

# Expanding the radioisotope toolbox for nuclear medicine

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**UAB** THE UNIVERSITY OF  
ALABAMA AT BIRMINGHAM

Knowledge that will change your world

# University of Alabama at Birmingham

- Located in Birmingham, AL
- The UAB Cyclotron Facility and Advanced Imaging Facility are located in the center of the medical complex at the O'Neal Comprehensive Cancer Center. Medical and main campus are contiguous.
  - Walk from Chemistry to Cyclotron etc



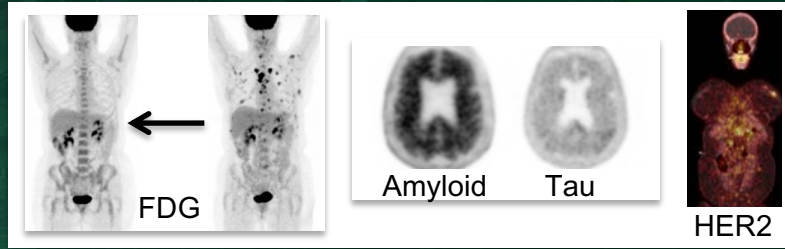
## Fun facts timeline:

- The TR24 cyclotron was installed in April of 2013 and facilities were completed in July of 2014.
- The first patient dose was injected in January of 2016.
- The UAB cyclotron facility now holds >15 active INDs





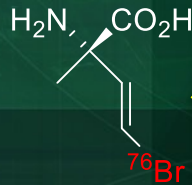
# Bidirectional Translational Molecular Imaging Program at UAB



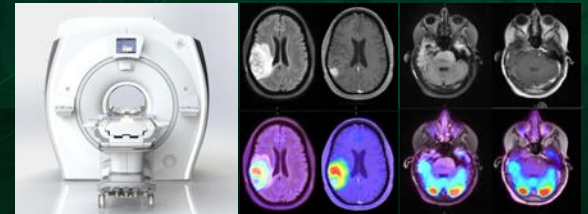
Clinical trials with molecular imaging and therapeutics



Isotope production and MI agent development



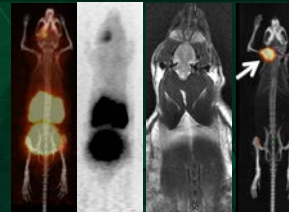
UAB Cyclotron Facility



PET/CT and PET/MRI in AIF



In vitro testing

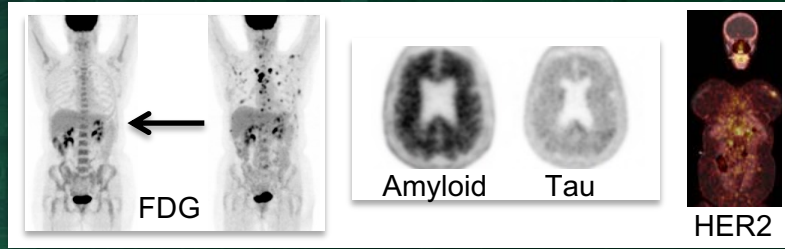


Small animal imaging

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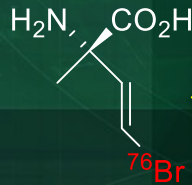
# Bidirectional Translational Molecular Imaging Program at UAB



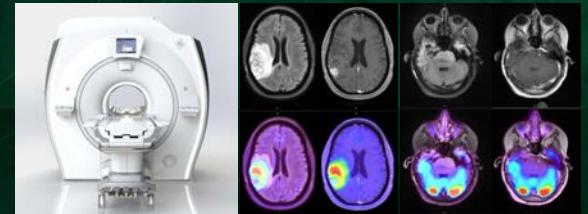
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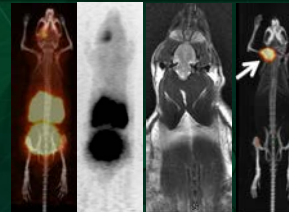
UAB Cyclotron Facility



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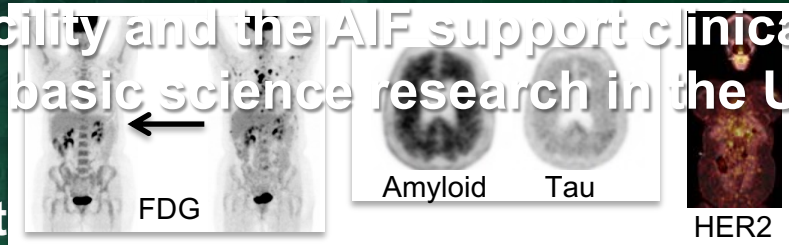
Small animal imaging

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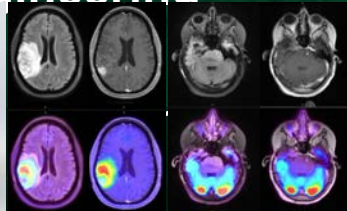
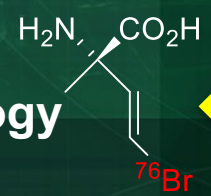
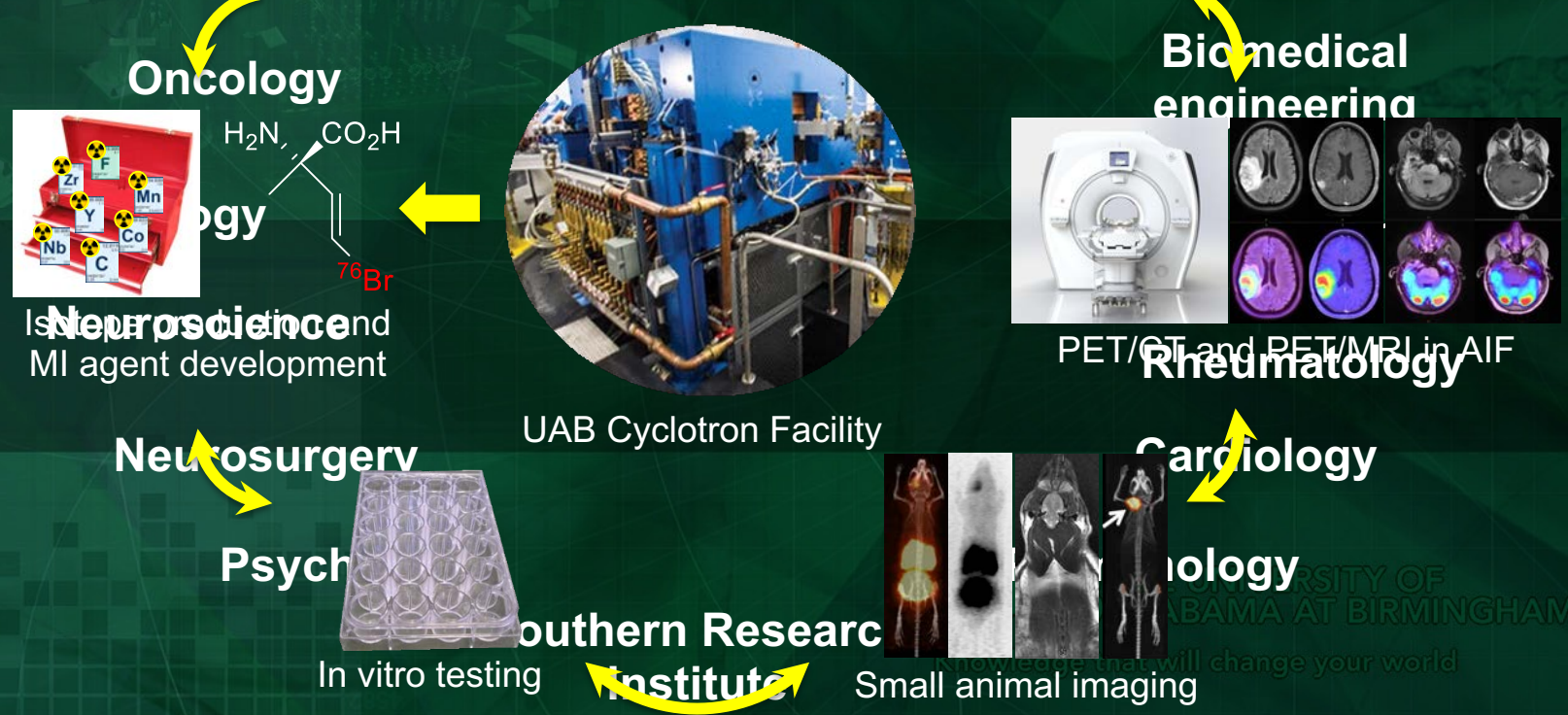
Knowledge that will change your world



**The Cyclotron Facility and the AIF support clinical services as well as clinical and basic science research in the UAB community**



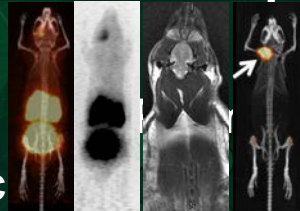
**Translational Molecular Imaging Program at UAB** **Children's of Alabama**



PET/CT and PET/MRI in AIF



In vitro testing



Small animal imaging

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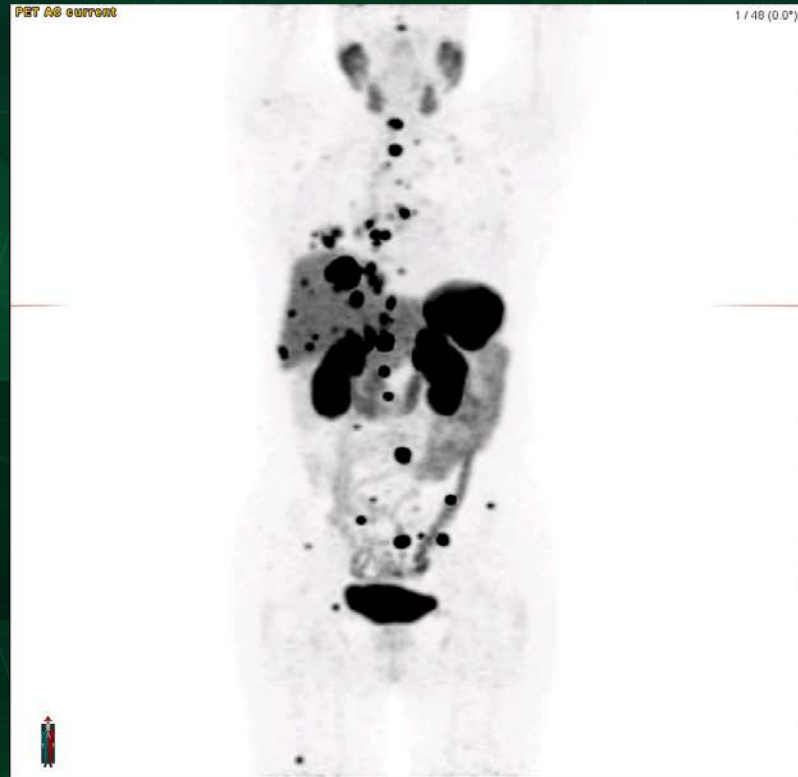
# Why develop new imaging agents?

- Imaging more than detection of disease:
  - Oncology
  - Neurology
  - Cardiology
- Imaging can provide more information: detection, cell proliferation, amyloid burden, receptor status, oxygenation, microenvironment, immune cell infiltration.....
- Prediction of treatment response.

# Expanding the Toolbox of Imaging Agents



$[^{18}\text{F}]$ FDG



$[^{68}\text{Ga}]$ DOTATATE

# Status of Active Radiotracers for Human Use at UAB

Radiopharmaceutical	Use	Status
[ <sup>18</sup> F]FLT	Proliferation	IND approved
[ <sup>13</sup> N]NH <sub>3</sub>	Cardiac blood flow	IND approved, ANDA submitted
[ <sup>68</sup> Ga]DOTATATE	SSTR status	FDA approved
[ <sup>18</sup> F]FMISO	Hypoxia	IND approved
[ <sup>89</sup> Zr]Trastuzumab	HER2 status (breast cancer)	IND approved
[ <sup>18</sup> F]FET	Amino acid transport	IND approved
[ <sup>11</sup> C]PiB	Amyloid	IND approved
[ <sup>18</sup> F]DPA-714	TSPO (neuroinflammation)	IND approved
[ <sup>68</sup> Ga]PSMA-11	PSMA status (prostate cancer)	IND approved
[ <sup>89</sup> Zr]Panitumumab	EGFR status (colon cancer)	IND approved
[ <sup>18</sup> F]AV1451	Tau protein	IND approved
[ <sup>68</sup> Ga]GZP*	Granzyme B (Immune Activation)	IND approved
[ <sup>11</sup> C]Acetate	Cardiac Metabolism	IND approved
[ <sup>89</sup> Zr]Oxine/White Blood Cells*	WBC tracking	IND approved
[ <sup>18</sup> F]MeFAMP*	Cancer metabolism	Chemistry initiated
[ <sup>15</sup> O]H <sub>2</sub> O	Blood flow	Chemistry initiated
[ <sup>11</sup> C]UCB-J	Synaptic Vesicle Glycoprotein 2A (SV2A)	Chemistry initiated

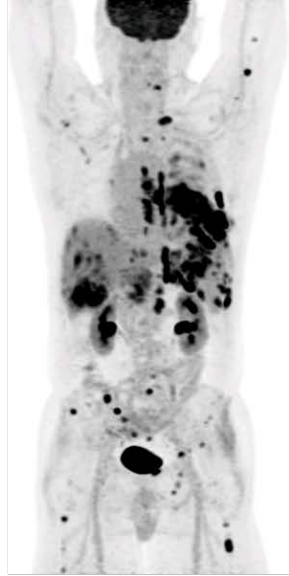
\*First in human compound



# Whole body PET tracers in use at UAB for oncology



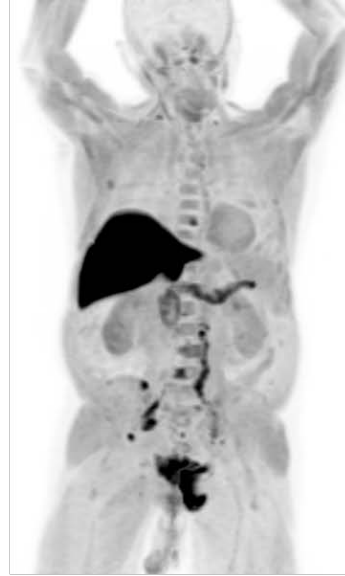
Bone turnover  
in skeletal metastases  
**[<sup>18</sup>F]fluoride**



Glucose metabolism  
in many cancers  
**[<sup>18</sup>F]FDG**



Somatostatin receptors  
in neuroendocrine cancers  
**[<sup>68</sup>Ga]DOTATATE**



Amino acid transport  
in prostate cancer  
**[<sup>18</sup>F]fluciclovine**



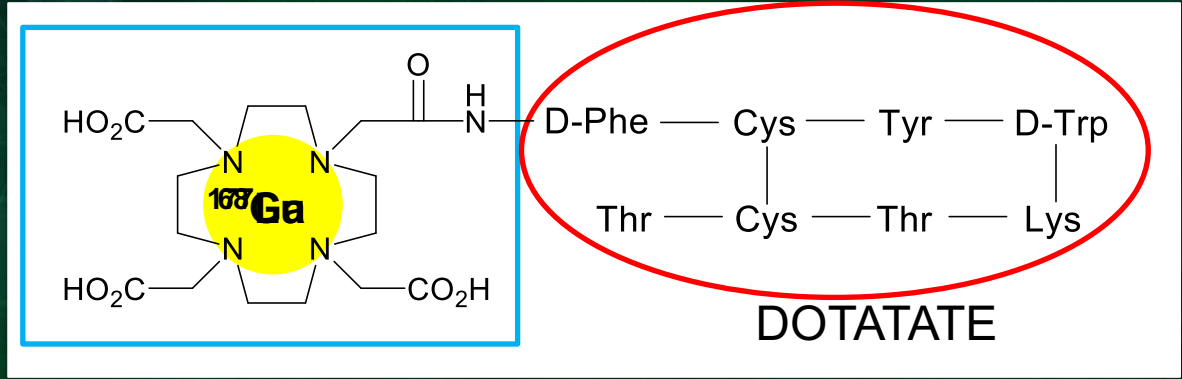
HER2 as a target for  
therapy in breast cancer  
**[<sup>89</sup>Zr]trastuzumab**

# Theranostics and radionuclide therapy for cancer



linker

Pharmacophore



- Some radiopharmaceuticals can be labeled for imaging and for therapy: **theranostic approach**

- Radionuclide therapies can succeed after other therapies fail.

- Imaging often guides therapy by demonstrating the entire tumor burden expresses the therapeutic target

[<sup>68</sup>Ga]DOTATATE for imaging (PET scan)

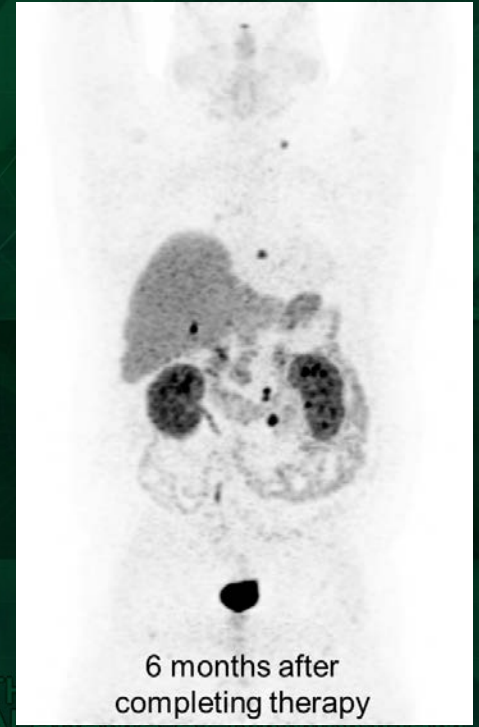
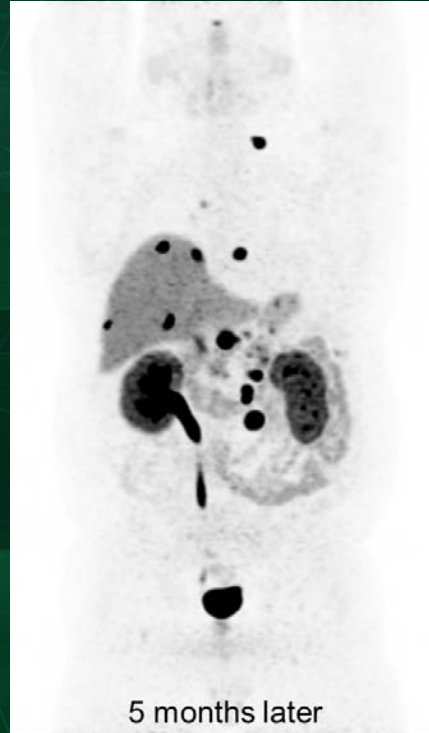
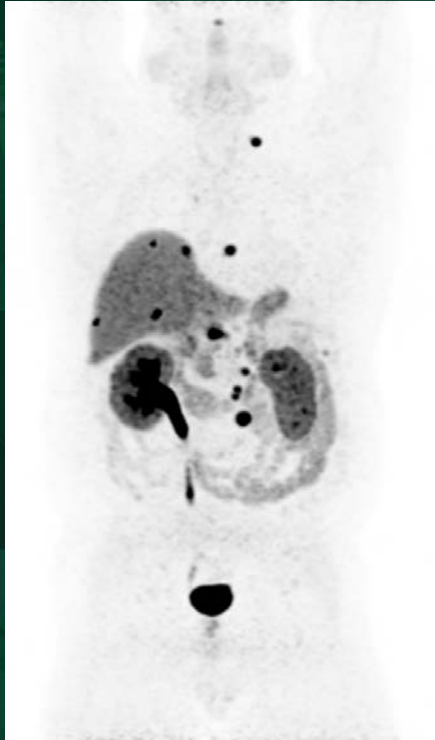


[<sup>68</sup>Ga]DOTATATE



[<sup>177</sup>Lu]DOTATATE

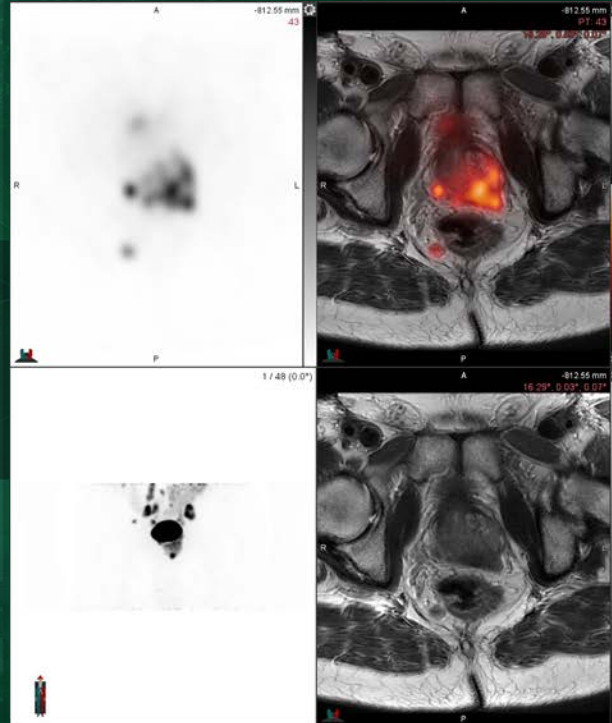
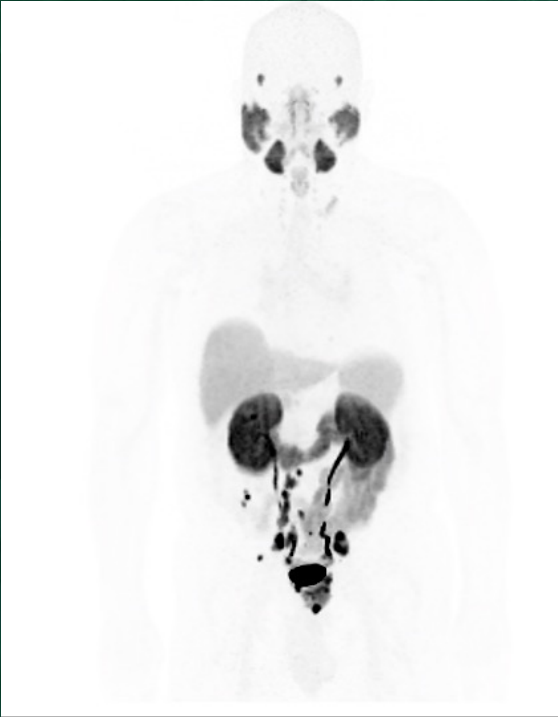
# [<sup>68</sup>Ga]DOTATATE imaging for disease progression and response to [<sup>177</sup>Lu]DOTATATE





# PSMA imaging with [<sup>68</sup>Ga]PSMA-11

## [<sup>68</sup>Ga]PSMA-11 for initial staging of prostate cancer



DIRIGES RE TARGETS

### Pylarify receives FDA approval as first and only commercially available PSMA PET imaging agent for prostate cancer

© May 28, 2021 | Vol. 47 No. 21 | f t in e b

FDA has approved Pylarify, an F18-labeled prostate-specific membrane antigen targeted positron emission tomography imaging agent to identify suspected metastasis or recurrence of prostate cancer.

Pylarify is sponsored by Lantheus Holdings Inc.

Pylarify is the first and only commercially available approved PSMA PET imaging agent for prostate cancer. The product will be immediately available in parts of the mid-Atlantic and southern regions and availability is expected to rapidly expand over the next six months with broad availability across the U.S. anticipated by year end.

Identification of suspected metastatic disease in men considering initial definitive therapy is important to optimize treatment planning and to avoid futile interventions.

Of men with localized prostate cancer who undergo initial curative intent/management, up to 50% may experience recurrence of their disease within ten years of treatment.

Recurrent disease is often detected by a rise in serum prostate-specific antigen (PSA) levels; however, conventional imaging, especially at low PSA levels, is not able to identify the location and extent of the disease in the majority of cases.

Pylarify was developed to target PSMA, a protein that is overexpressed on the surface of more than 90% of primary and metastatic prostate cancer cells. Pylarify binds to the target, enabling the reader of the PET scan to detect and locate the disease.

Cyclotron production of F18 offers high batch capacity and high image resolution, and F18's 110-minute half-life allows for wide geographic distribution.

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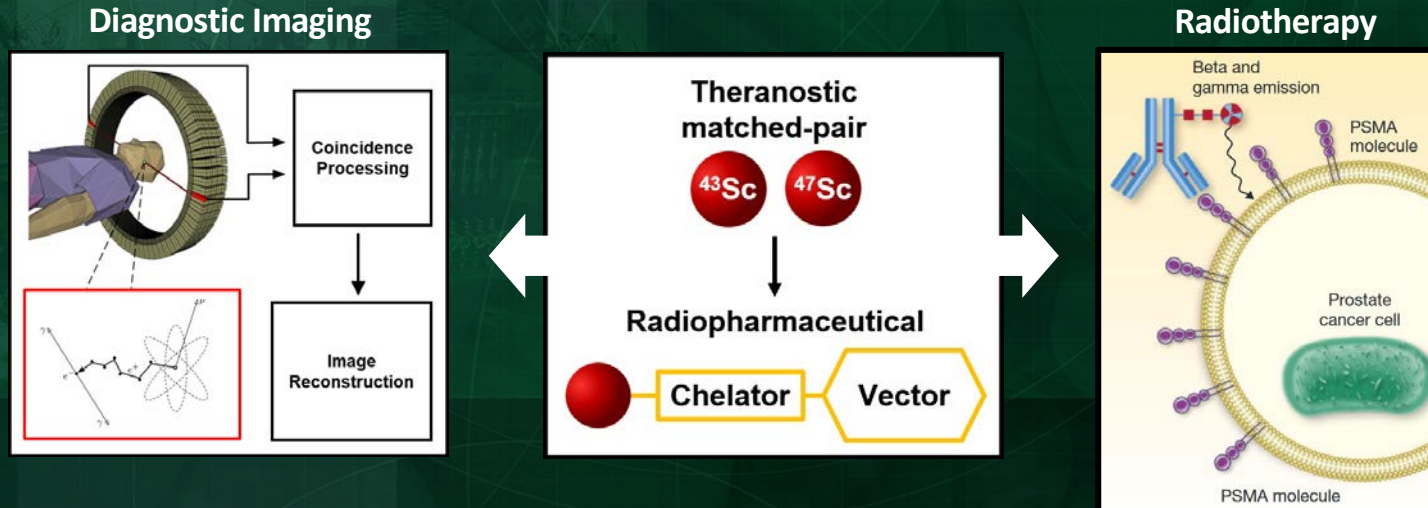
# Expanding the toolbox: Radioisotopes (beyond $^{18}\text{F}$ , $^{11}\text{C}$ , $^{13}\text{N}$ , $^{15}\text{O}$ , $^{68}\text{Ga}$ )

Isotope	Half-Life	Target Material	Status
$^{43,47}\text{Sc}$	3.9 h	Nat/EnrTi	Chemistry development
$^{45}\text{Ti}$	3.1 h	NatSc	Chemistry development
$^{48}\text{V}$	16 d	NatTi	Chemistry development
$^{52}\text{Mn}$	5.6 d	Nat/ $^{52}\text{Cr}$	Routine production for preclinical use
$^{55}\text{Co}$	17.5 h	$^{58}\text{Ni}$	Routine production for preclinical use
$^{64}\text{Cu}$	12.7 h	$^{64}\text{Ni}$	Routine production for preclinical and human use
$^{89}\text{Zr}$	3.27 d	$^{89}\text{Y}$	Routine production for preclinical and human use





# Matched Pair Radionuclides: $^{43}\text{Sc}$ and $^{47}\text{Sc}$



- Disease diagnosis, dosimetry evaluation, therapy, and assessment of response with identical pharmacokinetic profiles
- Potential production and separation using the same cyclotron, targets and separation chemistry

L. Schrevens et. al. The Role of PET Scan in Diagnosis, Staging, and Management of Non-Small Cell Lung Cancer. *The Oncologist*, 2004, vol. 9, no. 6, pgs 633-643

Langner, Jens.. MCS Thesis, University of Applied Sciences, Dresden, DE 2003

Farwell, M.D.; Pryma, D.A.; Mankoff, D.A. *Cancer*. 2014, vol. 120, no. 22, pgs 3433-3445

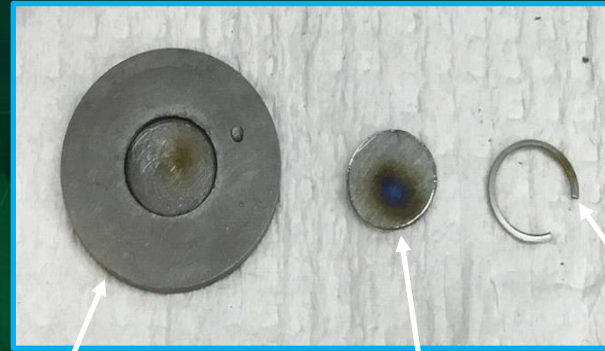
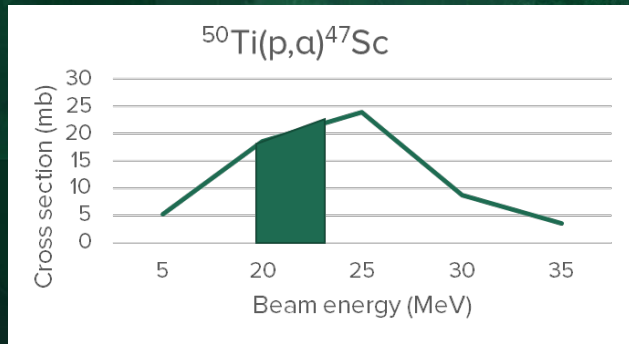
Simone II, C.B.; Hahn, S.M. *Clin Cancer Res*; 19(18), 2013

# Nuclear Reactions on Titanium

<b>V45</b> 7/- <b>0.55 s</b> $\beta^+$ $\gamma$ 40.1	<b>V46</b> 0+ <b>422.3 ms</b> $\beta^+$ 6.03 $\epsilon$ $\omega$	<b>V47</b> 3/- <b>32.6 m</b> $\beta^+$ 1.89, --- $\epsilon$ $\gamma$ 1794.0	<b>V48</b> 4+ <b>15.98 d</b> $\beta^+$ 1.04, ---, $\epsilon$ $\gamma$ 719.6 $\omega$ , 1408.1, ---	<b>V49</b> 7/- <b>331 d</b> $\epsilon$ no $\gamma$	<b>V50</b> 6+ <b>0.250</b> <b>1.4E17 a</b> $\beta^+$ 1.04, ---, $\epsilon$ $\gamma$ 719.6 $\omega$ , 1408.1, ---	<b>V51</b> 7/- <b>99.75</b>
<b>Ti44</b> <b>59.9 a</b> $\epsilon$ $\gamma$ 78.3D, 67.8D, ---	<b>Ti45</b> 7/- <b>3.078 h</b> $\beta^+$ 1.04, ---, $\epsilon$ $\gamma$ 719.6 $\omega$ , 1408.1, ---	<b>Ti46</b> <b>8.25</b>	<b>Ti47</b> 5/- <b>7.44</b>	<b>Ti48</b> <b>73.72</b>	<b>Ti49</b> 7/- <b>5.41</b>	<b>Ti50</b> <b>5.18</b>
<b>Sc43</b> 7/- <b>3.90 h</b> $\beta^+$ 1.20, .82, ---, $\epsilon$ $\gamma$ 372.8 <b><math>^{46}\text{Ti}(p,\alpha)</math></b>	<b>Sc44</b> 2+ <b>2.442 d</b> IT 271.2 $\epsilon$ $\gamma$ 1001.8 1126.1 1157.0 <b><math>^{47}\text{Ti}(p,\alpha)</math></b>	<b>Sc45</b> 7/- <b>100.0</b>	<b>Sc46</b> 4+ <b>83.81 d</b> IT 142.5 $\beta^-$ .357, --- $\gamma$ 1120.5, 889.3	<b>Sc47</b> 7/- <b>3.349 d</b> $\beta^-$ 439, 600, --- $\gamma$ 159.4 <b><math>^{48}\text{Ti}(p,2p)</math></b>	<b>Sc48</b> 6+ <b>43.7 h</b> $\beta^-$ 66, 1,990, --- $\gamma$ 983.5, 1312.1, 1037.5, ---	<b>Sc49</b> 7/- <b>57.3 m</b> $\beta^-$ 2.01, --- $\gamma$ 1762 ( $\omega$ ), 1623

# Targetry – natural and enriched Ti

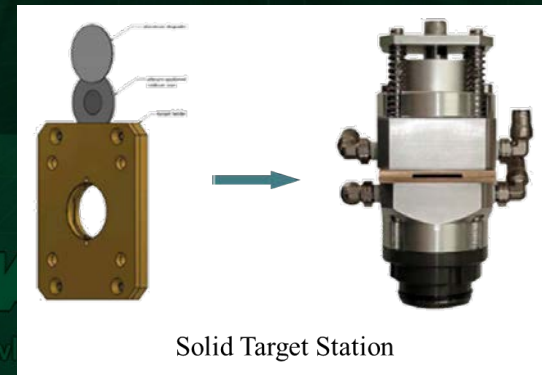
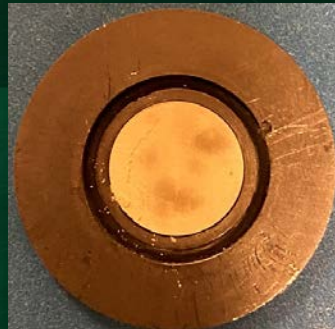
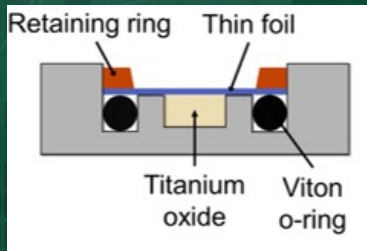
- Irradiation: 24.0 MeV protons
- Ti foils or pressed  $\text{TiO}_2$  powder



Niobium coin

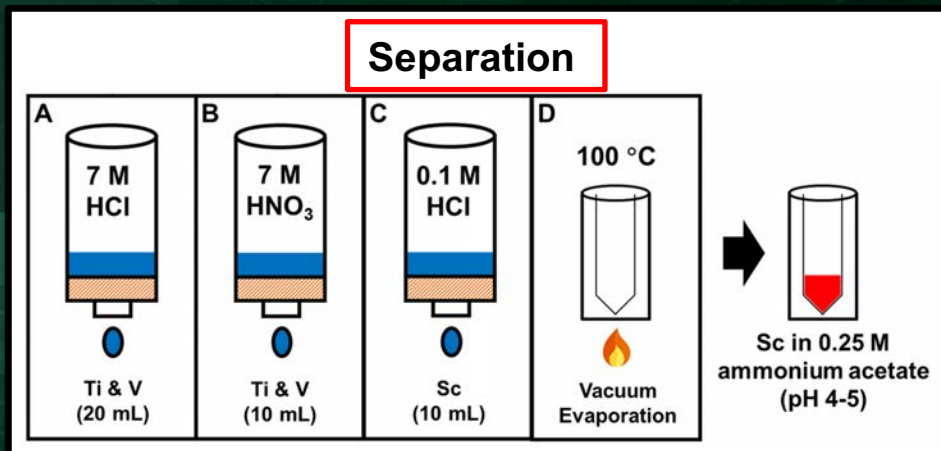
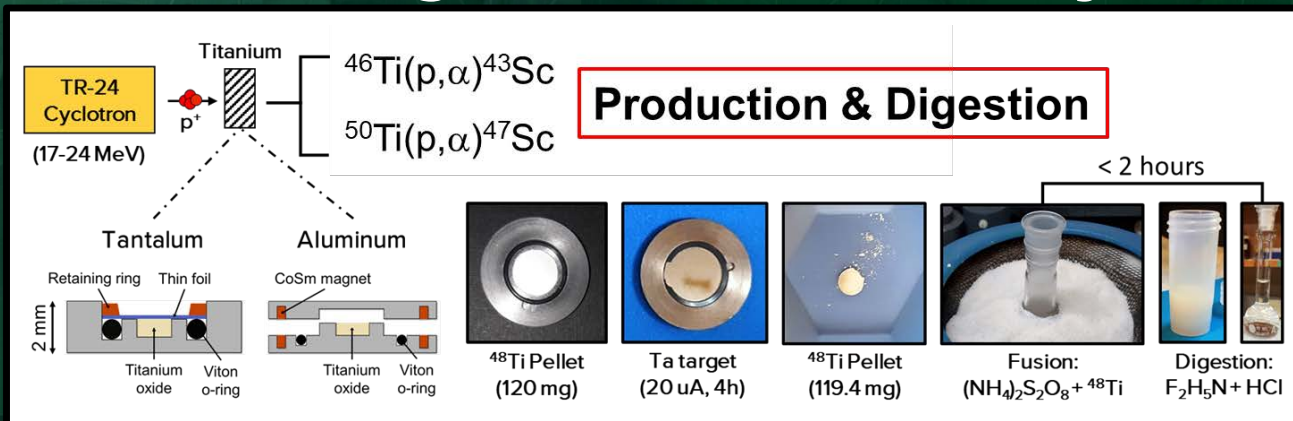
Beam strike (oxidation)

Stainless steel retainer



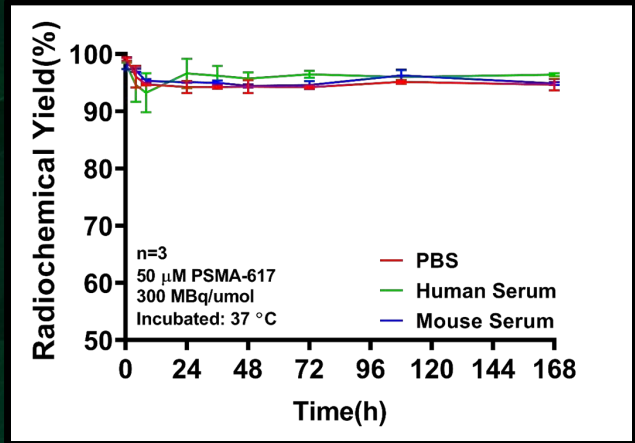
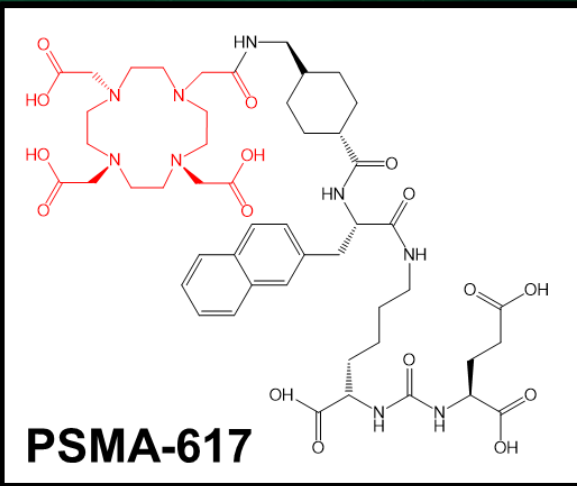
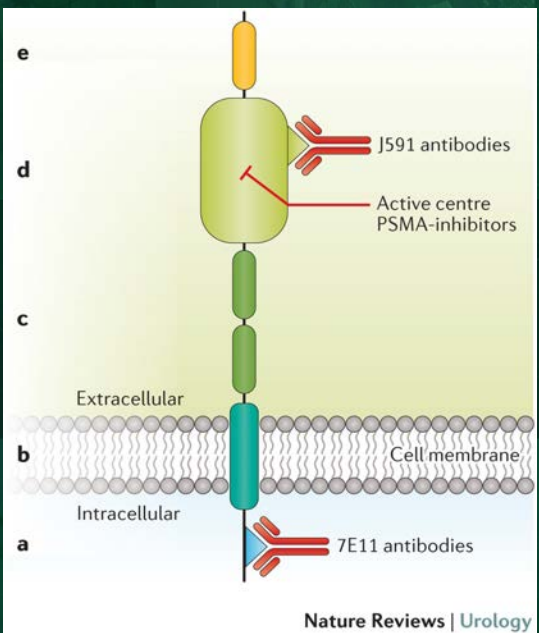


# $^{43}\text{Sc}$ and $^{47}\text{Sc}$ targets and chemistry



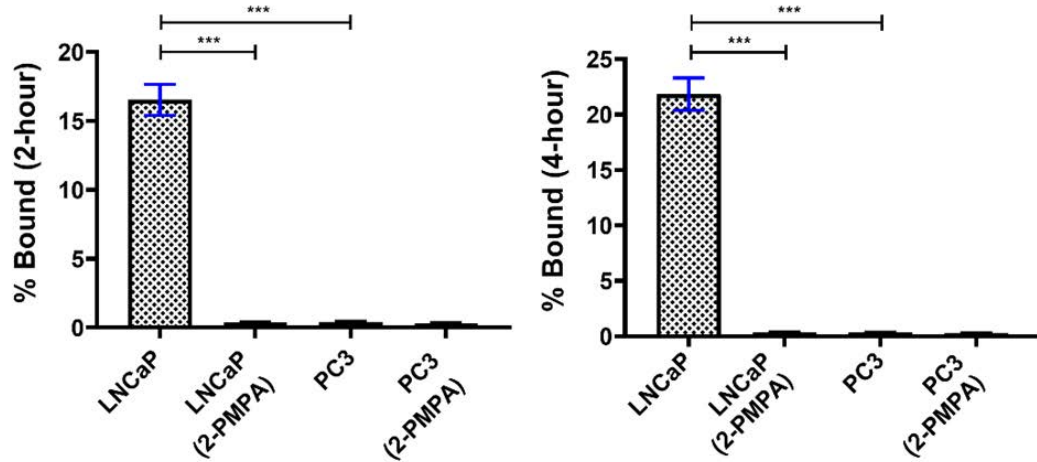
# Prostate Specific Membrane Antigen (PSMA)

Expression of prostate-specific membrane antigen (PSMA), a transmembrane protein is increased in prostate cancer.

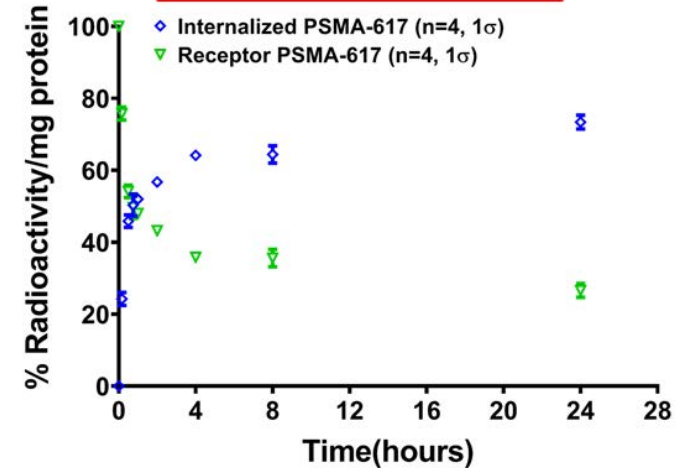


# Preclinical Evaluation of [ $^{43,47}\text{Sc}$ ]Sc-PSMA-617

## $^{43,44,47}\text{Sc}$ -PSMA-617 Specific Uptake



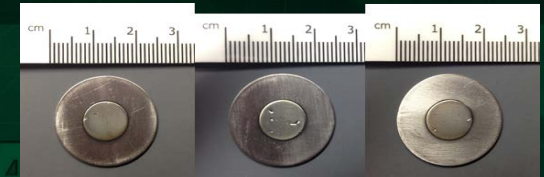
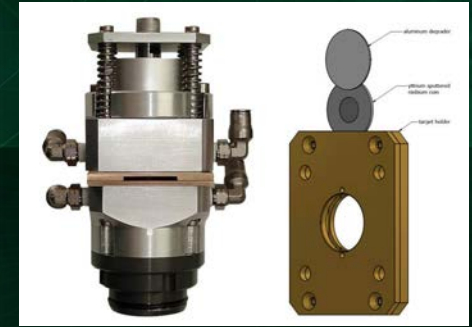
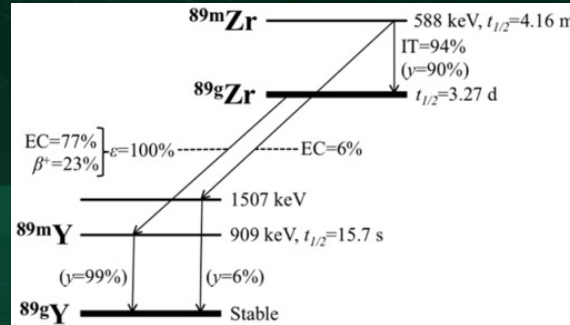
## Internalization





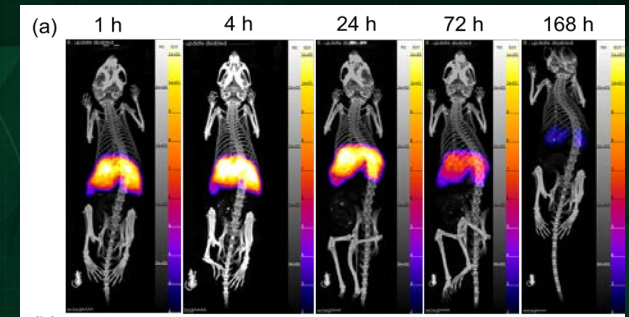
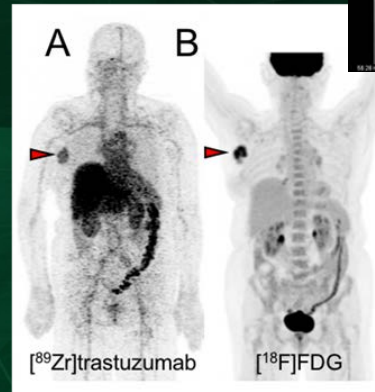
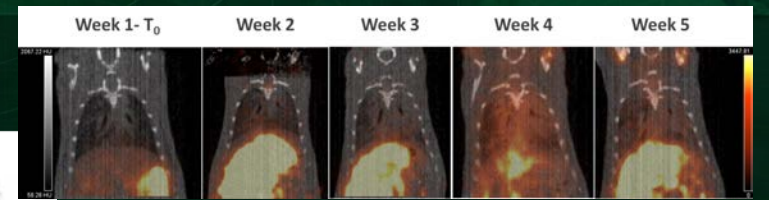
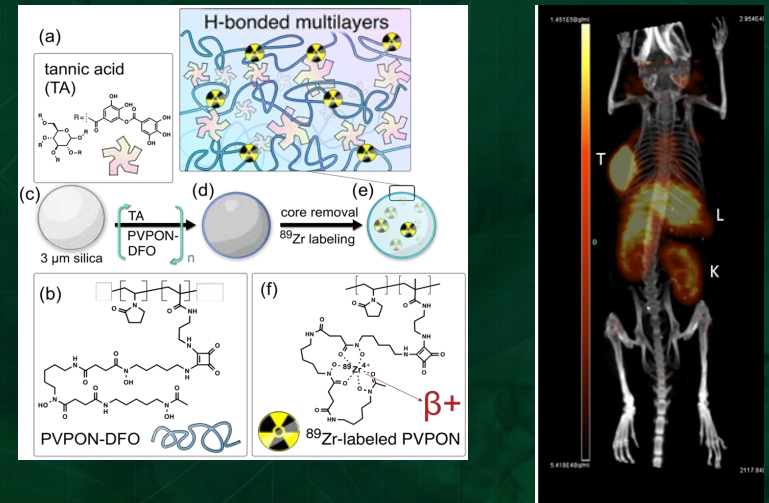
# Zirconium-89

- Half-life of 3.27 d – well suited for study of pharmacokinetics of antibodies (achieve optimal biodistribution ~4-5 d)
- Scouting in preparation for antibody therapy, confirming tumor targeting, and estimating dosimetry
- Generally inert to biological systems
- Decay properties
  - EC = 76.6%
  - $\beta^+$  = 22.3%
  - $R_{ave.}(\beta^+) = 1.18$  mm



# Ongoing work related to $^{89}\text{Zr}$

- Routine production via sputtered targets
- Internal use and shipping to external sites – nationally and internationally
- Preclinical radiochemistry – mAbs, nanoparticle and cell labeling
- Small animal imaging studies
- Preparation of GMP  $^{89}\text{Zr}$  radiopharmaceuticals
- Early phase clinical trials:
- [ $^{89}\text{Zr}$ ]Trastuzumab
- [ $^{89}\text{Zr}$ ]Panitumumab



Wooten et al Appl. Sci 2013  
 Queern et al Nuc Med Bio 2017  
 Ikotun et al Plos ONE 2013  
 Zheleznyak et al Mol. Imaging 2013  
 Marquez et al Mol. Pharm 2014  
 Wright et al J. Nuc Med. 2016  
 Lange et al Oncotarget 2016

Laforest et al Mol Imaging Bio 2016  
 Marquez-Nostra et al Oncotarget 2017  
 Dehdashti et al Breast Canc. Res Treat. 2018  
 Massicano et al Can Biother and Radiopharm 2019  
 Benedetto et al Can Biother and Radiopharm 2019  
 Massicano et al J. Lab. Comp. and Rad. 2020  
 Takim et al Nuc Med Bio 2021

# Summary

- Radioisotopes continue to play an important role in medicine and other areas of science.
- A wide variety of half-lives, imaging characteristics and chemistries leads to a unique toolbox for the development of new nuclear medicine imaging and therapeutic agents.
- Development and increased use of these agents will require collaborations between chemists, biologists, physicists, physicians and technologists.
- We welcome new collaborations and visitors to our center (when possible).



# Acknowledgments and Funding

## Collaborators

- Jonathan McConathy
- Erica Stringer-Reasor
- Renata Jaskula-Sztul

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Lapi Lab members and  
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Candace Parker, Maxwell Ducharme,  
Jennifer Pyles, Shelbie Cingoranelli,  
Solana Fernandez, Amber Judd

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