



Iminodiacetic acid as bifunctional linker for dimerization of cyclic RGD peptides



Dong Xu^{a,1}, Zuo-Quan Zhao^{b,1}, Shu-Ting Chen^c, Yong Yang^{a,b}, Wei Fang^{b,*}, Shuang Liu^{d,**}

^a International Medicine Center, International Medicine Division, Beijing Friendship Hospital, Capital Medical University, Beijing, China

^b Department of Nuclear Medicine, Fuwai Hospital, the National Center for Cardiovascular Diseases, Chinese Academy of Medical Sciences and Peking Union Medical College, Beijing, China

^c Key Laboratory of Radiopharmaceuticals, Ministry of Education, College of Chemistry, Beijing Normal University, Beijing, China

^d School of Health Sciences, Purdue University, West Lafayette, IN, USA

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ABSTRACT

Introduction: In this study, I2P-RGD₂ was used as the example to illustrate a novel approach for dimerization of cyclic RGD peptides. The main objective of this study was to explore the impact of bifunctional linkers (glutamic acid vs. iminodiacetic acid) on tumor-targeting capability and excretion kinetics of the ^{99m}Tc -labeled dimeric cyclic RGD peptides.

Methods: HYNIC-I2P-RGD₂ was prepared by reacting I2P-RGD₂ with HYNIC-OSu in the presence of diisopropylethylamine, and was evaluated for its $\alpha_v\beta_3$ binding affinity against ^{125}I -echistatin bound to U87MG glioma cells. ^{99m}Tc -I2P-RGD₂ was prepared with high specific activity ($\sim 185\text{ GBq}/\mu\text{mol}$). The athymic nude mice bearing U87MG glioma xenografts were used to evaluate its biodistribution properties and image quality in comparison with those of ^{99m}Tc -3P-RGD₂.

Results: The IC₅₀ value for HYNIC-I2P-RGD₂ was determined to be $39 \pm 6\text{ nM}$, which was very close to that (IC₅₀ = $33 \pm 5\text{ nM}$) of HYNIC-3P-RGD₂. Replacing glutamic acid with iminodiacetic acid had little impact on $\alpha_v\beta_3$ binding affinity of cyclic RGD peptides. ^{99m}Tc -I2P-RGD₂ and ^{99m}Tc -3P-RGD₂ shared similar tumor uptake values over the 2 h period, and its $\alpha_v\beta_3$ -specificity was demonstrated by a blocking experiment. The uptake of ^{99m}Tc -I2P-RGD₂ was significantly lower than ^{99m}Tc -3P-RGD₂ in the liver and kidneys. The U87MG glioma tumors were visualized by SPECT with excellent contrast using both ^{99m}Tc -I2P-RGD₂ and ^{99m}Tc -3P-RGD₂.

Conclusion: Iminodiacetic acid is an excellent bifunctional linker for dimerization of cyclic RGD peptides. Bifunctional linkers have significant impact on the excretion kinetics of ^{99m}Tc radiotracers. Because of its lower liver uptake and better tumor/liver ratios, ^{99m}Tc -I2P-RGD₂ may have advantages over ^{99m}Tc -3P-RGD₂ for diagnosis of tumors in chest region.

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1. Introduction

Integrin $\alpha_v\beta_3$ plays a significant role in tumor angiogenesis and metastasis [1–7]. It is a receptor for the extracellular matrix proteins (e.g., vitronectin, fibronectin, fibrinogen and laminin) with the exposed arginine–glycine–aspartic (RGD) tripeptide sequence [2,8–10]. It is expressed at low levels on epithelial cells and mature endothelial cells,

but it is overexpressed on activated endothelial cells of neovasculature and tumor cells. The restricted $\alpha_v\beta_3$ expression during tumor growth and metastasis makes it an interesting target for development of $\alpha_v\beta_3$ -targeted molecular imaging probes [11–20].

The RGD-containing cyclic pentapeptides (Fig. 1: c(RGDfk), RGD₂ (E[c(RGDfk)]₂); 2P-RGD₂ (E[PEG₄-c(RGDfk)]₂; PEG₄ = 15-amino-4,7,10,13-tetraoxapentadecanoic acid); and 3P-RGD₂ (PEG₄-E[PEG₄-

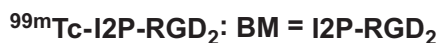
Abbreviations: ITLC, instant thin layer chromatography; MALDI, matrix-assisted laser desorption ionization; PET, positron emission tomography; RCP, radiochemical purity; SPECT, single photon emission computed tomography; HYNIC-OSu, sodium succinimidyl 6-(2-(2-sulfonatobenzaldehyde)hydrazono)-nicotinate); NOTA, 1,4,7-tritazacyclononane-1,4,7-triacetic acid; RGD₂: E[c(RGDfk)]₂, Glu[cyclo(Arg-Gly-Asp-D-Phe-Lys)]₂; RGD₄: E[E[c(RGDfk)]₂]₂, Glu[E[cyclo(Arg-Gly-Asp-D-Phe-Lys)]₂]₂; 2P-RGD₂: E[PEG₄-c(RGDfk)]₂, Glu[cyclo(Arg-Gly-Asp-D-Phe-Lys(PEG₄))]₂ (PEG₄ = 15-amino-4,7,10,13-tetraoxapentadecanoic acid); 3P-RGD₂: PEG₄-E[PEG₄-c(RGDfk)]₂, PEG₄-Glu[cyclo(Arg-Gly-Asp-D-Phe-Lys(PEG₄))]₂; I2P-RGD₂, N-(2-aminoethyl)iminodiacetyl-[cyclo(Arg-Gly-Asp-D-Phe-Lys(PEG₄))]₂; HYNIC-3P-RGD₂, HYNIC-PEG₄-E[PEG₄-c(RGDfk)]₂ (HYNIC = 6-(2-(2-sulfonatobenzaldehyde)hydrazono)nicotinyl); HYNIC-I2P-RGD₂, HYNIC-N-(2-aminoethyl)iminodiacetyl-[cyclo(Arg-Gly-Asp-D-Phe-Lys(PEG₄))]₂; ^{18}F -Alfatide-II, [^{18}F]AlF(NOTA-2P-RGD₂) (NOTA = 1,4,7-tritazacyclononane-1,4,7-triacetic acid; ^{99m}Tc -3P-RGD₂, [^{99m}Tc (HYNIC-3P-RGD₂)(tricine)(TPPTS)] (TPPTS = trisodium triphenylphosphine-3,3',3''-trisulfonate); ^{99m}Tc -I2P-RGD₂, [^{99m}Tc (HYNIC-I2P-RGD₂)(tricine)(TPPTS)].

* Correspondence to: W. Fang, Department of Nuclear Medicine, Fuwai Hospital, the National Center for Cardiovascular Diseases, Chinese Academy of Medical Sciences and Peking Union Medical College, Beijing, China.

** Correspondence to: S. Liu, School of Health Sciences, Purdue University, 550 Stadium Mall Drive, West Lafayette, IN 47907, USA. Tel.: +1 765 494 0236; fax: +1 765 496 1377.

E-mail addresses: nuclearfw@126.com (W. Fang), liu100@purdue.edu (S. Liu).

¹ These authors contributed equally to this work.



HPLC Method 1 used a LabAlliance HPLC system (Scientific Systems, Inc., State College, PA) equipped with a UV/vis detector ($\lambda = 254 \text{ nm}$) and Zorbax C_{18} column ($9.4 \text{ mm} \times 250 \text{ mm}$, 100 \AA pore size; Agilent Technologies, Santa Clara, CA). The flow rate was 2.5 mL/min with a mobile phase being 90% A and 10% B at 0 min to 80% A and 20% B at 5 min, and to 50% A and 50% B at 20 min. The radio-HPLC (Method 2) used the LabAlliance HPLC system equipped with a β -ram IN/US detector

(Tampa, FL) and Zorbax C₁₈ column (4.6 mm × 250 mm, 300 Å pore size; Agilent Technologies, Santa Clara, CA). The flow rate was 1 mL/min. The mobile phase was isocratic for the first 5 min with 90% A (25 mM NH₄OAc, pH = 6.8) and 10% B (acetonitrile), followed by a gradient mobile phase going from 90% A and 10% B at 5 min to 40% A and 60% B at 20 min.

2.3. Synthesis of HYNIC-I2P-RGD₂

HYNIC-OSu (13.5 mg, 30 μmol) and I2P-RGD₂ (5.9 mg, 3.2 μmol) were dissolved in anhydrous DMF (2 mL). After the addition of DIEA (5 drops), the mixture was stirred at room temperature for 24 h. To the reaction mixture was added 2 mL of water after completion of the reaction. The pH value was then adjusted to 3–4 using neat TFA. The product was separated from the reaction mixture by HPLC (Method 1). Fractions at ~15 min were collected. Lyophilization of collected fractions afforded the expected product HYNIC-I2P-RGD₂ as a white powder. The yield was 5.8 mg (~84%). MALDI-MS: *m/z* = 2145.00 for [M + H]⁺ (M = 2145.28 calcd. For [C₉₅H₁₄₁N₂₅O₃₀S]).

2.4. Synthesis of ^{99m}Tc-I2P-RGD₂ and solution stability

To a lyophilized vial containing 20–25 μg HYNIC-I2P-RGD₂, 5 mg TPPTS, 6.5 mg tricine, 40 mg mannitol, 38.5 mg disodium succinate hexahydrate and 12.7 mg succinic acid was added 1.0–1.5 mL of Na^{99m}TcO₄ saline solution (~1110 MBq). The reconstituted vial was heated in a boiling water bath for 10–15 min, and then allowed to stand at room temperature for ~5 min. A sample of the resulting solution was analyzed by radio-HPLC (Method 2). The solution stability was monitored by HPLC for 6 h.

2.5. Dose preparation

For biodistribution, doses were prepared by dissolving ^{99m}Tc-I2P-RGD₂ in saline to a concentration of ~1 MBq/mL. For SPECT/CT imaging studies, doses were prepared by dissolving ^{99m}Tc-I2P-RGD₂ in saline to ~370 MBq/mL. In blocking experiment, RGD₂ was dissolved in the dose solution to 3.5 mg/mL. The resulting dose solution was filtered with a 0.20 μm Millex-LG filter before being injected into animals. Each animal was injected with ~0.1 mL of the dose solution.

2.6. Tumor cell culture

All human tumor cell lines (U87MG, MDA-MB-231, A549 and PC-3) were obtained from ATCC (Manassas, VA). U87MG glioma cells were cultured in the Minimum Essential Medium, Eagle with Earle's Balanced Salt Solution (non-essential amino acids sodium pyruvate). MDA-MB-231 human breast tumor cells were cultured in the RPMI Medium 1640 supplemented with 10% fetal bovine serum (FBS, ATCC). OVCAR-3 and PC-3 cancer cells were cultured in the F-12 medium (GIBCO, Grand Island, NY). All tumor cell lines were supplemented with 10% fetal bovine serum and 1% penicillin and streptomycin solution, and grown at 37 °C in a humidified atmosphere of 5% CO₂ in air. Cells were grown as monolayers and were harvested or split when they reached 90% confluence to maintain exponential growth.

2.7. In vitro whole-cell integrin α_vβ₃ binding assay

The integrin binding affinity was determined via a displacement assay using ¹²⁵I-echistatin (Perkin Elmer, Branford, CT) as the integrin-specific radioligand [35,29–40]. Briefly, the filter multiscreen DV plates (Millipore, Billerica, MA) were seeded with 1 × 10⁵ U87MG cells in binding buffer (20 mM Tris, 150 mM NaCl, 2 mM CaCl₂, 1 mM MnCl₂, 1 mM MgCl₂, 0.1% (wt/vol) bovine serum albumin; and pH 7.4) and ¹²⁵I-echistatin (0.75–1.0 kBq) in the presence of increasing concentrations of the cyclic RGD peptide, incubated for 2 h at room

temperature. After removing unbound ¹²⁵I-echistatin, the hydrophilic PVDF filters were washed three times with the binding buffer, and then collected. The radioactivity was determined using a PerkinElmer Wizard-1480 γ-counter (Shelton, CT). Experiments were carried out twice with triplicates. For comparison purpose, c(RGDyK), HYNIC-3P-RGD₂ and HYNIC-3P-RGD₂ were evaluated in the same assay. IC₅₀ values were calculated by fitting experimental data with nonlinear regression using GraphPad Prism™ (GraphPad Software, Inc., San Diego, CA), and were reported as an average plus/minus standard deviation. Statistical analysis was performed by one-way analysis of variance (ANOVA). The level of significance was set at *p* < 0.05.

2.8. Animal models

Biodistribution and imaging studies were performed in compliance with the NIH animal experimentation guidelines (*Principles of Laboratory Animal Care*, NIH Publication No. 86-23, revised 1985). The animal protocol has been approved by the Institutional Animal Care and Use Committee of Purdue University (PACUC#: 1110000049) and Fuwai Hospital (Chinese Academy of Medical Sciences and Peking Union Medical College). Female athymic *nu/nu* mice (4–5 weeks) were purchased from Harlan (Indianapolis, IN), and were inoculated subcutaneously with tumor cells into the shoulder flank (5 × 10⁶ of U87MG cells) or left/right mammary fat pad (1 × 10⁶ MDA-MB-231, OVAR-3 of PC-3) of each animal. Four to six weeks after inoculation, the tumor size was 0.1–0.5 g, and animals were used for biodistribution and imaging studies. All procedures were performed in a laminar flow cabinet under aseptic conditions.

2.9. Biodistribution protocol

The tumor-bearing mice (*n* = 5; 20–25 g) were randomly selected, and each animal was administered with ~0.1 MBq of ^{99m}Tc-I2P-RGD₂ by tail vein injection. Animals were sacrificed by sodium pentobarbital overdose (~200 mg/kg) at 5, 30, 60 and 120 min p.i. Blood, tumors and normal organs (brain, eyes, heart, spleen, lungs, liver, kidneys, muscle and intestine) were harvested, washed with saline, dried with absorbent tissue, weighed, and counted on a PerkinElmer Wizard-1480 γ-counter (Shelton, CT). The organ uptake was calculated as the percentage of injected dose (%ID) or the percentage of injected dose per gram of wet tissue (%ID/g). The blocking experiment was performed using RGD₂ as the blocking agent in four animals. Each animal was administered with ~0.1 MBq of ^{99m}Tc-I2P-RGD₂ along with ~350 μg (~14 mg/kg) of RGD₂. Biodistribution data (%ID/g) and tumor-to-background (T/B) ratios were expressed as the average plus standard deviation on the basis of the results from 5 to 8 animals in each group. Statistical analysis was performed by one-way analysis of variance (ANOVA). The level of significance was set at *p* < 0.05.

2.10. SPECT/CT imaging

SPECT/CT images were obtained for the athymic nude mice (*n* = 2 for each tumor type) bearing U87MG, MDA-MB-231, OVCAR-3 and PC-3 xenografts using a u-SPECT-II/CT scanner (Milabs, the Netherlands) equipped with a 0.6 mm multi-pinhole collimator. The animal was injected with ~37 MBq of ^{99m}Tc-I2P-RGD₂ in 0.1 mL saline via the tail vein. At 60 min p.i., the animal was placed into a shielded chamber connected to an isoflurane anesthesia unit (Univentor, Zejtun, Malta). Anesthesia was induced using an air flow rate of 350 mL/min and ~3.0% isoflurane. After induction of anesthesia, the animal was placed supine on the scanning bed. The air flow rate was then reduced to ~250 mL/min with ~2.0% isoflurane. Rectangular scan in the regions of interest (ROIs) from SPECT and CT were selected on the basis of orthogonal optical images provided by the integrated webcams. After SPECT (75 projections over 30 min per frame, 2 frames), the animal was transferred into the attached CT scanner and imaged using the

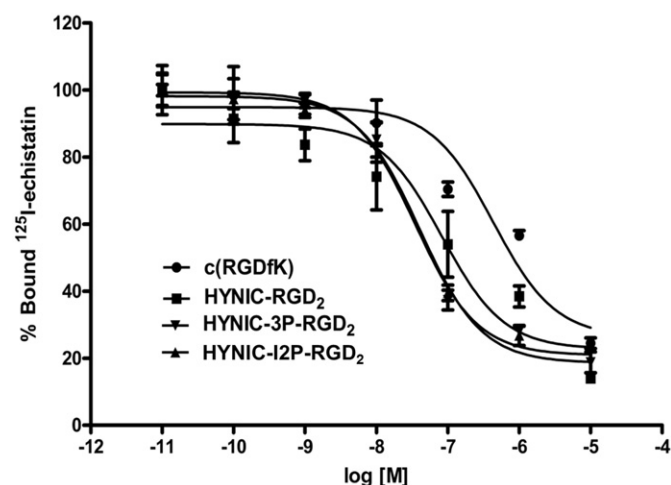


Fig. 2. The displacement curves of ^{125}I -echistatin bound to U87MG human glioma cells in the presence of cyclic RGD peptides. c(RGDfK) was the “control” to validate the assay. HYNIC-RGD₂ and HYNIC-3P-RGD₂ were used for comparison purpose. IC₅₀ values were calculated to be 32 ± 5 , 39 ± 6 , 85 ± 8 , and 422 ± 15 nM for HYNIC-3P-RGD₂, HYNIC-I2P-RGD₂, HYNIC-RGD₂ and c(RGDfK), respectively.

‘normal’ acquisition settings (2 degree intervals) at 45 kV and 500 μA . After CT acquisition, the animal was allowed to recover in a lead-shielded cage.

2.11. Image reconstruction and data processing

Reconstruction was performed using a POSEM (pixelated ordered subsets by expectation maximization) algorithm with 6 iterations and 16 subsets. CT data were reconstructed using a cone-beam filtered back-projection algorithm (NRecon v1.6.3, Skyscan). After reconstruction, the SPECT and CT data were co-registered according to the movement of the robotic stage, and re-sampled to equivalent voxel sizes. The co-registered images were visualized using the PMOD software (PMOD Technologies, Zurich, Switzerland). A 3D-Gaussian filter (0.8 mm FWHM) was applied to smooth noise, and the LUTs (look up tables) were adjusted for good contrast. The reconstructed images were visualized as both orthogonal slices and maximum intensity projections.

2.12. Immunohistochemistry

The xenografted tumor tissues (U87MG, MDA-MB-231, OVAR-3 and PC-3) were harvested, snap-frozen in the OCT (optimal cutting

Table 1
Selected biodistribution data and tumor-to-background ratios of $^{99\text{m}}\text{Tc}$ -I2P-RGD₂ in athymic nude mice ($n = 5$) bearing U87MG human glioma xenografts.

Organ	5 min	30 min	60 min	120 min
Blood	3.62 ± 0.41	1.02 ± 0.04	0.51 ± 0.05	0.27 ± 0.04
Brain	0.34 ± 0.10	0.30 ± 0.06	0.16 ± 0.02	0.18 ± 0.06
Eyes	2.48 ± 0.63	3.46 ± 0.92	2.25 ± 1.11	1.96 ± 0.72
Heart	4.30 ± 0.91	3.21 ± 0.80	1.82 ± 0.39	1.51 ± 0.43
Intestine	23.99 ± 5.72	12.32 ± 2.89	7.36 ± 1.34	7.11 ± 0.84
Kidney	24.80 ± 3.83	16.07 ± 1.43	12.17 ± 1.16	9.73 ± 1.37
Liver	5.55 ± 0.49	2.45 ± 0.19	1.76 ± 0.21	1.67 ± 0.40
Lungs	6.44 ± 1.21	4.55 ± 0.48	2.28 ± 0.45	2.27 ± 0.27
Muscle	2.46 ± 0.50	2.19 ± 0.28	1.39 ± 0.34	1.21 ± 0.36
Spleen	5.03 ± 0.65	3.26 ± 0.62	2.91 ± 0.70	2.69 ± 0.53
Tumor	7.24 ± 1.18	6.61 ± 0.88	5.61 ± 1.38	5.28 ± 1.31
Tumor/Blood	2.04 ± 0.29	6.48 ± 0.72	9.31 ± 0.44	22.35 ± 4.51
Tumor/Liver	1.32 ± 0.28	2.68 ± 0.59	2.85 ± 0.33	3.47 ± 0.75
Tumor/Lung	1.08 ± 0.12	1.44 ± 0.20	2.13 ± 0.30	2.34 ± 0.41
Tumor/Muscle	3.13 ± 0.51	3.10 ± 0.26	3.33 ± 0.52	3.82 ± 0.15

The tumor uptake was expressed as an average plus/minus the standard deviation.

Table 2
Selected biodistribution data and tumor-to-background ratios of $^{99\text{m}}\text{Tc}$ -3P-RGD₂ in athymic nude mice ($n = 5$) bearing U87MG human glioma xenografts.

Organ	5 min	30 min	60 min	120 min
Blood	3.47 ± 0.35	1.01 ± 0.10	0.70 ± 0.11	0.35 ± 0.01
Brain	0.33 ± 0.08	0.17 ± 0.02	0.16 ± 0.02	0.14 ± 0.04
Eyes	2.67 ± 0.56	2.18 ± 0.57	2.00 ± 0.28	1.52 ± 0.04
Heart	5.10 ± 0.77	3.83 ± 0.64	2.01 ± 0.19	1.38 ± 0.07
Intestine	4.93 ± 0.48	5.53 ± 0.65	4.98 ± 0.21	3.47 ± 0.71
Kidney	37.24 ± 2.90	28.44 ± 0.98	20.39 ± 0.90	16.28 ± 0.87
Liver	9.25 ± 0.76	5.45 ± 0.12	4.68 ± 0.40	4.50 ± 0.42
Lungs	7.17 ± 0.98	4.54 ± 0.19	3.41 ± 0.57	2.31 ± 0.25
Muscle	3.43 ± 0.21	2.78 ± 1.37	1.73 ± 0.25	1.44 ± 0.03
Spleen	5.52 ± 1.12	4.98 ± 0.17	3.64 ± 0.34	3.69 ± 0.39
Tumor	4.98 ± 1.29	5.51 ± 0.80	4.68 ± 0.61	4.11 ± 0.67
Tumor/Blood	1.43 ± 0.85	5.41 ± 0.21	6.68 ± 1.21	11.74 ± 2.71
Tumor/Liver	0.53 ± 0.02	1.01 ± 0.45	1.01 ± 0.45	0.91 ± 0.75
Tumor/Lung	0.69 ± 0.12	1.21 ± 0.47	1.37 ± 0.25	1.77 ± 0.86
Tumor/Muscle	1.45 ± 0.77	1.98 ± 1.12	2.70 ± 0.89	2.85 ± 0.45

The tumor uptake was expressed as an average plus/minus the standard deviation.

temperature compound) solution, and cut into slices (5 μm). After drying thoroughly, the slides were fixed with ice-cold acetone for 10 min, and dried in air for 20 min. Sections were blocked with 10% goat serum for 30 min, and then were incubated with the hamster anti-integrin β_3 antibody (1:100, BD Biosciences, San Jose, CA) and rat anti-CD31 antibody (1:100, BD Biosciences, San Jose, CA) for 1 h at room temperature. After incubating with Cy3-conjugated goat anti-hamster and FITC-conjugated goat anti-rat secondary antibodies (1:100, Jackson ImmunoResearch Inc., West Grove, PA) and washing with PBS. The fluorescence was visualized with an Olympus BX51 microscope (Olympus America Inc., Center Valley, PA). All pictures were taken under 200 \times magnification using the same exposure time. The average area of positively stained CD31 or β_3 on cryostat sections from >15 randomly selected fields in each group was calculated to assess the relative β_3 expression in tumor tissues by the NIH *ImageJ* software. The fluorescent density data were expressed as a percentage of the total area, presented as the mean \pm S.D., and plotted against the tumor uptake of $^{99\text{m}}\text{Tc}$ -I2P-RGD₂. Experiments were performed three times. Statistical analysis was performed by Newman-Keuls multiple comparison. The level of significance was set at $p < 0.05$.

3. Results

3.1. Synthesis of HYNIC-I2P-RGD₂

HYNIC-I2P-RGD₂ was prepared from the reaction of I2P-RGD₂ with excess HYNIC-OSu in the presence of DIEA. It took ~24 h to complete the conjugation reaction at room temperature. HYNIC-I2P-RGD₂ was purified by HPLC and characterized by ESI-MS. Its HPLC purity was >95% before being used for the in vitro $\alpha_v\beta_3$ binding assay and $^{99\text{m}}\text{Tc}$ -labeling. ESI-MS data were consistent with the proposed composition for HYNIC-I2P-RGD₂.

3.2. Integrin $\alpha_v\beta_3$ binding affinity

The $\alpha_v\beta_3$ binding affinity of HYNIC-I2P-RGD₂ was determined using an in vitro displacement assay. Fig. 2 shows the displacement curves of ^{125}I -echistatin bound to U87MG glioma cells in the presence of cyclic RGD peptides. IC₅₀ values were calculated to be 33 ± 5 , 39 ± 6 , 85 ± 5 and 422 ± 45 nM for HYNIC-3P-RGD₂, HYNIC-I2P-RGD₂, HYNIC-RGD₂ and c(RGDyK), respectively. The $\alpha_v\beta_3$ binding affinity follows the order of HYNIC-3P-RGD₂ ~ HYNIC-I2P-RGD₂ > HYNIC-RGD₂ > c(RGDyK). These results are completely consistent with those from our previous studies [29–32,36–38]. HYNIC-I2P-RGD₂ has the IC₅₀ value (IC₅₀ = 39 ± 6 nM) almost identical to that of HYNIC-3P-RGD₂ (IC₅₀ = 33 ± 5 nM). Replacing glutamic acid in HYNIC-3P-RGD₂ with the iminodiacetyl linker had little impact on the $\alpha_v\beta_3$ binding

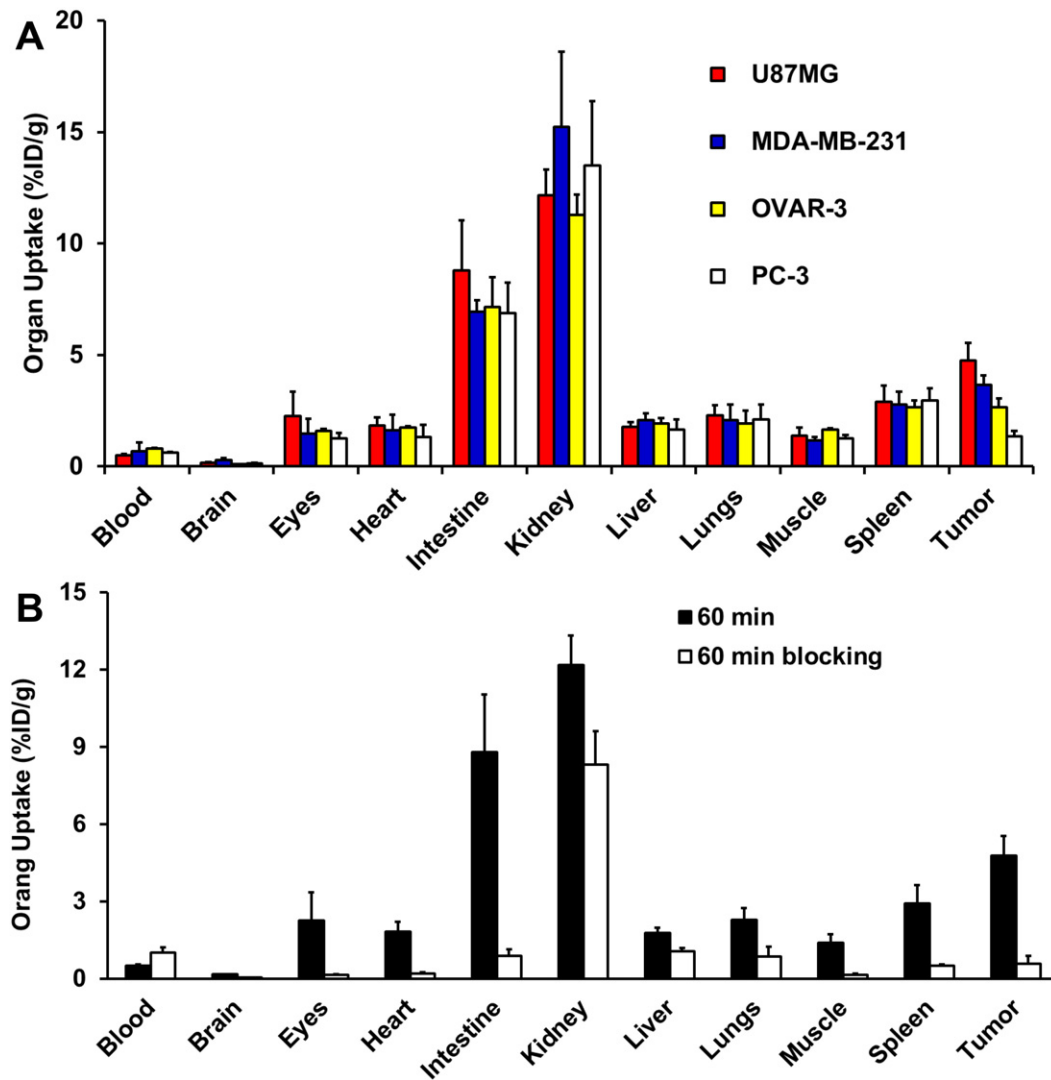


Fig. 3. A: Comparison of the 60-min biodistribution data of ^{99m}Tc -I2P-RGD₂ ($n = 5$) in the athymic nude mice bearing U87MG, MDA-MB-231, OVAR-3 and PC-3 xenografts. Its uptake in normal organs was almost identical, but its uptake values were significantly different in 4 xenografted tumors (U87MG, MDA-MB-231, OVAR-3 and PC-3 xenografts). This experiment was designed to demonstrate the dependence of its tumor uptake on integrin $\alpha_v\beta_3$ expression levels in xenografted tumor tissues. B: The selected 60-min biodistribution data of ^{99m}Tc -I2P-RGD₂ in athymic nude mice ($n = 5$) bearing U87MG glioma xenografts with/without co-injection of RGD₂ (350 $\mu\text{g}/\text{mouse}$ or 14 mg/kg). The blocking experiment was designed to demonstrate its integrin $\alpha_v\beta_3$ specificity.

affinity of dimeric cyclic RGD peptides, as long as the distance between the two cyclic RGD moieties is long enough.

3.3. Radiochemistry

^{99m}Tc -I2P-RGD₂ was prepared from the reaction of HYNIC-I2P-RGD₂ with $^{99m}\text{TcO}_4^-$ in the presence of excess tricine and TPPTS using a kit formulation. ^{99m}Tc -labeling was accomplished by heating the reaction mixture at 100 $^{\circ}\text{C}$ for 10–15 min. Its RCP was always >95% without post-labeling chromatographic purification, and remained stable for >6 h in the kit matrix (Fig. S11). The specific activity was very high ($\sim 185 \text{ GBq}/\mu\text{mol}$).

3.4. Biodistribution properties

Biodistribution was performed on ^{99m}Tc -I2P-RGD₂ and ^{99m}Tc -3P-RGD₂ (positive control) in the athymic nude mice bearing U87MG glioma xenografts. Their biodistribution data are listed in Tables 1 and 2, respectively. We found that ^{99m}Tc -I2P-RGD₂ and ^{99m}Tc -3P-RGD₂ shared almost identical tumor uptake values over the 2 h study period. Even though the tumor uptake of ^{99m}Tc -I2P-RGD₂ ($7.24 \pm 1.18\% \text{ID/g}$) was

slightly higher than that of ^{99m}Tc -3P-RGD₂ ($4.98 \pm 1.29\% \text{ID/g}$) at 5 min p.i., this difference was not significant within the experimental error. ^{99m}Tc -I2P-RGD₂ and ^{99m}Tc -3P-RGD₂ also shared similar lung uptake values. However, the liver uptake of ^{99m}Tc -I2P-RGD₂ (5.55 ± 0.49 , 2.45 ± 0.19 , 1.76 ± 0.21 and $1.67 \pm 0.40\% \text{ID/g}$ at 5, 30, 60, and 120 min p.i., respectively) was significantly lower than ^{99m}Tc -3P-RGD₂ (9.25 ± 0.76 , 5.45 ± 0.12 , 4.68 ± 0.40 and $4.50 \pm 0.42\% \text{ID/g}$ at 5, 30, 60, and 120 min p.i., respectively). As a result, the tumor/liver ratios for ^{99m}Tc -I2P-RGD₂ were much better than those of ^{99m}Tc -3P-RGD₂ over the 2 h period (Tables 1 and 2). ^{99m}Tc -I2P-RGD₂ also had lower kidney uptake than ^{99m}Tc -3P-RGD₂. The intestine uptake of ^{99m}Tc -I2P-RGD₂ was much higher than those of ^{99m}Tc -3P-RGD₂ (Tables 1 and 2). We also compared the biodistribution properties of ^{99m}Tc -I2P-RGD₂ in three other tumor-bearing models (Fig. 3A: MDA-MB-231, OVAR-3 and PC-3). It was found that the uptake values of ^{99m}Tc -I2P-RGD₂ in normal organs of the four different tumor-bearing athymic nude mice were almost identical within experimental error, but its tumor uptake values were different depending on the tumor types (Fig. 3A: U87MG: $5.61 \pm 1.38\% \text{ID/g}$; MDA-MB-231: $3.67 \pm 0.42\% \text{ID/g}$; OVAR-3: $2.65 \pm 0.40\% \text{ID/g}$; and PC-3: $1.35 \pm 0.24\% \text{ID/g}$). Similar trend was also seen with ^{99m}Tc -3P-RGD₂ in the same tumor-bearing models [30,35,36].

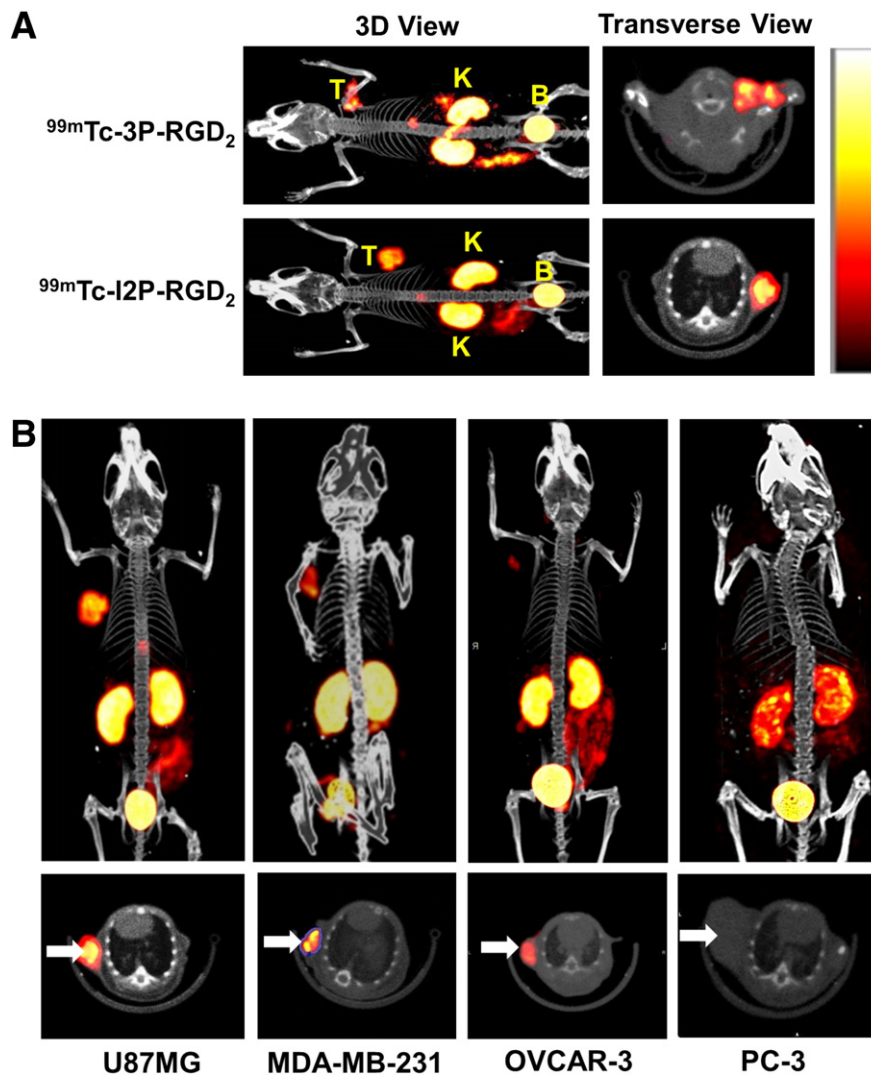


Fig. 4. A: The 3D and transverse views of SPECT/CT images of the athymic nude mice (B = bladder; I = intestine; K = kidney and T = tumor) bearing U87MG human glioma xenografts. Each animal was administered with ~37 MBq of ^{99m}Tc -I2P-RGD₂ or ^{99m}Tc -3P-RGD₂. B: The 3D and transverse views of SPECT/CT images of athymic nude mice ($n = 2$ for each tumor type) bearing U87MG, MDA-MB-231, OVCAR-3 or PC-3 xenografts. Each animal was administered with ~55 MBq of ^{99m}Tc -I2P-RGD₂ via tail-vein. The radioactivity in the intestines was quite obvious in all animals.

3.5. Integrin $\alpha_v\beta_3$ specificity

A blocking experiment was performed to demonstrate the $\alpha_v\beta_3$ specificity of ^{99m}Tc -I2P-RGD₂ using RGD₂ as the blocking agent (350 $\mu\text{g}/\text{mouse}$ or 14 mg/kg) since it is a well-established $\alpha_v\beta_3$ antagonist [16]. Fig. 3B shows the 60-min biodistribution data of ^{99m}Tc -I2P-RGD₂ in the athymic nude mice ($n = 5$) bearing U87MG glioma xenografts in the absence/presence of excess RGD₂. We found that co-injection of excess RGD₂ significantly blocked the tumor uptake of ^{99m}Tc -I2P-RGD₂ ($0.59 \pm 0.28\% \text{ID}/\text{g}$ with RGD₂ vs. $5.61 \pm 1.38\% \text{ID}/\text{g}$ without RGD₂). The normal organ uptake was also blocked significantly by co-injection of RGD₂. For example, the uptake of ^{99m}Tc -I2P-RGD₂ in the intestine, lungs and spleen was 7.36 ± 1.34 , 2.28 ± 0.45 , and $2.91 \pm 0.71\% \text{ID}/\text{g}$, respectively, without RGD₂. Its uptake in the same organs was 0.88 ± 0.26 , 0.85 ± 0.39 , and $0.51 \pm 0.03\% \text{ID}/\text{g}$, respectively, in the presence of excess RGD₂. The results from this experiment clearly showed that the tumor uptake of ^{99m}Tc -I2P-RGD₂ is $\alpha_v\beta_3$ -specific. Similar conclusion was also made for other radiolabeled (^{99m}Tc and ^{111}In) dimeric cyclic RGD peptides [36–40].

3.6. SPECT/CT

Fig. 4A shows the representative 3D and transverse views of SPECT/CT images of the U87MG glioma-bearing mice administered with

~37 MBq of ^{99m}Tc -I2P-RGD₂ and ^{99m}Tc -3P-RGD₂, respectively. The U87MG glioma tumors were clearly visualized by SPECT with excellent contrast. High uptake in the intestines and kidneys was also seen in the SPECT images of the glioma-bearing mice. These results clearly demonstrated that ^{99m}Tc -I2P-RGD₂ is as good as ^{99m}Tc -3P-RGD₂ as the $\alpha_v\beta_3$ -targeted radiotracer for tumor imaging. We also obtained SPECT/CT images of the athymic nude mice bearing MDA-MB-231, OVAR-3 and PC-3 tumor xenografts (Fig. 4B). We found that the tumor uptake of ^{99m}Tc -I2P-RGD₂ followed the general ranking order of U87MG > MDA-MB-231 > OVAR-3 > PC-3. The xenografted U87MG glioma tumors had the highest uptake with the best contrast. The xenografted PC-3 tumor was not clearly visualized due to its low $\alpha_v\beta_3$ expression (Fig. S12). The tumor/background contrast for MDA-MB-231 and OVAR-3 tumors was not as good as that of U87MG gliomas; but it was much better than that of PC-3 tumors. These results suggest that ^{99m}Tc -I2P-RGD₂ may have the utility for noninvasive measurement of the relative $\alpha_v\beta_3$ expression levels in tumors of different origin.

3.7. Relationship between $\alpha_v\beta_3$ expression level and tumor uptake

Fig. S12 shows microscopic fluorescence images of the xenografted tumor tissues (U87MG, MDA-MB-231, OVAR-3 and PC-3) labeled with anti-integrin β_3 (red) and anti-CD31 (green) antibodies. In the overlay

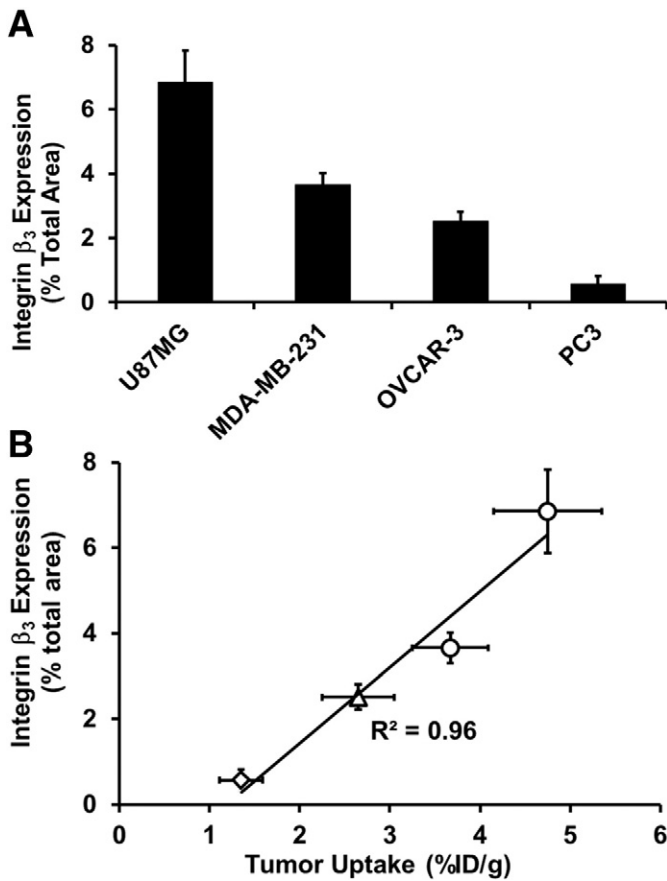


Fig. 5. A: Quantitative analysis of β_3 immunostaining from four different xenografted tumor tissues (U87MG, MDA-MB-231, OVCAR-3 and PC-3). The β_3 expression (tumor cells and neovasculature) was represented by the percentage of red area over the total area in each slice of tumor tissue. Each data point was derived from 10 different areas of the same tissue (200 \times magnification). Experiments were repeated three times independently with similar results. B: Linear relationship between the tumor uptake of ^{99m}Tc -I2P-RGD₂ from biodistribution (radioactivity density) and the relative β_3 expression levels (fluorescent density as represented by the % fluorescent intensity of red color over the total fluorescent intensity in the area) to illustrate the capability of ^{99m}Tc -I2P-RGD₂ to monitor the $\alpha_v\beta_3$ expression level in tumors of different origin.

images, the green color indicates the blood vessels, red color for the integrin β_3 , and yellow color for the β_3 expressed on tumor vasculature. The $\alpha_v\beta_3$ expression follows the general ranking order of U87MG > MDA-MB-231 > OVCAR-3 > PC-3, which is consistent with the tumor uptake data (Fig. 3B). Fig. 5A displays the quantitative data of β_3 for xenografted U87MG, MDA-MB-231, OVCAR-3 and PC-3 tumor tissues. The β_3 level (fluorescence density) was defined by the percentage of red-colored area over the total area in each slice of tumor tissue. Since $\alpha_{IIb}\beta_3$ is expressed on activated platelets exclusively, the fluorescent intensity in tumor tissue is predominantly from the contribution of $\alpha_v\beta_3$. Fig. 5B displays plot of the tumor uptake (radioactivity density) of ^{99m}Tc -I2P-RGD₂ and $\alpha_v\beta_3$ expression levels (fluorescence density) in the U87MG, MDA-MB-231, OVCAR-3 and PC-3 tumor tissues. There is a linear relationship between the %ID/g tumor uptake of ^{99m}Tc -I2P-RGD₂ and $\alpha_v\beta_3$ levels with R^2 being 0.9536.

4. Discussion

In this study, we use I2P-RGD₂ as the example to illustrate a novel approach for dimerization of cyclic RGD peptide. We found that the $\alpha_v\beta_3$ binding affinity of HYNIC-I2P-RGD₂ (Fig. 2: IC₅₀ = 39 \pm 6 nM) was almost identical to that of HYNIC-3P-RGD₂ (Fig. 2: IC₅₀ = 32 \pm 5 nM). Replacing glutamic acid with iminodiacetic acid has little impact on the $\alpha_v\beta_3$ binding affinity of dimeric cyclic RGD peptides, as long as

the distance between two cyclic RGD moieties is long enough. This is also supported by the fact that ^{99m}Tc -I2P-RGD₂ and ^{99m}Tc -3P-RGD₂ shared almost identical tumor uptake over the 2 h period (Tables 1 and 2). The $\alpha_v\beta_3$ specificity of ^{99m}Tc -I2P-RGD₂ was demonstrated by the blocking experiment (Fig. 3B). There is a linear relationship between the %ID/g tumor uptake of ^{99m}Tc -I2P-RGD₂ and $\alpha_v\beta_3$ expression levels. SPECT data clearly show that ^{99m}Tc -I2P-RGD₂ is as good as ^{99m}Tc -3P-RGD₂ as a $\alpha_v\beta_3$ -targeted radiotracer for tumor imaging. Therefore, iminodiacetic acid is an excellent bifunctional linker for dimerization and/or multimerization of cyclic RGD peptides.

In glutamic acid, the amino group is used for attachment of HYNIC (Fig. 1). In iminodiacetic acid, the secondary amine-N is used as the bridgehead. The 2-aminoethyl group is needed because it is difficult to conjugate HYNIC to secondary amine-N. As a result, ^{99m}Tc -I2P-RGD₂ and ^{99m}Tc -3P-RGD₂ display significant differences in their uptake in the intestines, kidneys and liver (Tables 1 and 2). ^{99m}Tc -I2P-RGD₂ had lower uptake than ^{99m}Tc -3P-RGD₂ in the kidneys and liver. In contrast, the uptake of ^{99m}Tc -I2P-RGD₂ was higher than those of ^{99m}Tc -3P-RGD₂ in the intestines. We reason that this difference might be related to the difference in their overall molecular charges. For 3P-RGD₂, the two positive charges on Arginine residues are neutralized by the two negatively charged carboxylate groups when the primary amino group is conjugated to HYNIC. For I2P-RGD₂, however, the secondary amine-N is likely protonated under physiological conditions (pH = 7.0–7.4). As a result, the overall molecular charge is most likely +1 for I2P-RGD₂.

Another important finding of this study is that there is a linear relationship (Fig. 5B) between the tumor uptake of ^{99m}Tc -I2P-RGD₂ (Table 1) and the relative $\alpha_v\beta_3$ expression levels (Fig. 5A), suggesting that ^{99m}Tc -I2P-RGD₂ is useful for monitoring the tumor $\alpha_v\beta_3$ expression in a noninvasive fashion. The capability to estimate the relative $\alpha_v\beta_3$ expression levels non-invasively is important for pre-treatment selection of the appropriate cancer patients who will benefit most from the anti- $\alpha_v\beta_3$ therapy. For example, if the tumor in a cancer patient has very high uptake of ^{99m}Tc -I2P-RGD₂, it would be most likely responsive to the anti- $\alpha_v\beta_3$ and antiangiogenesis treatment. Conversely, if the tumor in a cancer patient has little uptake of ^{99m}Tc -I2P-RGD₂, the anti- $\alpha_v\beta_3$ and antiangiogenesis therapy will not be effective regardless of the amount of drug administered to the cancer patient.

5. Conclusion

The results from this study clearly show that (1) iminodiacetic acid is as good as glutamic acid for dimerization of cyclic RGD peptides; (2) the bifunctional linkers (glutamic acid vs. iminodiacetic acid) have significant impact on the excretion kinetics of their corresponding ^{99m}Tc radiotracers; and (3) ^{99m}Tc -I2P-RGD₂ is an excellent radiotracer for tumor imaging. Because of its lower liver uptake and better tumor/liver ratios, ^{99m}Tc -I2P-RGD₂ may have advantages over ^{99m}Tc -3P-RGD₂ for diagnosis of tumors in chest region.

Conflict of interest

All authors declare that they have no conflict of interest.

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Appendix A Supplementary data

Radio-HPLC chromatograms of ^{99m}Tc -I2P-RGD₂ in the kit matrix at 1 and 6 h post-labeling (Fig. S11) to demonstrate its solution stability, and representative microscopic fluorescent images of the xenografted U87MG, MDA-MB-231, OVCA-3 and PC-3 tumor tissues (Fig. S12) are all in word document. Supplementary data associated with this article can be found in the online version, at doi:10.1016/j.nucmedbio.2017.01.007.

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