Kazuma K, Kataiwa A, Nakagawa M, Fujita N. 177Lu-EDTMP: a potential therapeutic bone agent. Nucl Med Commun. 1998 Jun;19(6):587-91.
- Láznícek M, Láznícková A, Budský F, Prokop J, Kopicka K. Comparison of biological characteristics of EDTMP complexes with 99mTc, 111In and 153Sm in rats. Appl Radiat Isot. 1994 Sep;45(9):949-53.
- 18. Beiki D, Haddad P, Fallahi B, Keyvan A, Gholamrezanezhad A, Mirzaei H, Saghari M, Amouzegar-Hashemi F, Kazemian A, Fard-Esfahani A, Eftekhari M. Effectiveness and complications of 153Sm-EDTMP in palliative treatment of diffuse skeletal metastases. Iran J Nucl Med. 2013;21(1):26-32.
- 19. Chakraborty S, Das T, Banerjee S, Balogh L, Chaudhari PR, Sarma HD, Polyák A, Máthé D, Venkatesh M, Janoki G, Pillai MR. 177Lu-EDTMP: a viable bone pain palliative in skeletal metastasis. Cancer. Cancer Biother Radiopharm. 2008 Apr;23(2):202-13.
- 20. Shinto AS, Shibu D, Kamaleshwaran KK, Das T, Chakraborty S, Banerjee S, Thirumalaisamy P, Das P, Veersekar G. ¹⁷⁷Lu-EDTMP for treatment of bone pain in patients with disseminated skeletal metastases. J Nucl Med Technol. 2014 Mar;42(1):55-61.
- Yuan J, Liu C, Liu X, Wang Y, Kuai D, Zhang G, Zaknun JJ. Efficacy and safety of 177Lu-EDTMP in bone metastatic pain palliation in breast cancer and hormone refractory prostate cancer: a phase II study. Clin Nucl Med. 2013 Feb;38(2):88-92.
- 22. Collins C, Eary JF, Donaldson G, Vernon C, Bush NE, Petersdorf S, Livingston RB, Gordon EE, Chapman CR, Appelbaum FR. Samarium-153-EDTMP in bone metastases of hormone refractory prostate carcinoma: a phase I/II trial. J Nucl Med. 1993 Nov;34(11):1839-44.
- 23. Ranjbar H, Ghannadi-Maragheh M, Bahrami-Samani A, Beiki D. Dosimetric evaluation of 153Sm-EDTMP, 177Lu-EDTMP and 166Ho-EDTMP for systemic radiation therapy: Influence of type and energy of radiation and half-life of radionuclides. Radiat Phys Chem. 2015;108:60-64.
- Ranjbar H, Bahrami-Samani A, Beiki D, Shirvani-Arani S, Ghannadi-Maragheh M. Evaluation of Evaluation of 153Sm/177Lu-EDTMP mixture in wild-type rodents as a novel combined palliative treatment of bone pain agent. J Radioanal Nucl Chem. 2015;303(1):71–79.

2017