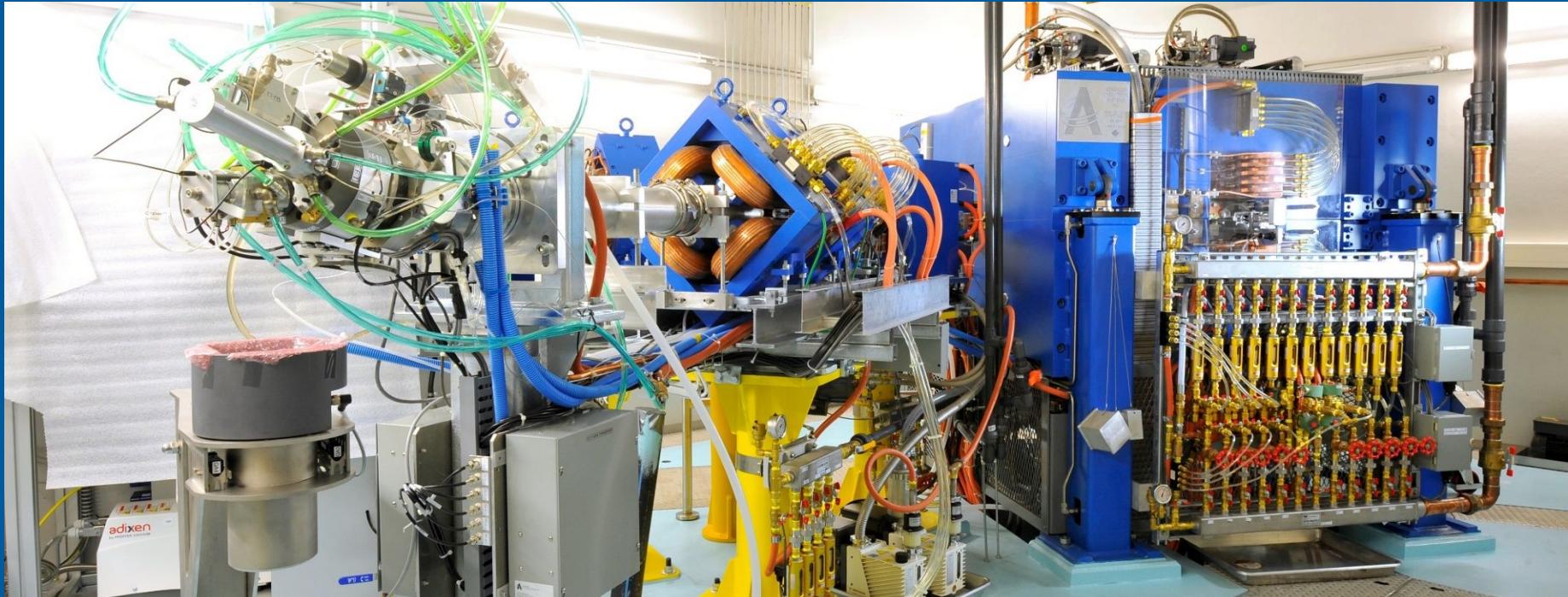


Radionuclide Theranostics through Radiopharmaceutical Sciences

Prof. Dr. rer. nat. Klaus Kopka · Institute of Radiopharmaceutical Cancer Research · k.kopka@hzdr.de · www.hzdr.de



1923 Distribution of radioactive lead (ThB = ^{212}Pb) in horse-bean,
Hevesy G. Biochem J. 1923, 17, 439-445.

LIII. THE ABSORPTION AND TRANSLOCATION
OF LEAD BY PLANTS.

A CONTRIBUTION TO THE APPLICATION OF THE
METHOD OF RADIOACTIVE INDICATORS IN THE
INVESTIGATION OF THE CHANGE OF SUBSTANCE
IN PLANTS.

BY GEORGE HEVESY.

*From the Institute of Plant Physiology of the Agricultural High School,
and Institute of Theoretical Physics of the University, Copenhagen.*

(Received May 4th, 1923.)

„By making use of radioactive indicators we can label atoms (ions), molecules and even larger units...; subsequently, their path and fate in the living organism can be followed.“

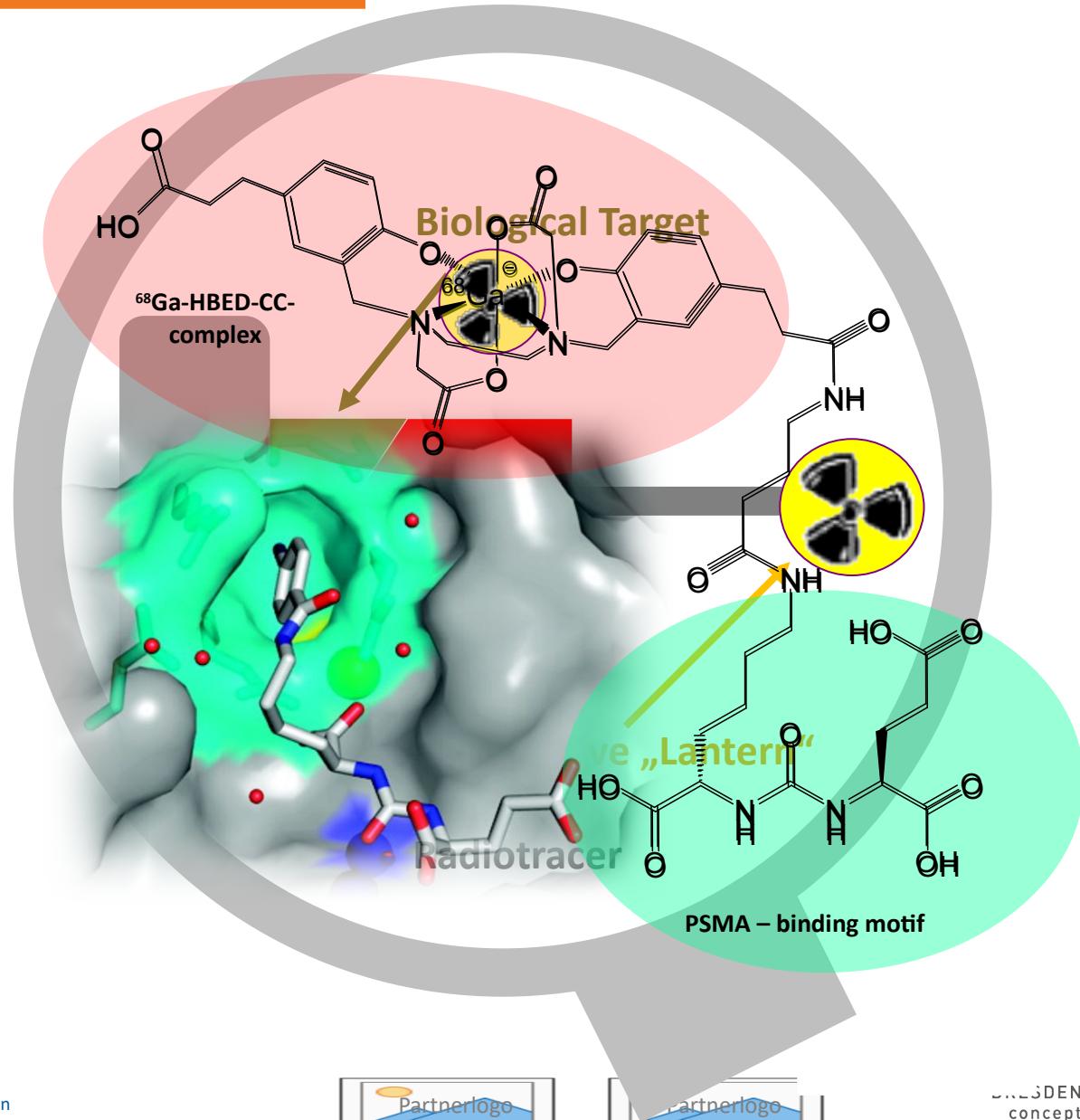
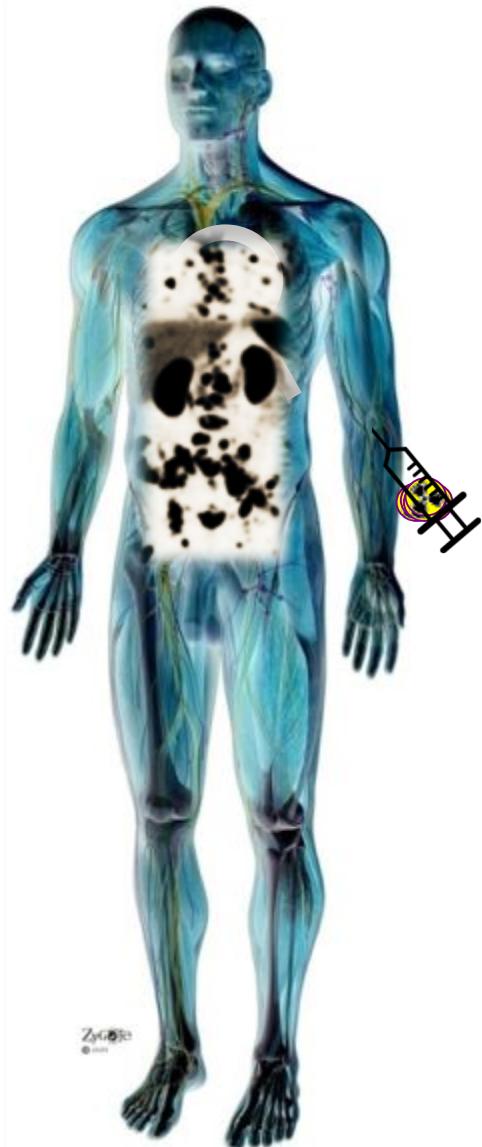


Georg Karl von Hevesy
(György Hevesy)

August 1st 1885 – July 5th 1966

Nobel Prize Chemistry 1943

Modern (Radio)Tracer Principle / Radioindicator Principle



GMP-compliant Production of Radiopharmaceuticals@HZDR 2022



GMP

- 200 m² clean room area
- 12 hot cells (class C)
- 2 dispensing cells (class A)
- 8 automated synthesizers
- GMP certificate 2019

Projects with industry

- **GEHC:** approved manufacturing of ¹⁸F-Flutemetamol (Vizamyl®)
- **ROTOP-Radiopharmacy:** cyclotron based production of ¹²³I-iodine as radionuclide

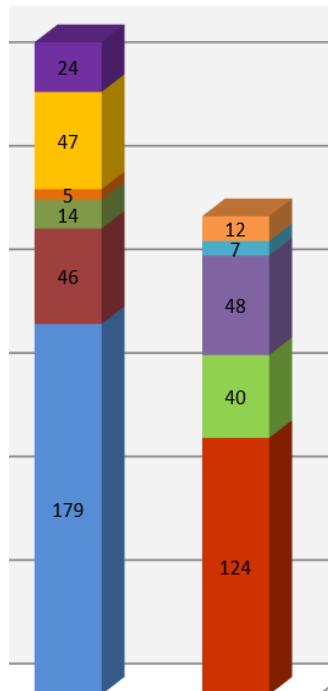
Radiopharmaceuticals produced in 2022 (315 batches)

- ^{[18]F}FDG (GlucoRos)*) (179)
- ^{[18]F}FDOPA (DOPARos)*) (46)
- Na^{[18]F}F (NaFRos)*) (5)
- ^{[11]C}methionine (47)
- ^{[18]F}PSMA-1007 (24)
- ^{[18]F}Flutemetamol (14)

* with marketing authorization

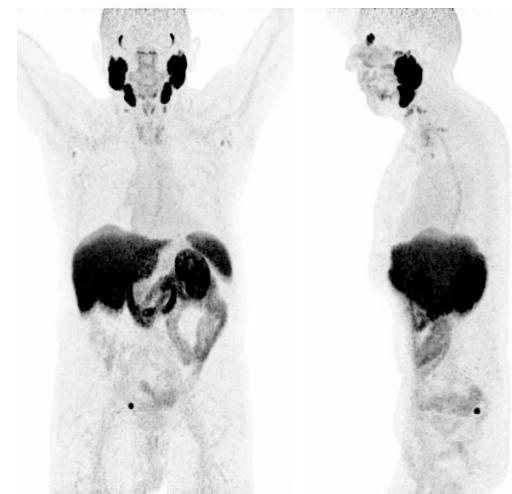
Cyclotron TRFlex (+231 batches)

- ¹²³I (124)
- ⁶⁷Cu (40)
- ⁶⁴Cu (48)
- ¹³³La (7)
- ¹³¹Ba (12)



Recent developments

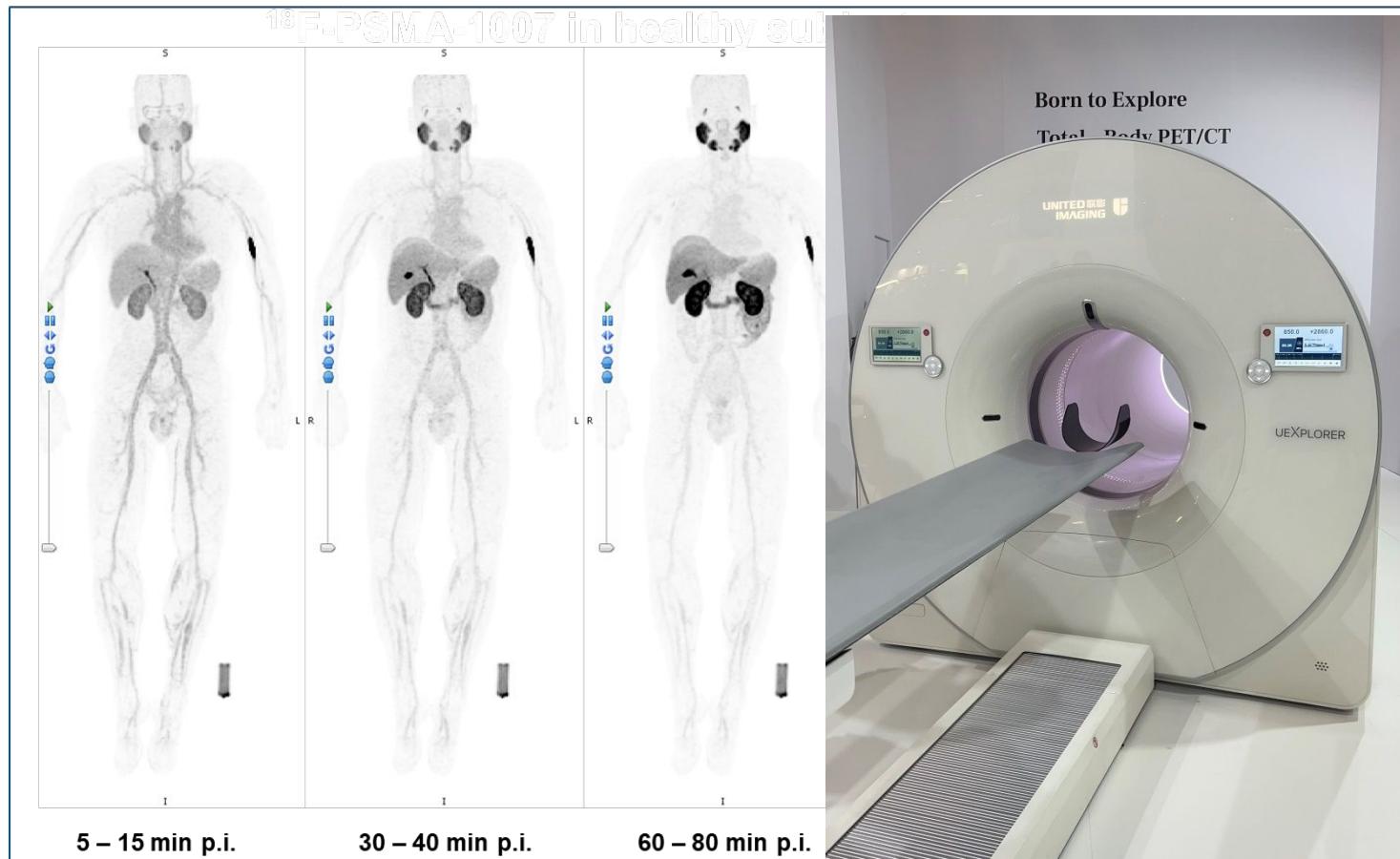
- transfer of ^{[18]F}PSMA-1007 to University Hospital Dresden since 2020 (628 patients)



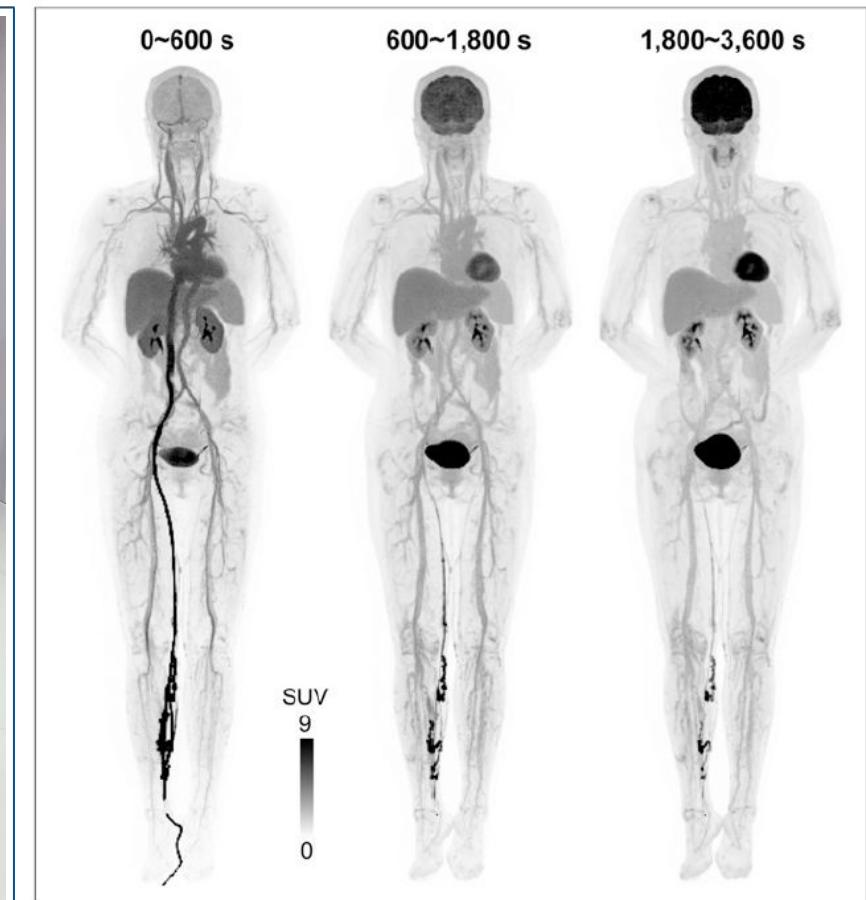
Translation into Total-Body PET/CT

Visionary future Technology: e.g. uEXPLORER

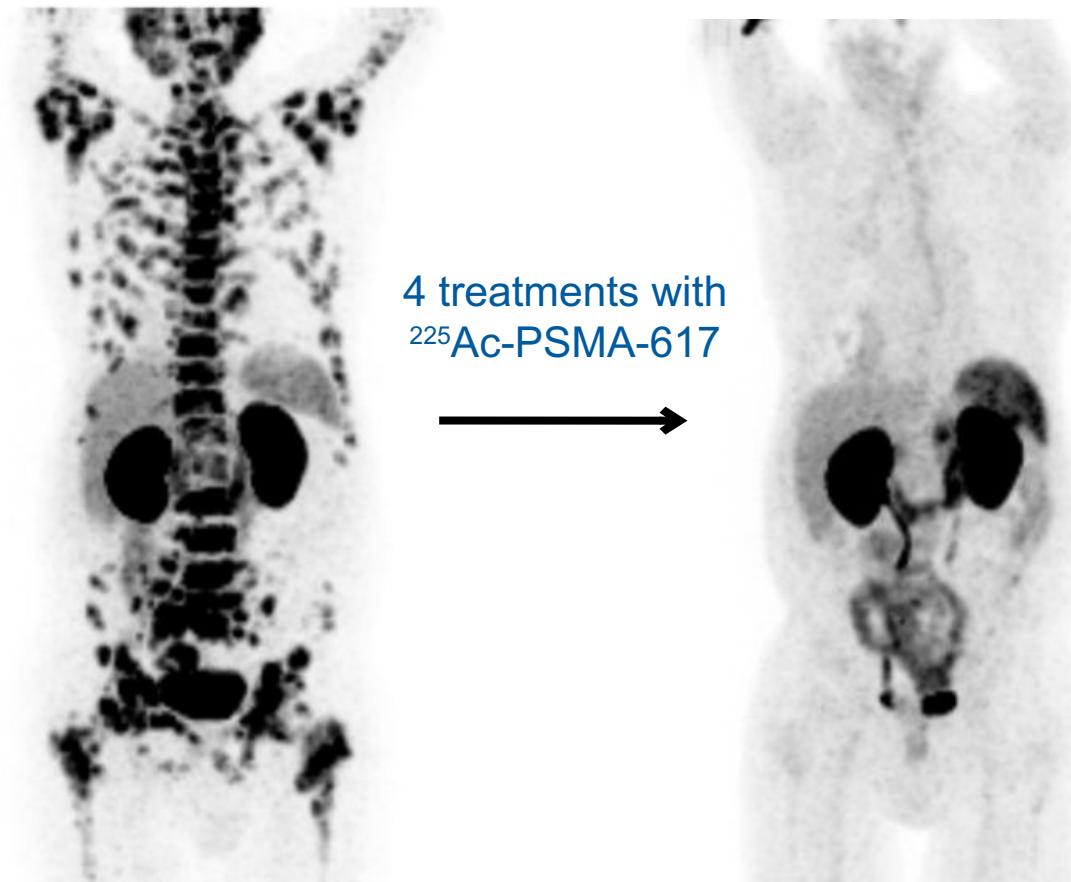
PET Tracer X



PET Tracer Y



Imaging & Therapy (TAT) [⁶⁸Ga]Ga-PSMA-11 & [²²⁵Ac]Ac-PSMA-617



4 treatments with
²²⁵Ac-PSMA-617



THERANOSTICS

*an emerging tool in drug discovery
and commercialisation*

The term theranostics was probably first used by PharmaNetics president and CEO John Funkhouser in describing his company's business model in developing diagnostic tests directly linked to the application of a specific therapies. In the case of PharmaNetics this takes the form of new generations of point of care coagulation tests supporting coagulation therapies:

Diagnostics – the ability to define a disease state.

Theranostics – the ability to affect therapy or treatment of a disease state.

Some examples of theranostics

CASE STUDY 1: Herceptin® and HercepTest® – the birth of Theranostics?

September 25, 1998 was a key day for theranostics.



...On that day the FDA granted simultaneous approval for both Genentech's Herceptin® for the treatment of stage IV breast cancer and Dako's HercepTest® for diagnosis of Her2 overexpression..."

"HercepTest is indicated as an aid in the determination of whether trastuzumab treatment may be considered."

Concept of Radioisotopes (in principle already theranostic approach)

$^{123}_{53} I$

$T_{1/2} = 13.2 \text{ h}$
 γ

$^{124}_{53} I$

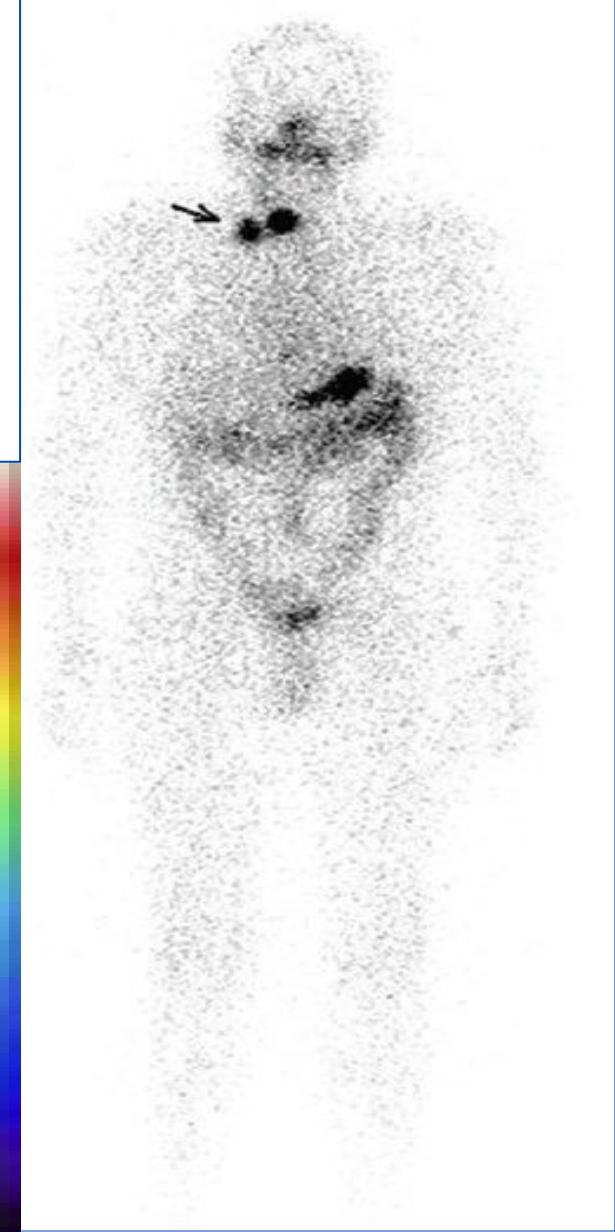
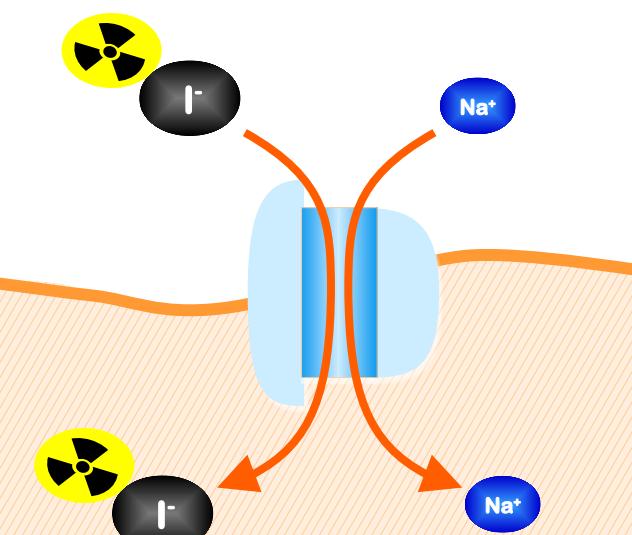
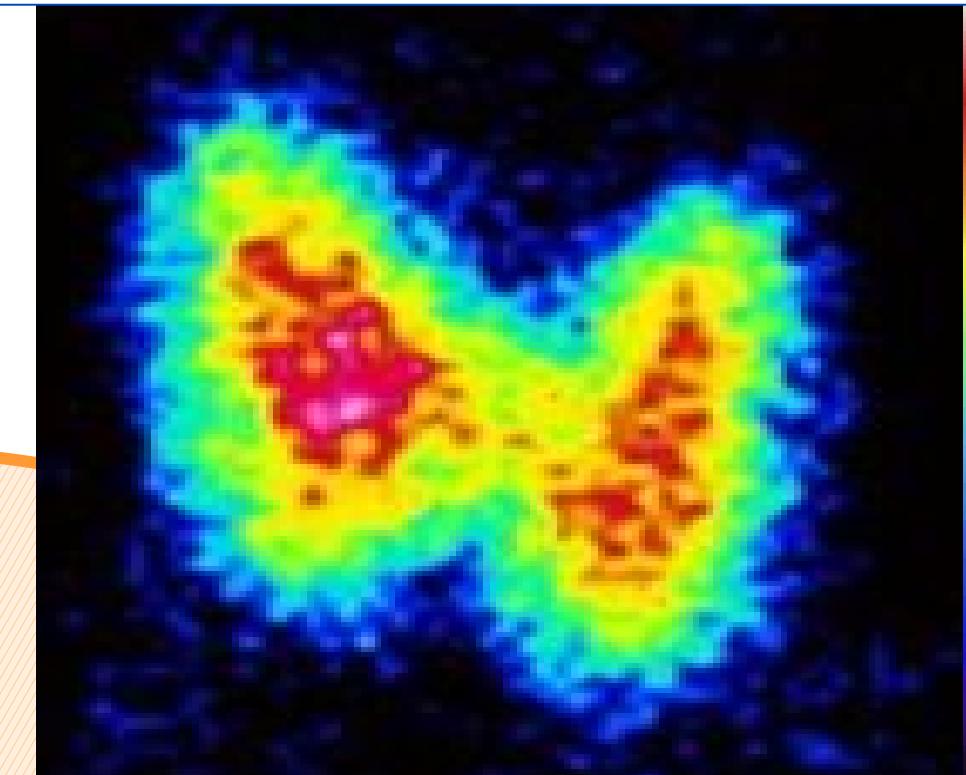
$T_{1/2} = 4.15 \text{ d}$
 $\beta^+ (+ \gamma)$

$^{127}_{53} I$

stable

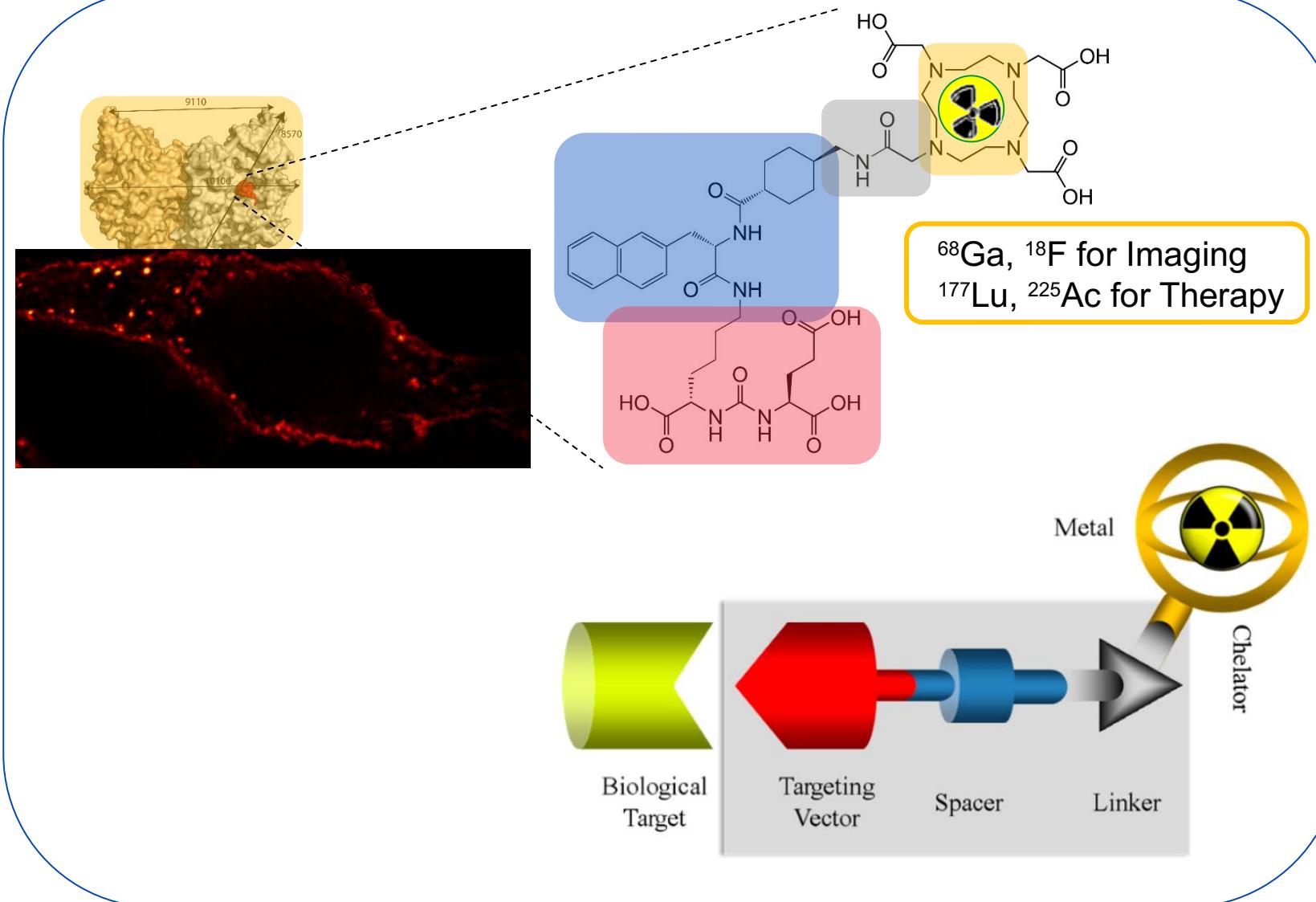
$^{131}_{53} I$

$T_{1/2} = 8 \text{ d}$
 $\beta^- (+ \gamma)$

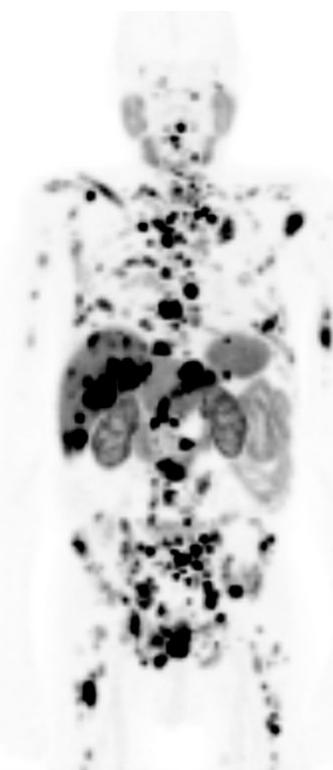


The Concept of Radionuclide Theranostics: Tandem Nuclear Medicine / Radiopharmaceutical Sciences

Early Stage



Late Stage



Color-coded periodic table with current or potential radionuclide applications

The figure shows a standard periodic table of elements. Each element's box is filled with a color corresponding to its use in cancer therapy. Red indicates PET, blue indicates Beta Therapy, green indicates SPECT, yellow indicates Alpha Therapy, and purple indicates Auger e- Therapy. The colors are applied to the boxes of the following elements:

- PET**: Carbon (C), Nitrogen (N), Oxygen (O), Fluorine (F), Chlorine (Cl), Argon (Ar), Potassium (K), Calcium (Ca), Scandium (Sc), Titanium (Ti), Vanadium (V), Chromium (Cr), Manganese (Mn), Iron (Fe), Cobalt (Co), Nickel (Ni), Copper (Cu), Zinc (Zn), Gallium (Ga), Germanium (Ge), Arsenic (As), Selenium (Se), Bromine (Br), Krypton (Kr), Rubidium (Rb), Strontium (Sr), Yttrium (Y), Zirconium (Zr), Niobium (Nb), Molybdenum (Mo), Technetium (Tc), Ruthenium (Ru), Rhodium (Rh), Palladium (Pd), Silver (Ag), Cadmium (Cd), Indium (In), Tin (Sn), Antimony (Sb), Tellurium (Te), Iodine (I), Xenon (Xe), Cs, Ba, Hf, Ta, W, Re, Os, Ir, Pt, Au, Hg, Tl, Pb, Bi, Po, At, Rn.
- Beta Therapy**: Boron (B), Silicon (Si), Phosphorus (P), Sulfur (S), Al, Mg, Na, Li, Be.
- SPECT**: None.
- Alpha Therapy**: None.
- Auger e- Therapy**: None.

*Lanthanoids

57 La Lanthanum 138.91	58 Ce Cerium 140.12	59 Pr Praseodymium 140.91	60 Nd Neodymium 144.24	61 Pm Promethium	62 Sm Samarium 150.36(2)	63 Eu Europium 151.98	64 Gd Gadolinium 157.25(3)	65 Tb Terbium 158.93	66 Dy Dysprosium 162.50	67 Ho Holmium 164.93	68 Er Erbium 167.26	69 Tm Thulium 168.93	70 Yb Ytterbium 173.05	71 Lu Lutetium 174.97
89 Ac Actinium	90 Th Thorium 232.04	91 Pa Protactinium 231.04	92 U Uranium 238.03	93 Np Neptunium	94 Pu Plutonium	95 Am Americium	96 Cm Curium	97 Bk Berkelium	98 Cf Californium	99 Es Einsteinium	100 Fm Fermium	101 Md Mendelevium	102 No Nobelium	103 Lr Lawrencium

**Actinoids

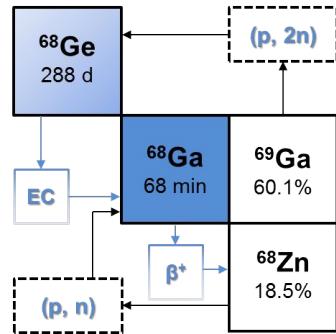


Availability of theranostic Radionuclides



Challenge Radionuclide Availability [for *in vivo* theranostic approach]

*Positron Emitter Gallium-68 (^{68}Ga)



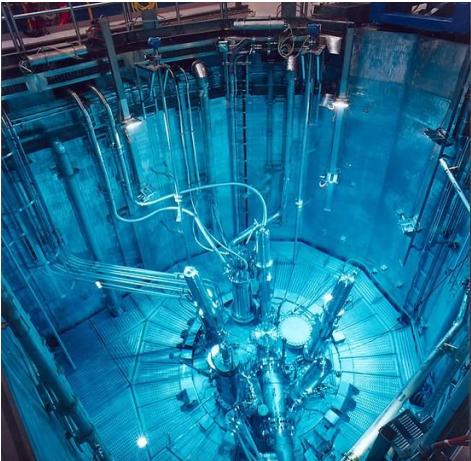
Gallium-68 (^{68}Ga)

$$T_{1/2} = 68 \text{ m}$$

$$E_{\text{mean},\beta^+} = 0.830 \text{ MeV (89\%)}$$

$$E_\gamma = 511 \text{ keV (Annihilation)}$$

$^{68}\text{Ge}/^{68}\text{Ga}$ -Generator



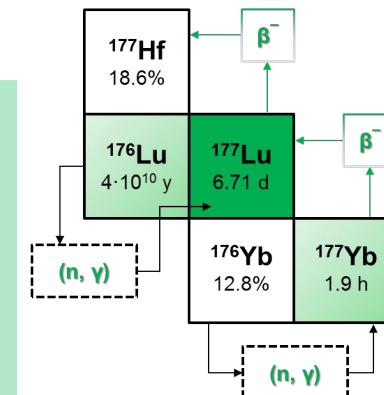
Lutetium-177 (^{177}Lu)

$$T_{1/2} = 6.71 \text{ d}$$

$$E_{\text{mean},\beta^-} = 0.134 \text{ MeV (100 \%)} \quad (100\%)$$

$$E_\gamma = 208 \text{ keV (10.4 \%)} \quad (10.4\%)$$

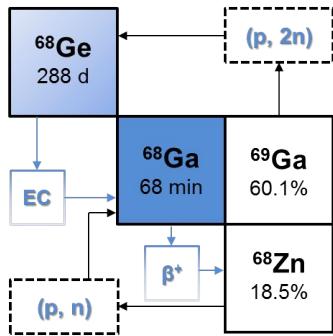
$$R_{\text{max}} = 2.0 \text{ mm}$$



*Beta-Minus Particle Emitter Lutetium-177 (^{177}Lu)

Challenge Radionuclide Availability [Feasibility of *in vivo* theranostic approach]

*Positron Emitter Gallium-68 (^{68}Ga)



Gallium-68 (^{68}Ga)

$$T_{1/2} = 68 \text{ m}$$

$$E_{\text{mean},\beta^+} = 0.830 \text{ MeV (89\%)}$$

$$E_\gamma = 511 \text{ keV (Annihilation)}$$

$^{68}\text{Ge}/^{68}\text{Ga}$ -Generator



*Positron Emitter Fluorine-18 (^{18}F)

^{17}N	^{18}O	^{19}F	^{20}Ne
^{16}N	^{17}O	^{18}F	^{19}Ne
^{15}N	^{16}O	^{17}F	^{18}Ne
^{14}N	^{15}O	^{16}F	^{17}Ne

Fluorine-18 (^{18}F)

$$T_{1/2} = 109.8 \text{ m}$$

$$E_{\text{mean},\beta^+} = 0.249 \text{ MeV (97\%)}$$

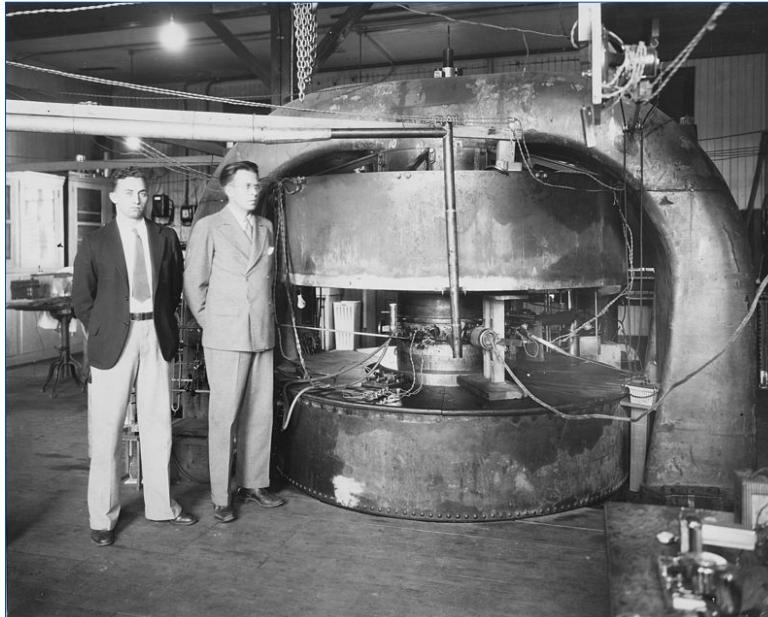
$$E_\gamma = 511 \text{ keV (Annihilation)}$$

$^{18}\text{O}(p,n)^{18}\text{F}$

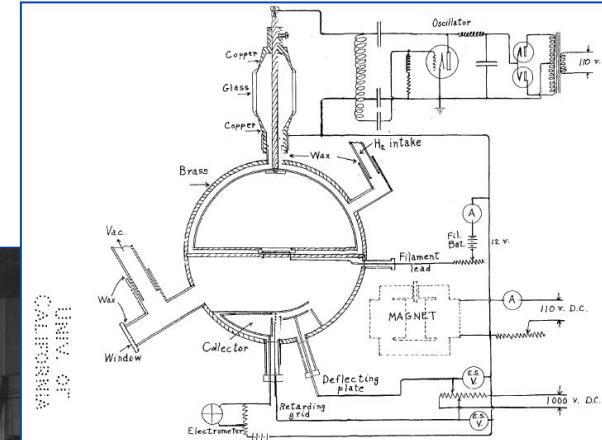


1930 Ernest Orlando Lawrence realises a cyclotron
(together with Milton Stanley Livingston)

Nobel Prize Physics 1939
„...especially with regard to
artificial radioactive elements“



27 inch cyclotron 1935



4.5 inch cyclotron 1930



IBA film

Medical Cyclotron Infrastructure in the D-A-CH Region

...not enough!

HZDR + Local Partners
Top Nucleus for
for NextGen Radionuclide Availability

Hersteller MeV	GE HEALTHCARE		IBA		Weitere (ACSI, TCC, Siemens usw.)		Gesamt	
	absolut (n)	relativ	absolut (n)	relativ	absolut (n)	relativ	absolut (n)	relativ
≤ 10 MeV	5	12%					5	12%
11-20 MeV	19	45%	7	17%	6	14%	32	76%
20-30 MeV			1	2%	2	5%	3	7%
≥ 30 MeV					2	5%	2	5%
Gesamt	24	57%	8	19%	10	24%	42	100%

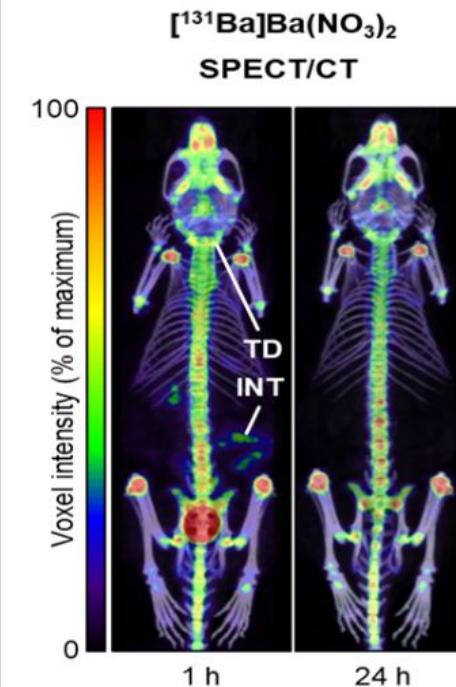


Applied Basic Research vs. Translational Research [@HZDR]:

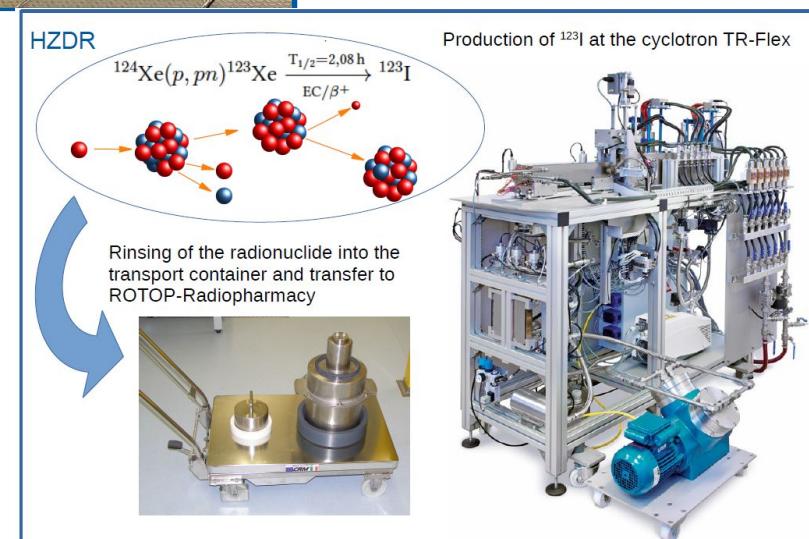
e.g. barium-131 as surrogate for radium-223/224 vs. iodine-123 for ioflupane production



TR-FLEX-Cyclotron: ^{131}Ba via $^{131}\text{Cs}(p,3n)^{131}\text{Ba}$

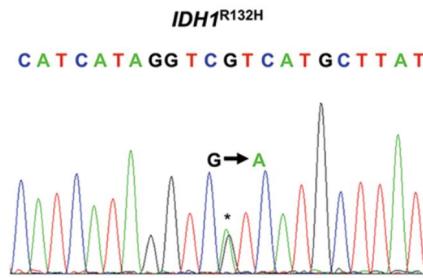


nanoScan SPECT/CT
free barium-131

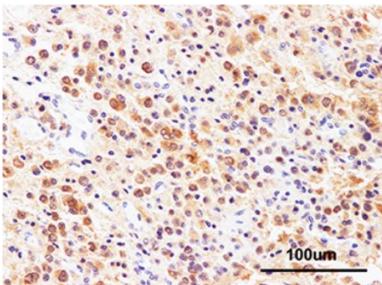


KIPROS-200 adapted to
TR-FLEX-Cyclotron:
 ^{123}I via $^{124}\text{Cs}(p,pn)^{123}\text{Xe}$

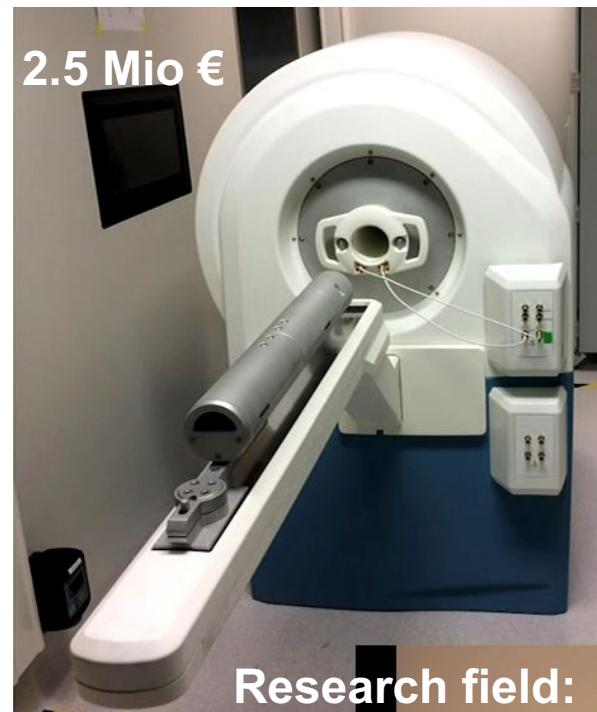
Genomics



Proteomics



In vivo Molecular (multimodal) Imaging

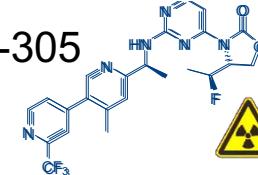


Cryogen-free 7.0T MR/PET scanner

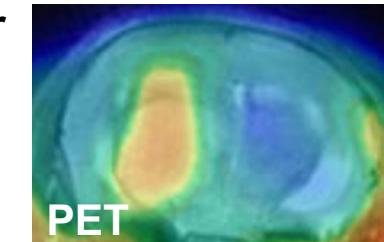
Simultaneous and sequential small animal imaging

PET Radiotracer

IDH-305

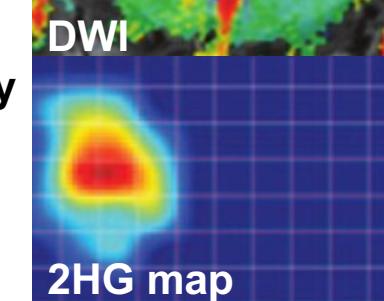
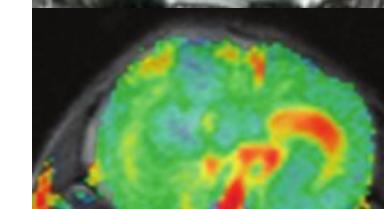


Translational research: Tumor-specific imaging biomarkers

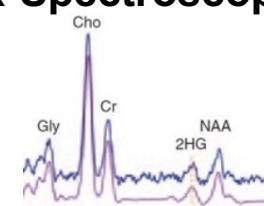


Structural MRI

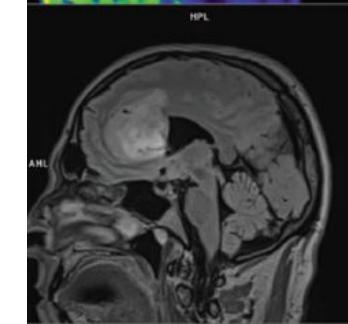
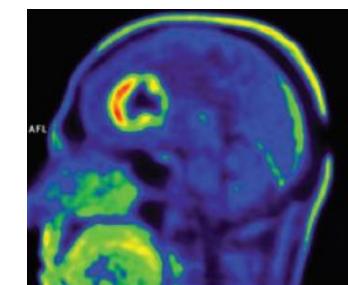
Functional MRI



MR-Spectroscopy



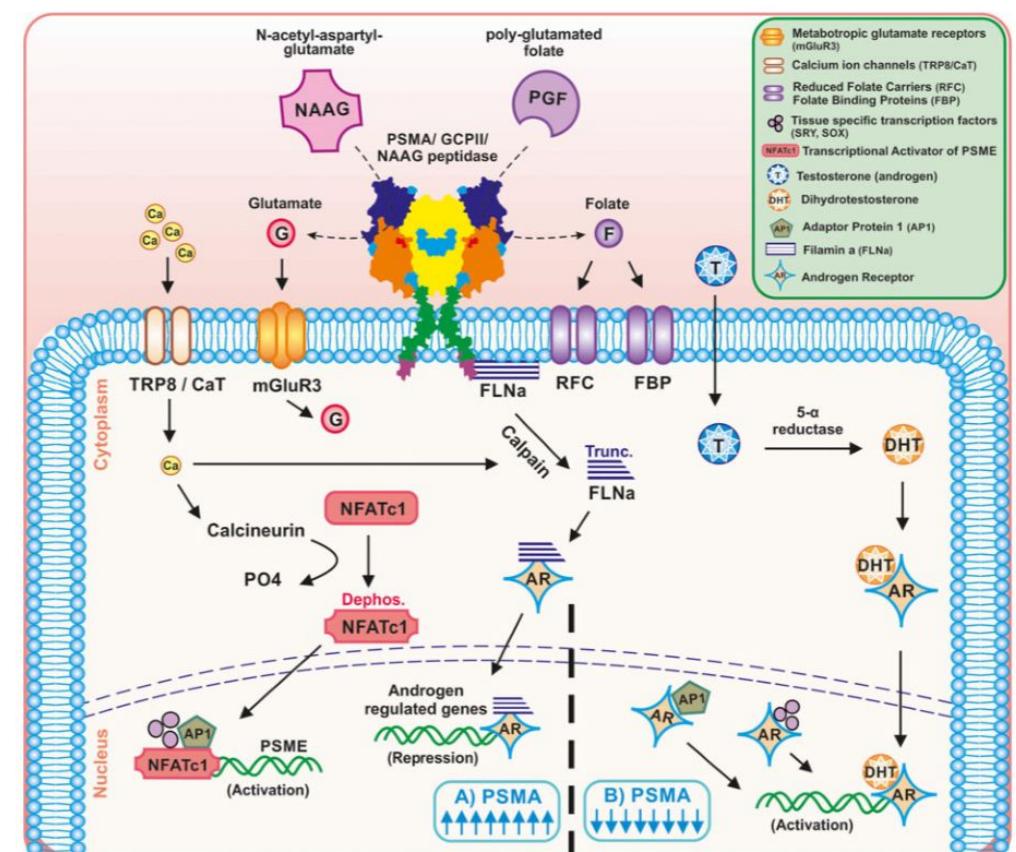
Biology-guided radiotherapy (BgRT)



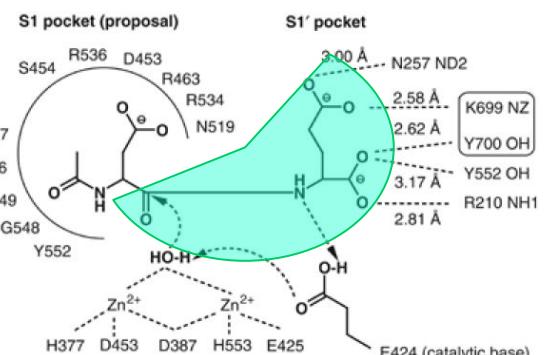
The therapeutic and diagnostic potential of PSMA in cancer

PSMA / GCP II / FOLH1

750-amino acid cell surface glycoprotein (100 kDa)
Membrane-bound zinc metallopeptidase
brain, kidney, spleen, intestine, salivary glands, prostate



NAAG



folyl-poly- γ -glutamate

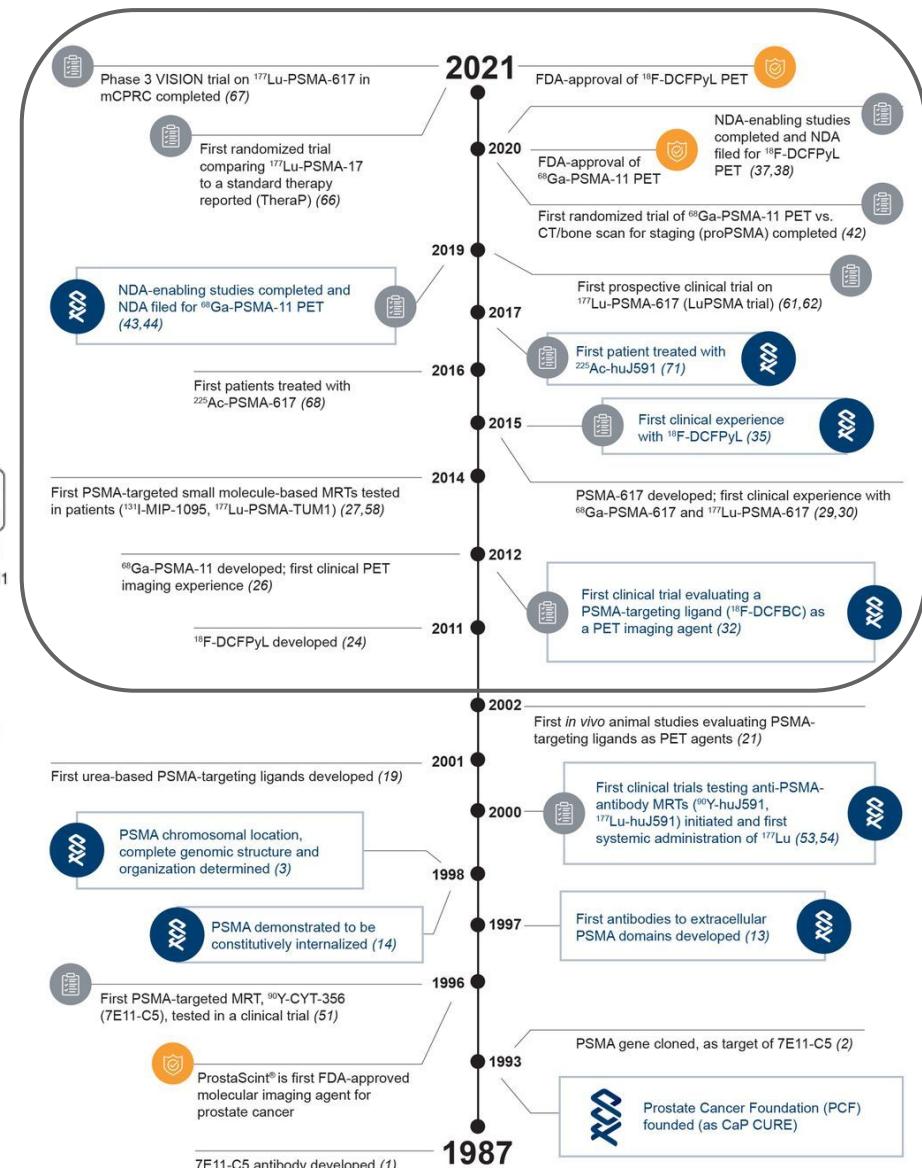
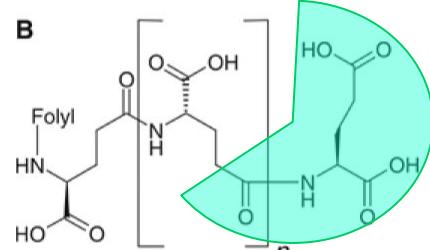


Image of the Year Award 2018 [SNMMI, Philadelphia, USA]

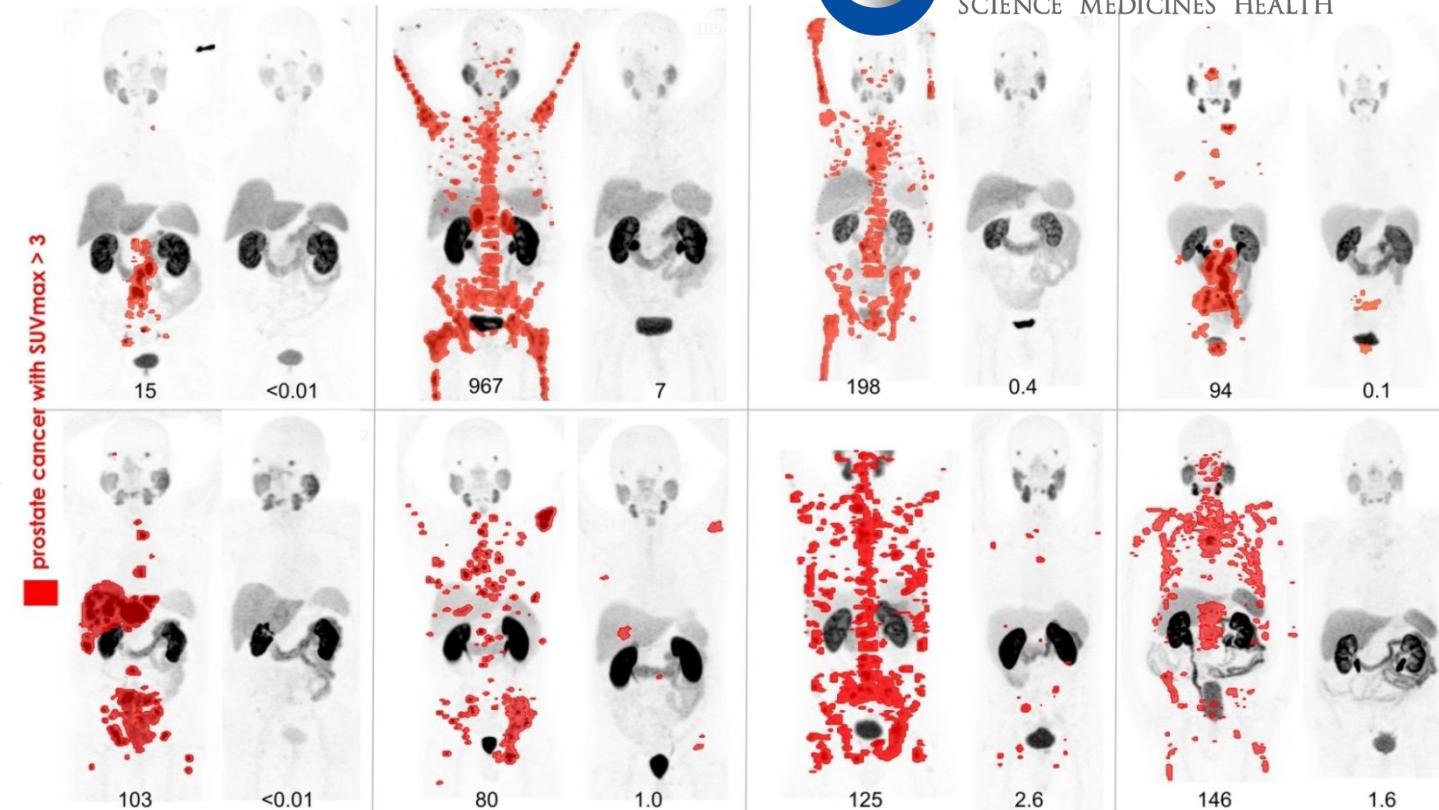
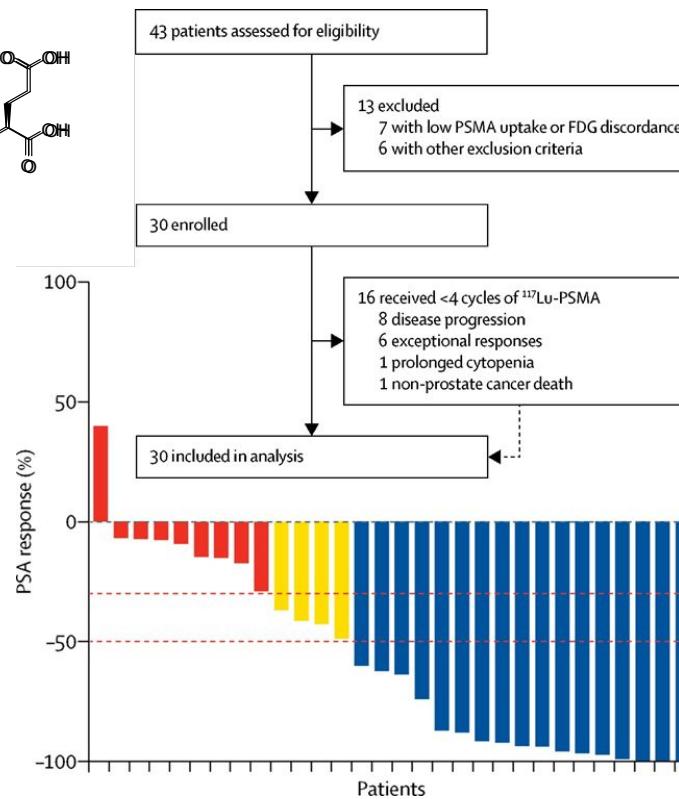
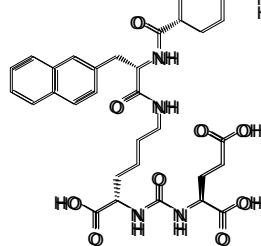
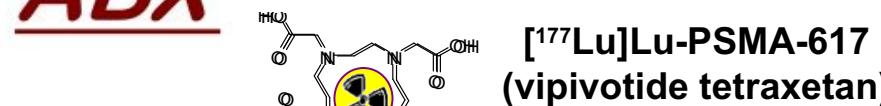
 **PLUVICTO™**



lutetium Lu 177 vipivotide tetraaxetam

EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

ABX

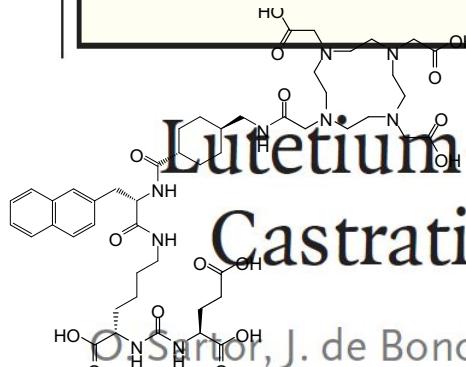


**Michael S. Hofman et al., 2018 Henry N. Wagner, Jr, MD,
Image of the Year Award of the Society of Nuclear
Medicine and Molecular Imaging.**





ORIGINAL ARTICLE



Lutetium-177-PSMA-617 for Met Castration-Resistant Prostate C

Sartor, J. de Bono, K.N. Chi, K. Fizazi, K. Herrmann, K. Rahbar, L.T. Nordquist, N. Vaishampayan, G. El-Haddad, C.H. Park, A. Armour, W.J. Pérez-Contreras, M. DeSilvio, E. Kpamegan, R.A. Messmann, M.J. Morris, and B.J. Krause, for the VISION I

ABSTRACT

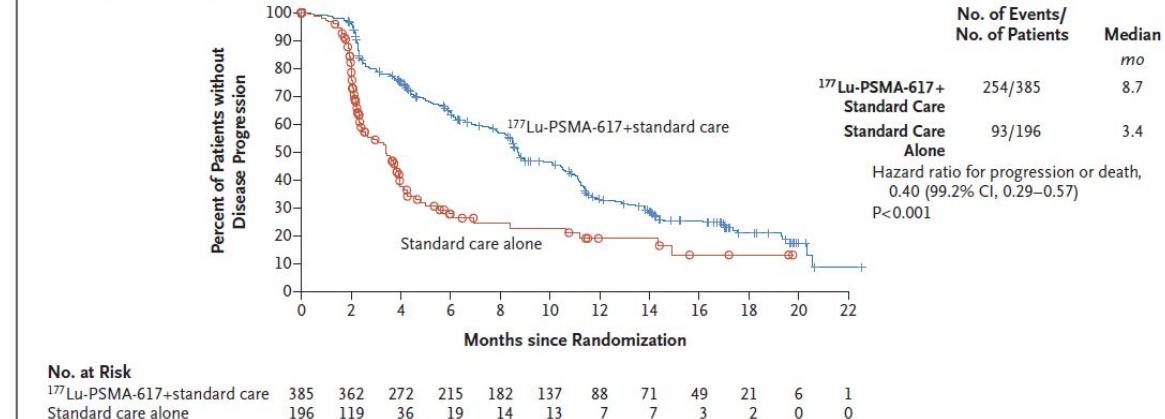
Novartis Pluvicto™ approved by FDA as first targeted radioligand therapy for treatment of progressive, PSMA positive metastatic castration-resistant prostate cancer

Mar 23, 2022

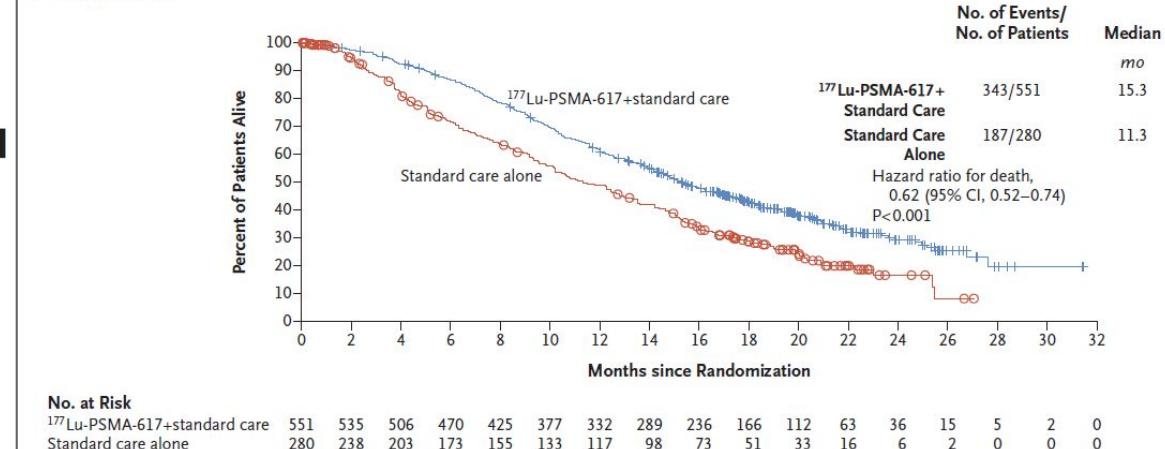
Novartis receives European Commission approval for Pluvicto® as the first targeted radioligand therapy for treatment of progressive PSMA-positive metastatic castration-resistant prostate cancer

Dec 13, 2022

A Imaging-Based Progression-free Survival



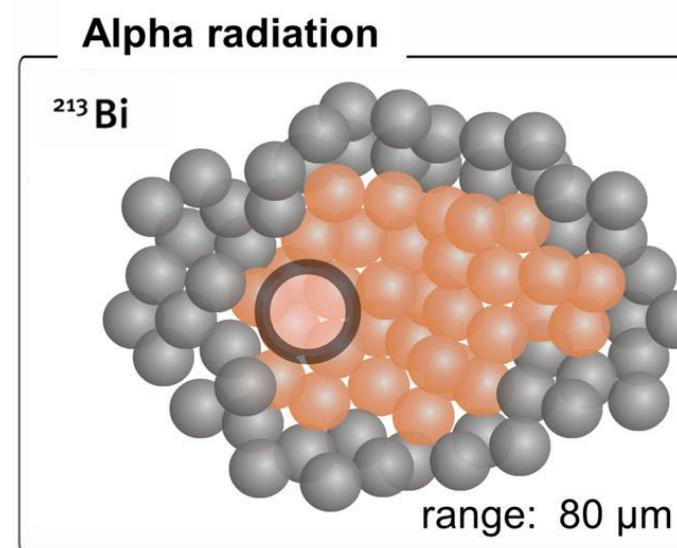
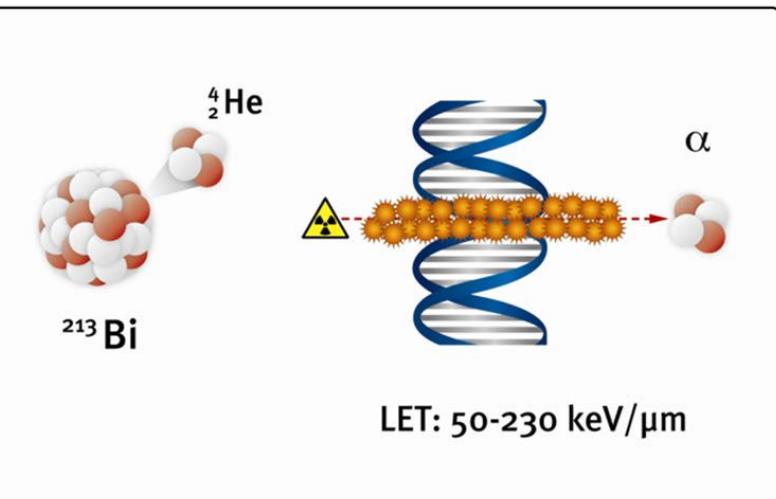
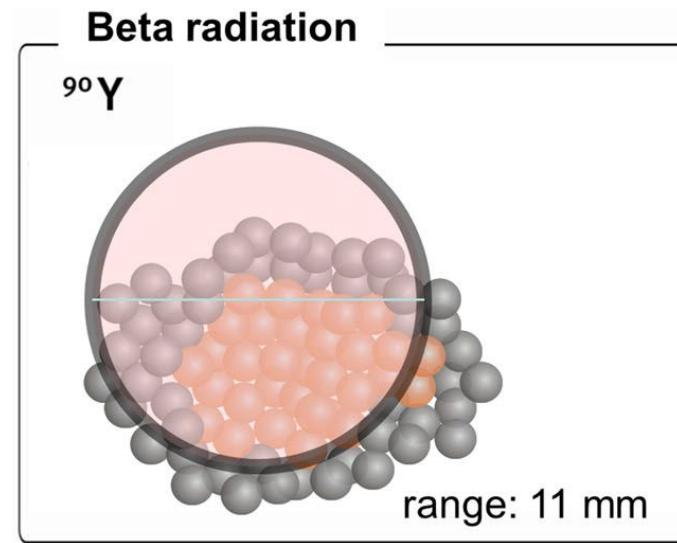
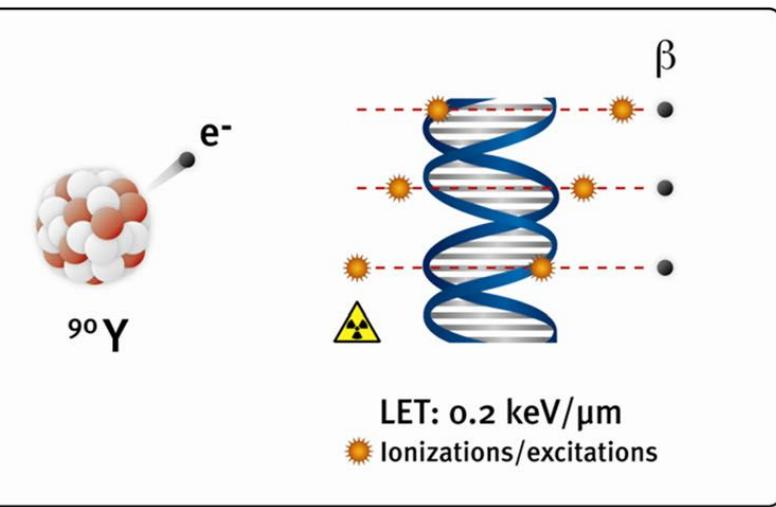
B Overall Survival



Late Stage Radionuclide Theranostics [beyond Targeted beta-Therapy]

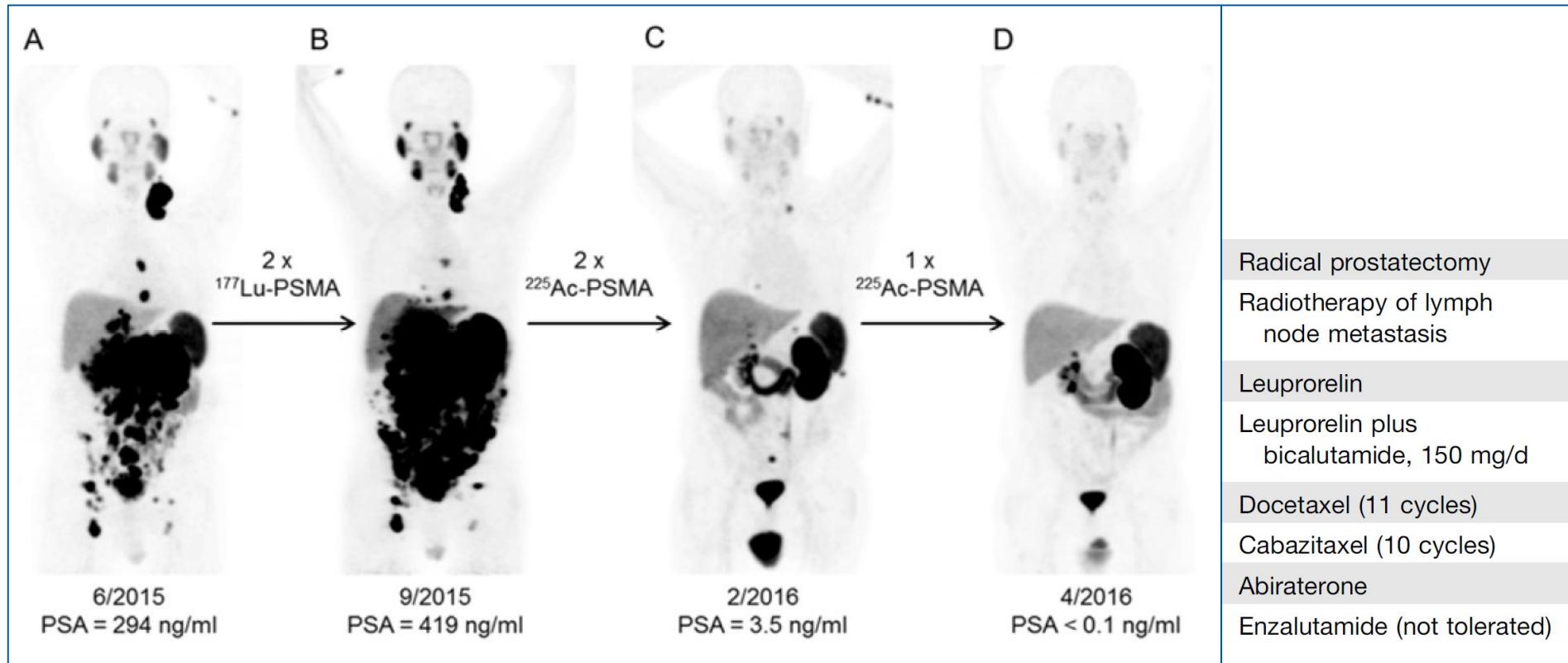


Discussion of alpha emitters for targeted alpha therapy (TAT) vs. beta emitters



Imaging & Therapy (with TAT) [⁶⁸Ga]Ga-PSMA-11 & [²²⁵Ac]Ac-PSMA-617

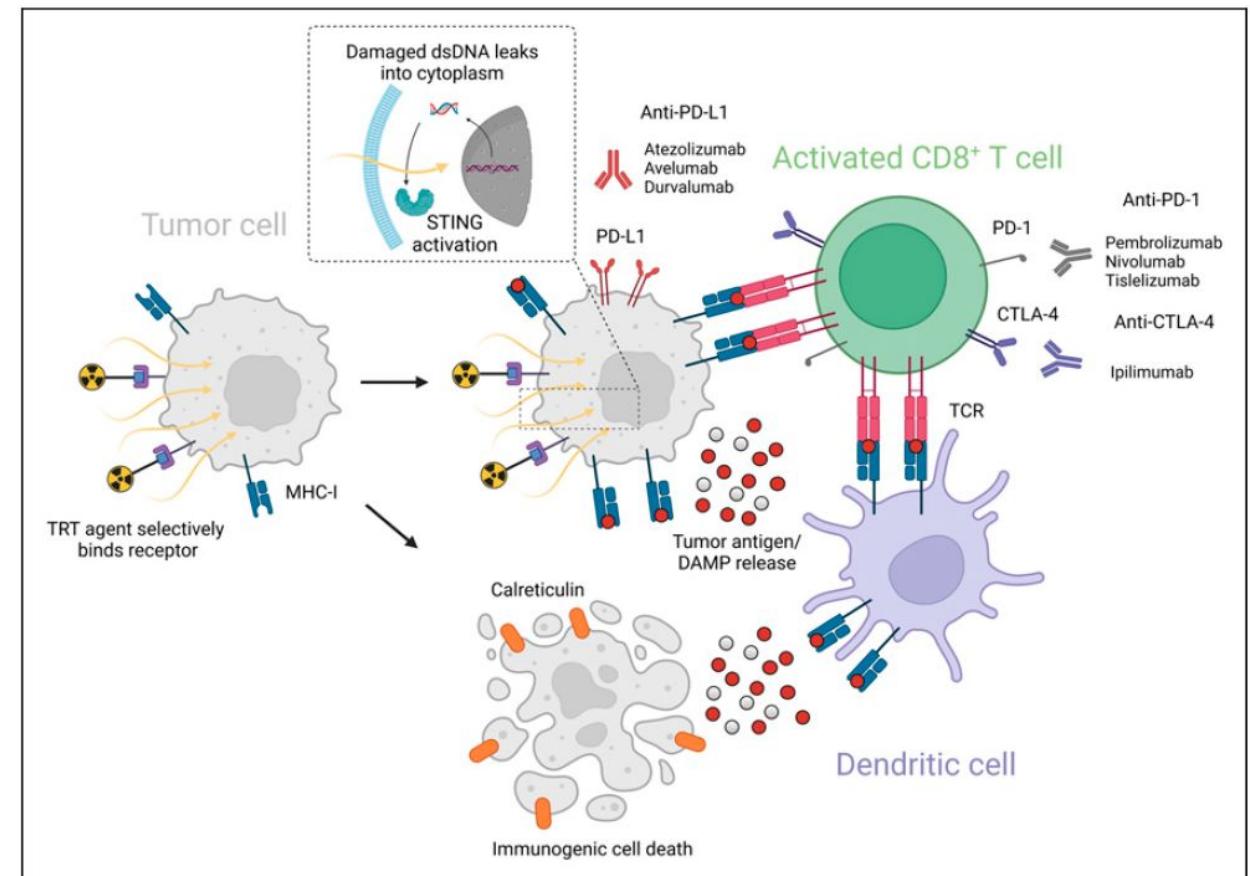
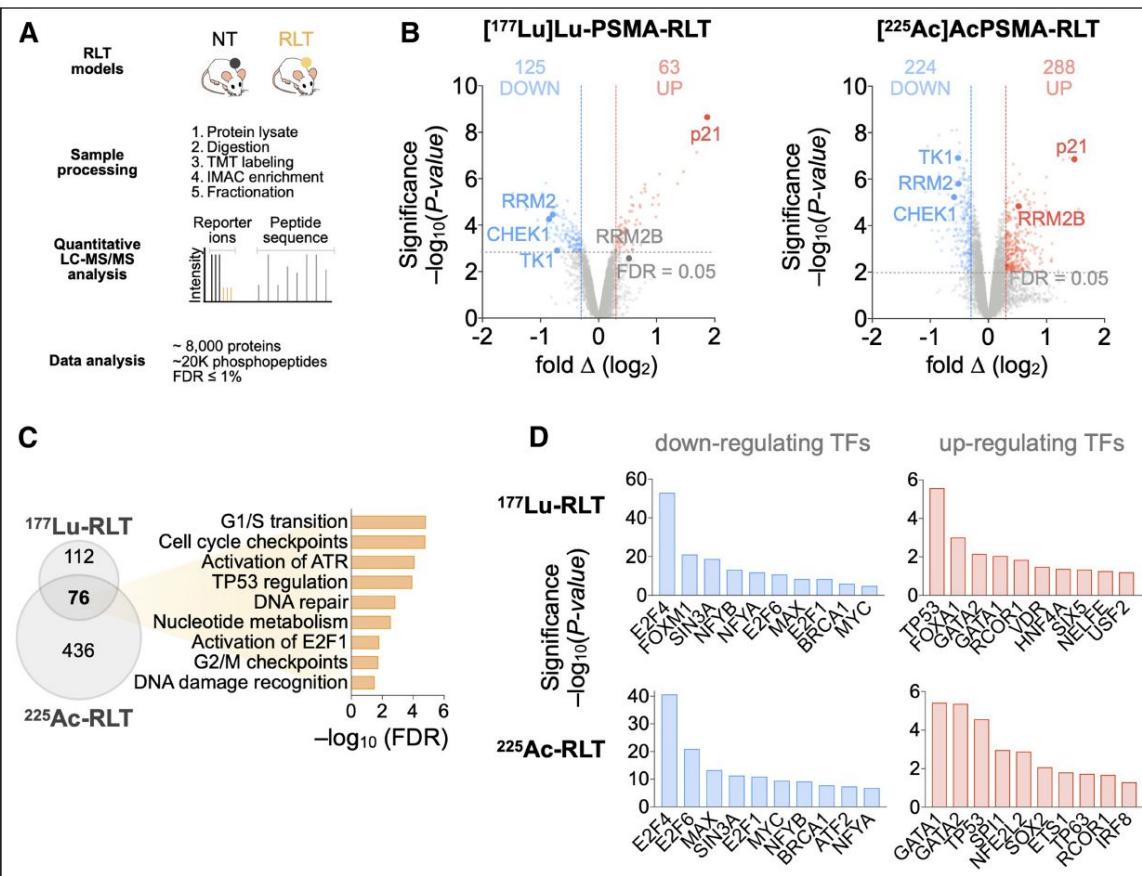
... overcoming resistance?



Paradigm: Targeted Radioligand Therapy (RLT) and Immune Checkpoint Blockade in Combination?

Understanding mechanisms...

... to overcome resistance?



Early Stage Combining Imaging with Surgery



Surgery: Translational Research Pipeline, Dual-labelled Tracers

European Journal of Nuclear Medicine and Molecular Imaging
<https://doi.org/10.1007/s00259-020-05184-0>

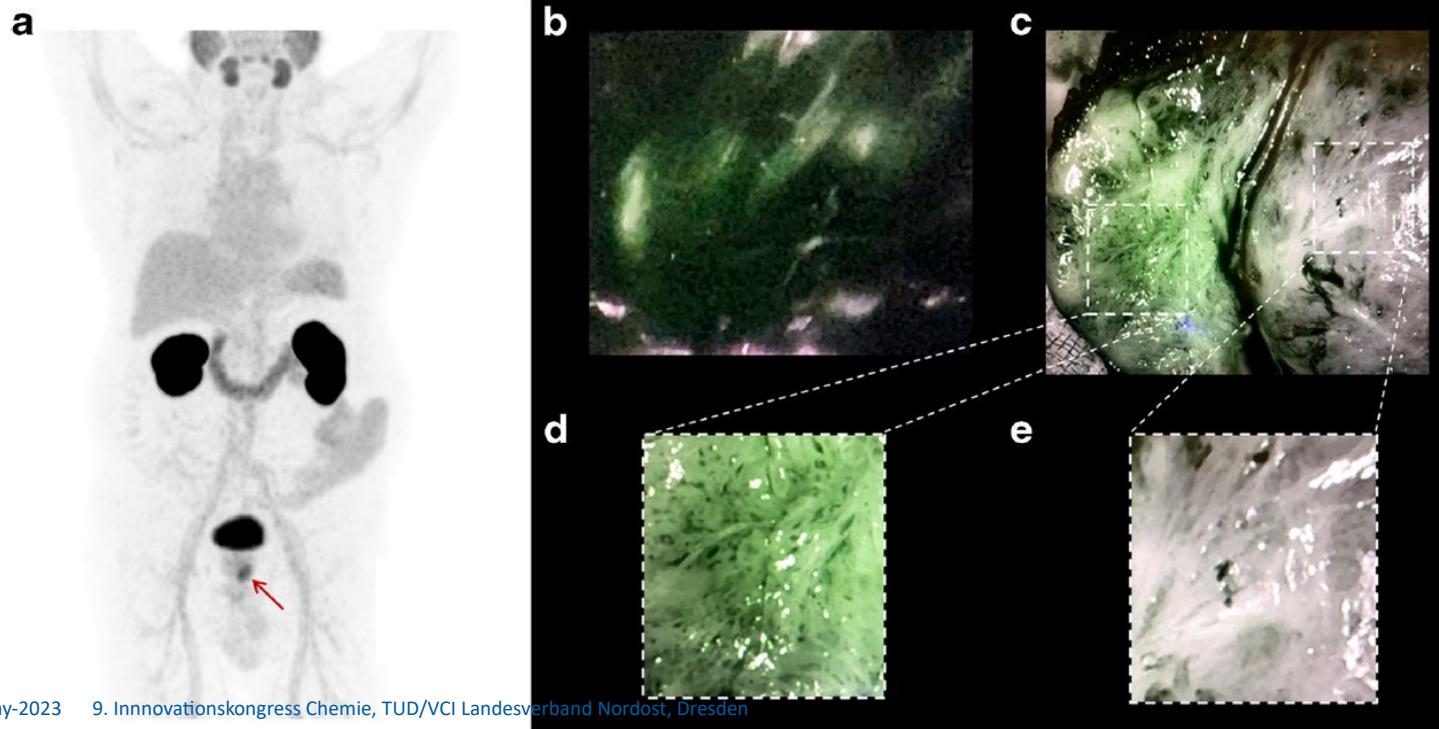
IMAGE OF THE MONTH



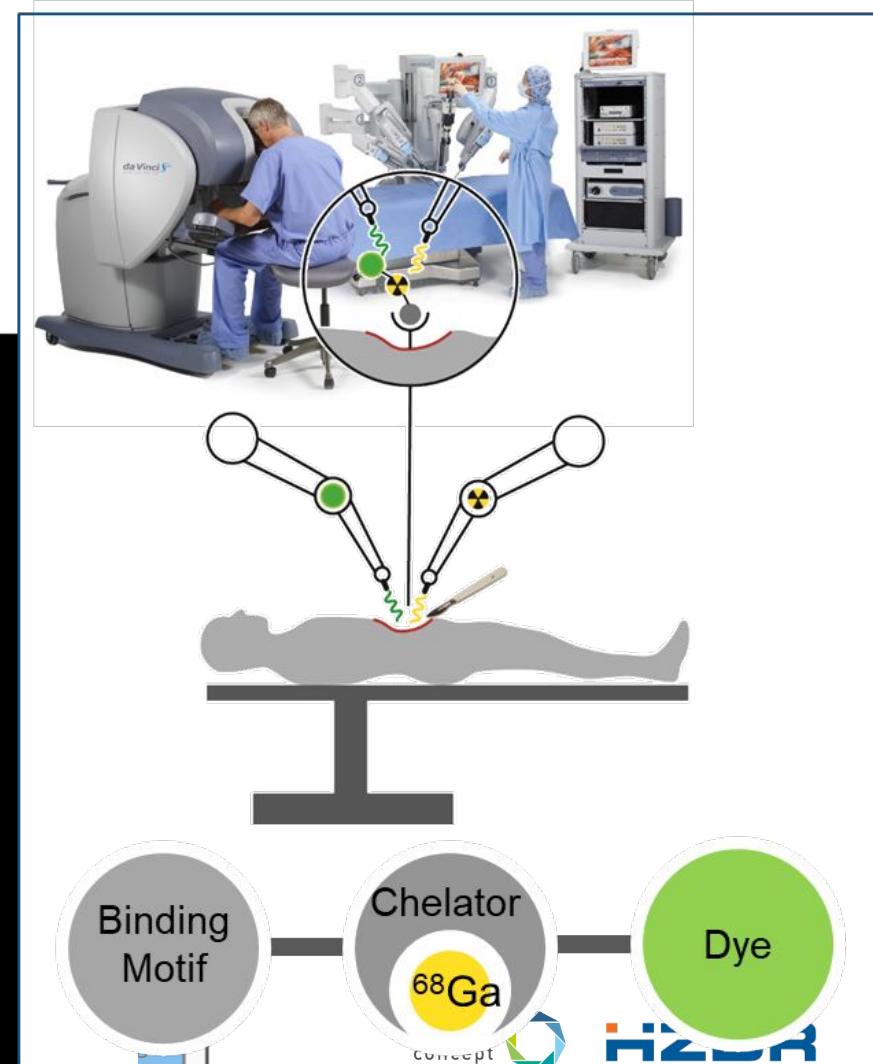
The PSMA-11-derived hybrid molecule PSMA-914 specifically identifies prostate cancer by preoperative PET/CT and intraoperative fluorescence imaging

Ann-Christin Eder^{1,2} • Mohamed A. Omrane^{1,2} • Sven Stadlbauer^{3,4} • Mareike Roscher^{3,5} • Wael Y. Khoder⁶ • Christian Gratzke⁶ • Klaus Kopka^{3,4,7,8} • Matthias Eder^{1,2} • Philipp T. Meyer^{1,9} • Cordula A. Jilg⁶ • Juri Ruf^{1,9}

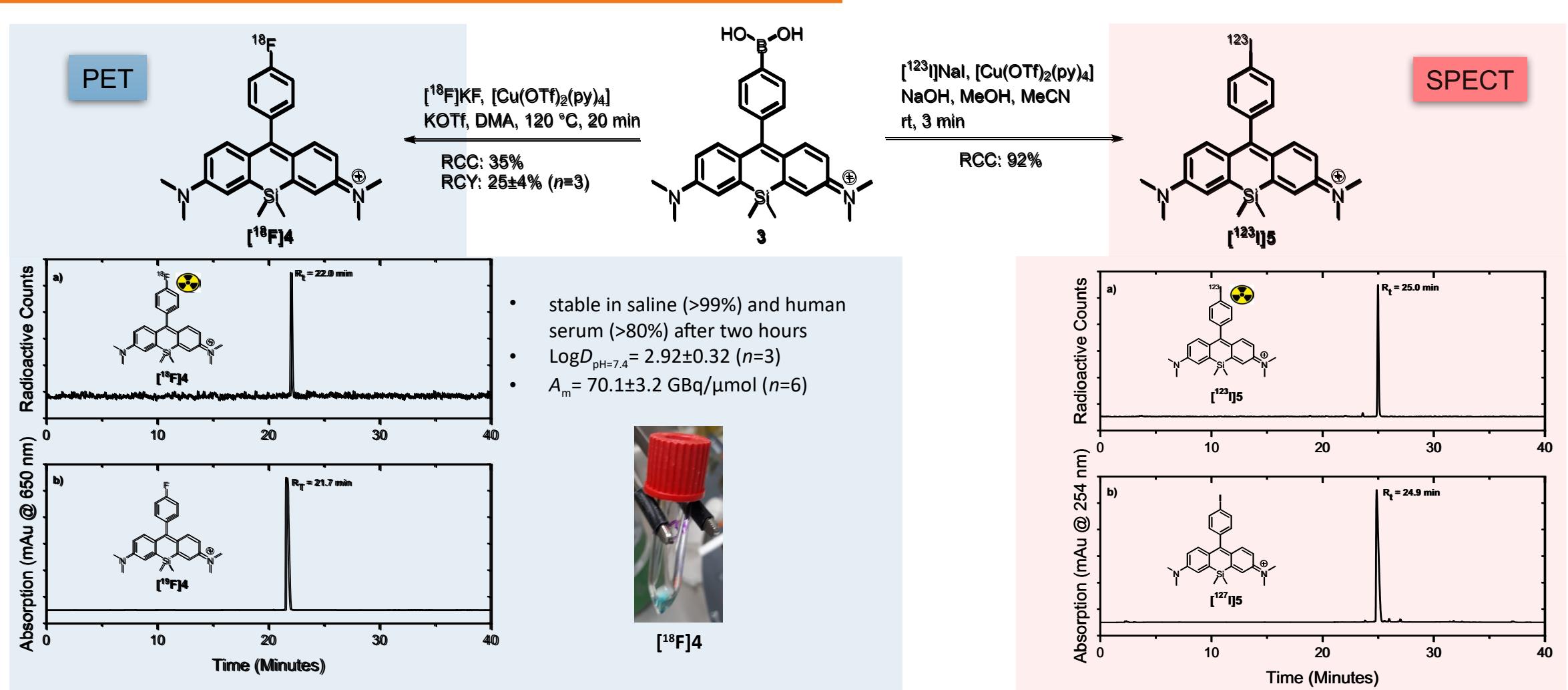
Received: 6 November 2020 / Accepted: 27 December 2020



Fluorescence-guided Surgery



Results – Radiohalogenation of Si-rhodamine



→ Successful radiofluorination and radioiodination of a boronic-acid functionalized Si-rhodamine

T. Kanagasundaram, M. Laube, J. Wodtke, C. S. Kramer, S. Stadlbauer, J. Pietzsch, K. Kopka, *Pharmaceutics (Basel)*. 2021 Nov 12;14(11):1155.

When producing a radiometal be sure you
have a complexing agent in the pocket!

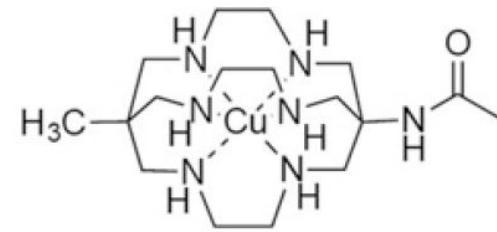


Sarcophagine-based Chelators for Radiocopper

molecular
pharmaceutics

pubs.acs.org/molecularpharmaceutics

Article



FEATURED BASIC SCIENCE ARTICLE

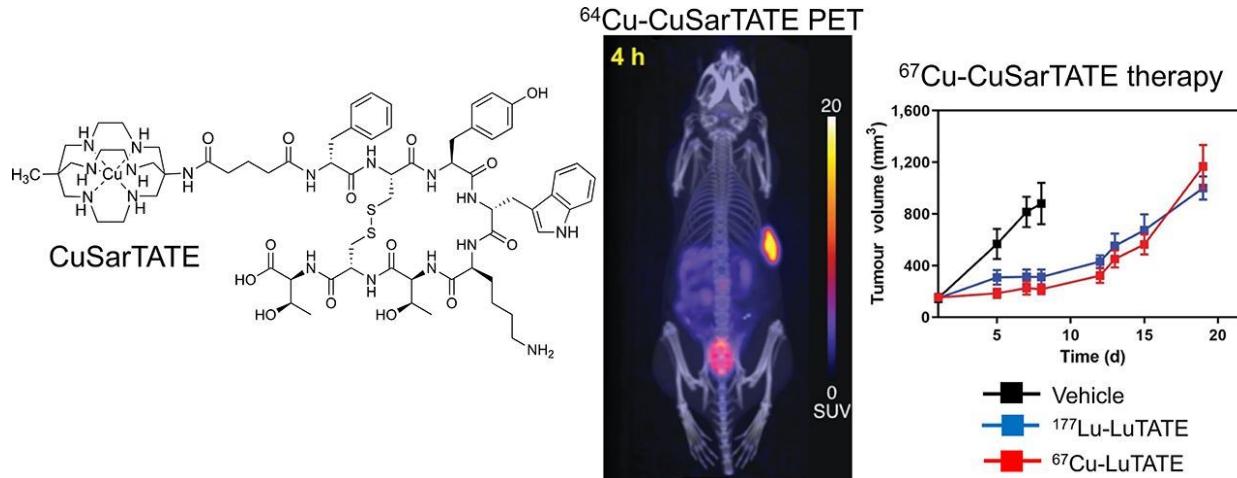
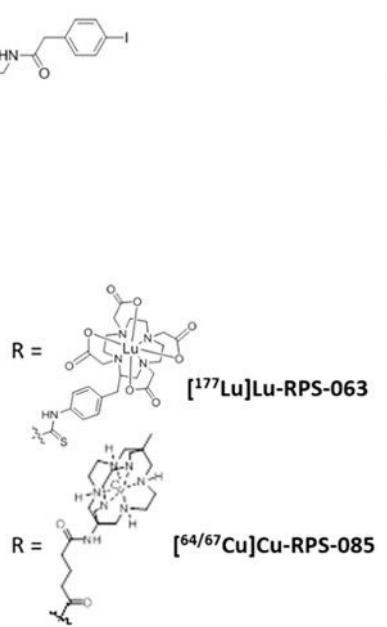
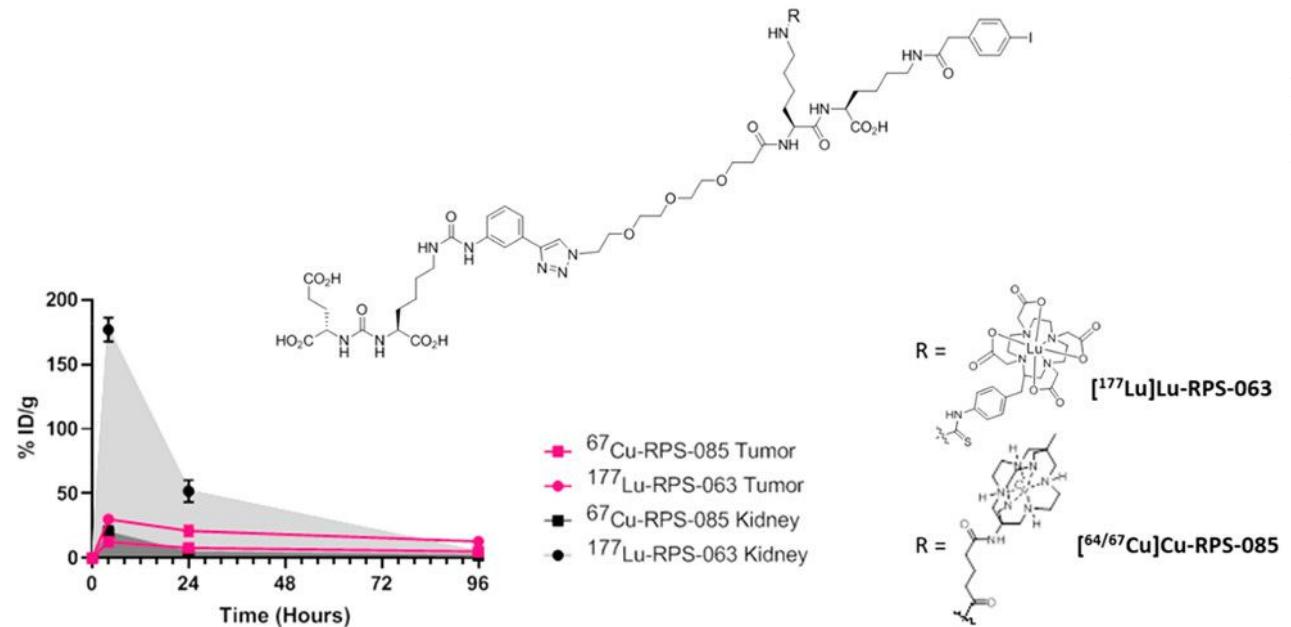
Preclinical Evaluation of a High-Affinity Sarcophagine-Containing PSMA Ligand for $^{64}\text{Cu}/^{67}\text{Cu}$ -Based Theranostics in Prostate Cancer

James M. Kelly, Shashikanth Ponnala, Alejandro Amor-Coarasa, Nicholas A. Zia, Anastasia Nikolopoulou, Clarence Williams, Jr., David J. Schlyer, Stephen G. DiMagno, Paul S. Donnelly, and John W. Babich*

Peptide Receptor Radionuclide Therapy with ^{67}Cu -CuSarTATE Is Highly Efficacious Against a Somatostatin-Positive Neuroendocrine Tumor Model

Carleen Cullinane^{1,2}, Charmaine M. Jeffery³, Peter D. Roselt⁴, Ellen M. van Dam³, Susan Jackson², Kevin Kuan⁵, Price Jackson⁴, David Binns⁴, Jessica van Zuylekom², Matthew J. Harris³, Rodney J. Hicks^{1,4}, and Paul S. Donnelly⁶

¹Sir Peter MacCallum Department of Oncology, University of Melbourne, Melbourne, Victoria, Australia; ²Research Division, Peter MacCallum Cancer Centre, Melbourne, Victoria, Australia; ³Clarity Pharmaceuticals Ltd., Eveleigh, New South Wales, Australia; ⁴Centre for Cancer Imaging, Peter MacCallum Cancer Centre, Melbourne, Victoria, Australia; ⁵Molecular Imaging and Therapy Research Unit, SAHMRI, Adelaide, South Australia, Australia; and ⁶School of Chemistry and Bio21 Molecular Science and Biotechnology Institute, University of Melbourne, Melbourne, Victoria, Australia

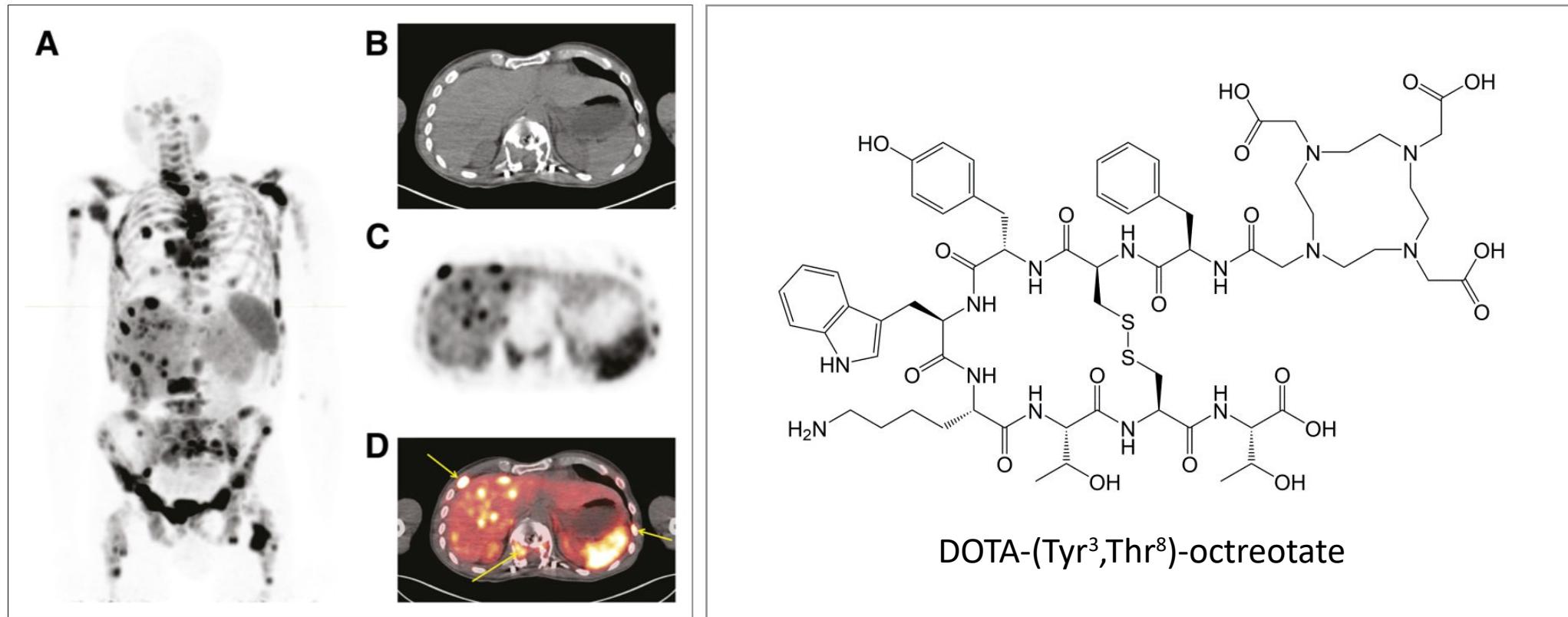


DRESDEN
concept

HZDR

Detectnet (copper Cu 64 dotatate injection) in the U.S.

^{64}Cu -DOTATATE PET/CT for Imaging Patients with Known or Suspected Somatostatin Receptor-Positive Neuroendocrine Tumors: Results of the First U.S. Prospective, Reader-Masked Clinical Trial



One chelator for imaging and therapy with ^{177}Lu and ^{225}Ac , not that easy...

J|A|C|S
JOURNAL OF THE AMERICAN CHEMICAL SOCIETY

pubs.acs.org/JACS

Article

Toward Personalized Medicine: One Chelator for Imaging and Therapy with Lutetium-177 and Actinium-225

Patrick Cieslik, Manja Kubeil,* Kristof Zarschler, Martin Ullrich, Florian Brandt, Karl Anger, Hubert Wadeppohl, Klaus Kopka, Michael Bachmann, Jens Pietzsch, Holger Stephan, and Peter Comba*



Cite This: <https://doi.org/10.1021/jacs.2c08438>



Read Online

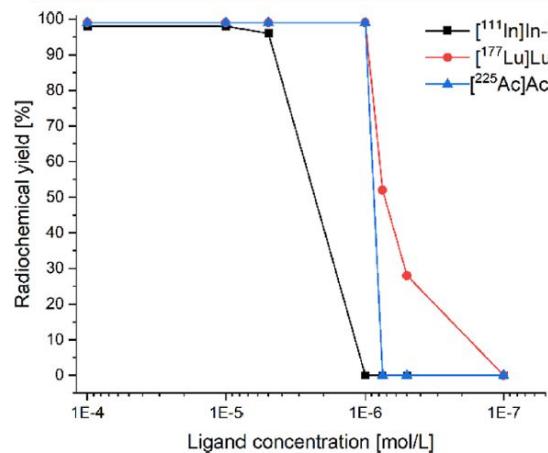
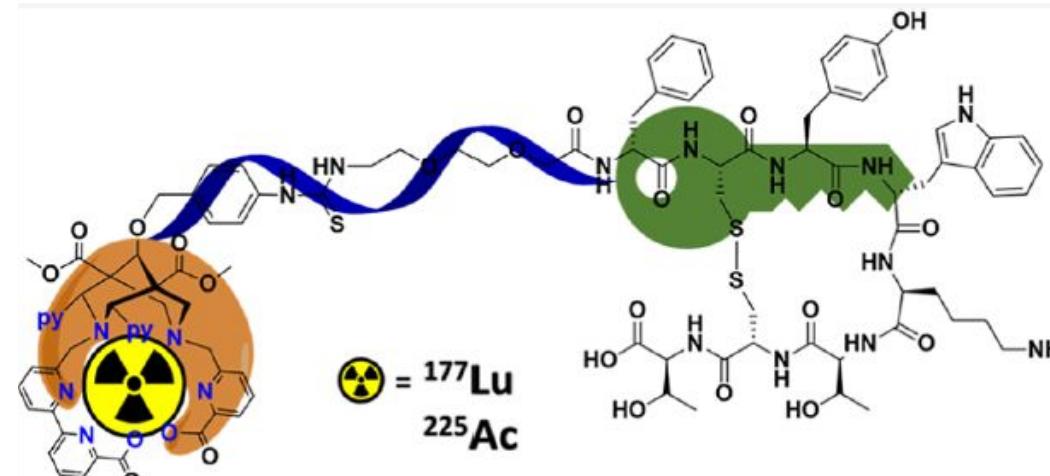
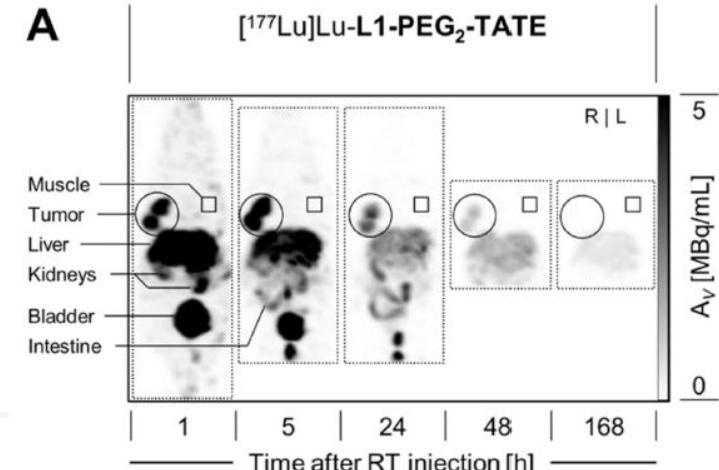


Figure 3. Radiochemical yields at different ligand concentrations (40°C , $0.1\text{ mM NH}_4\text{OAc}$, pH 6, 5 min, initial A ($^{111}\text{In}^{3+}$ and $^{177}\text{Lu}^{3+}$ = 5 MBq), initial A ($^{225}\text{Ac}^{3+}$ = 50 kBq), $n = 2$).



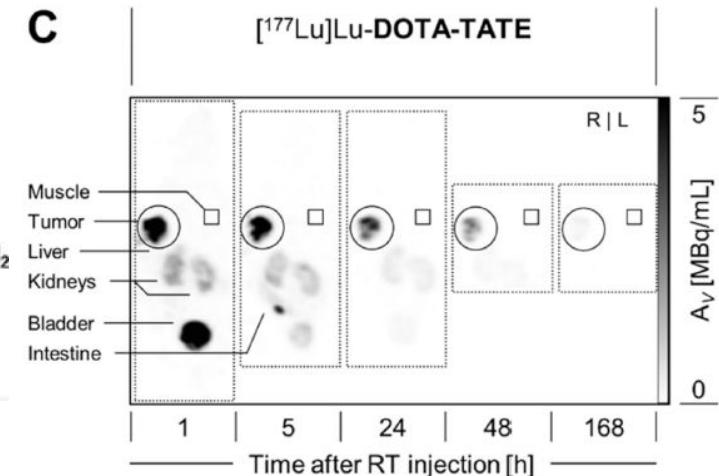
A

$[^{177}\text{Lu}]\text{Lu-L1-PEG}_2\text{-TATE}$



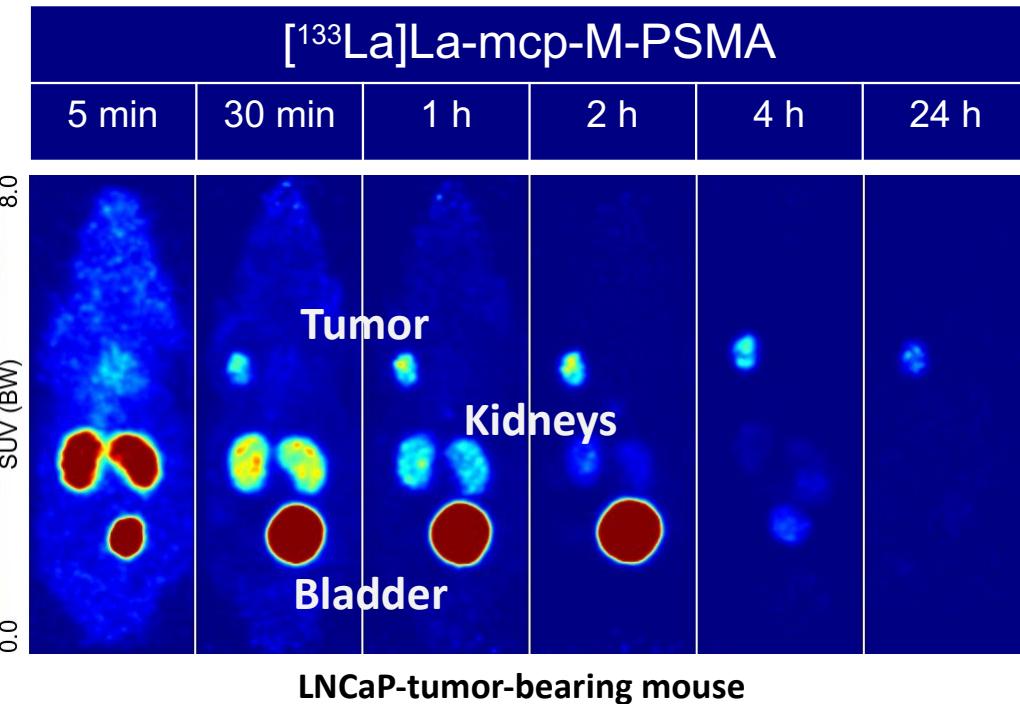
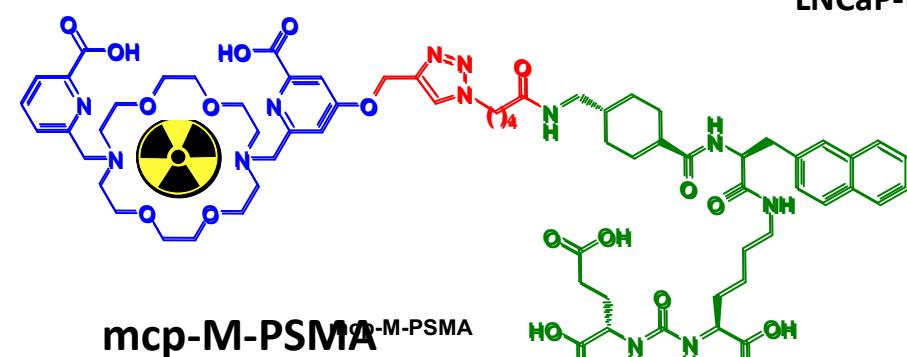
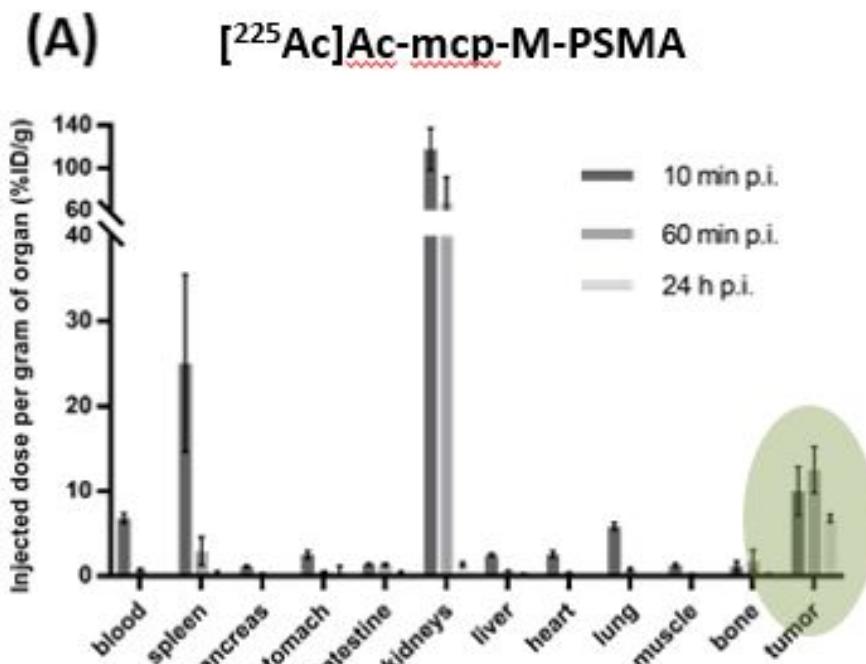
C

$[^{177}\text{Lu}]\text{Lu-DOTA-TATE}$



Theranostic Concept: the $^{225}\text{Ac}/^{133}\text{La}$ matched pair for Radioconjugates

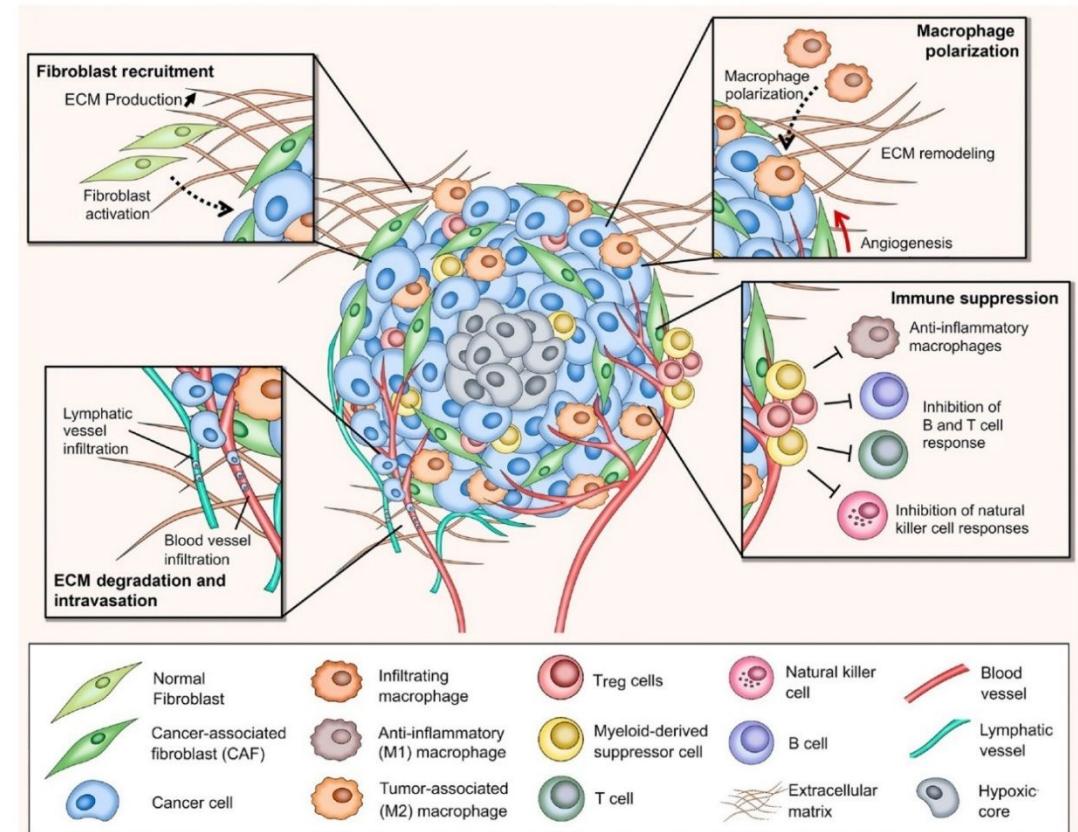
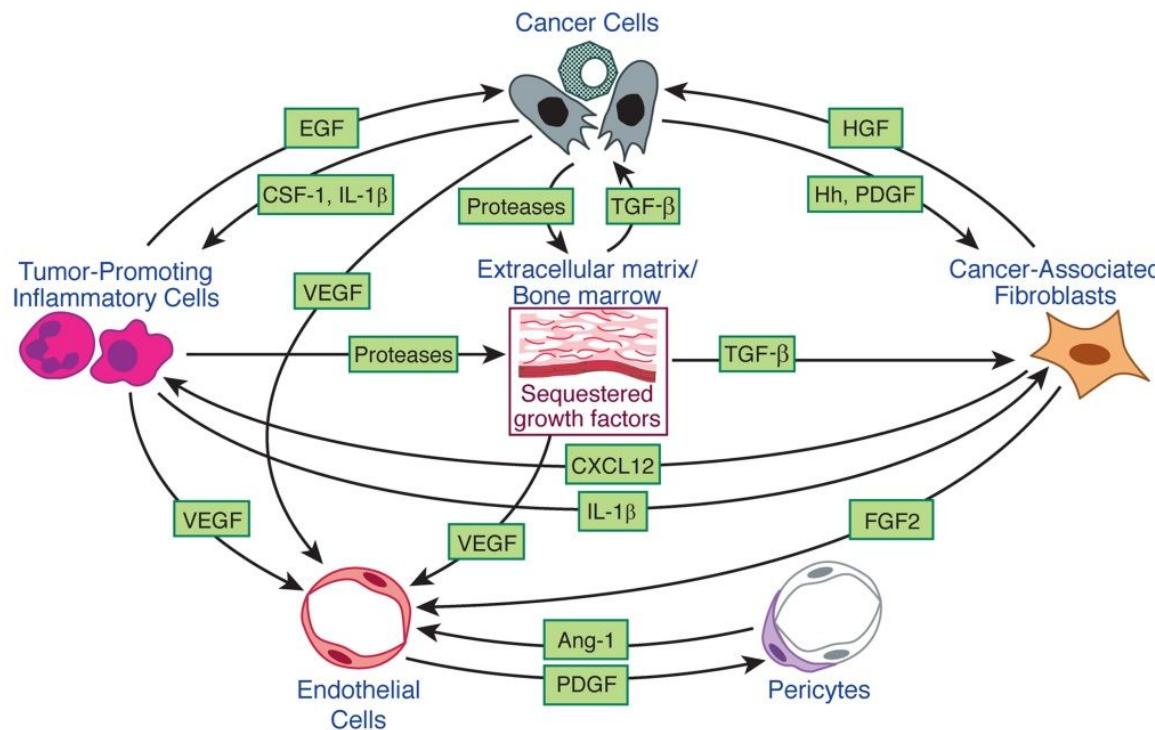
- **easy and mild labeling:** macropa as excellent chelator and target molecule with **high affinity** to PSMA
- **Stability:** no dissociation **over 10 days**
- **Cell binding:** **high binding affinity**
- **High Tumor uptake:** comparable to PSMA-617



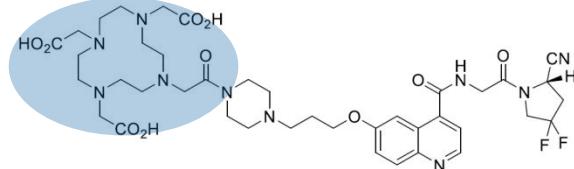
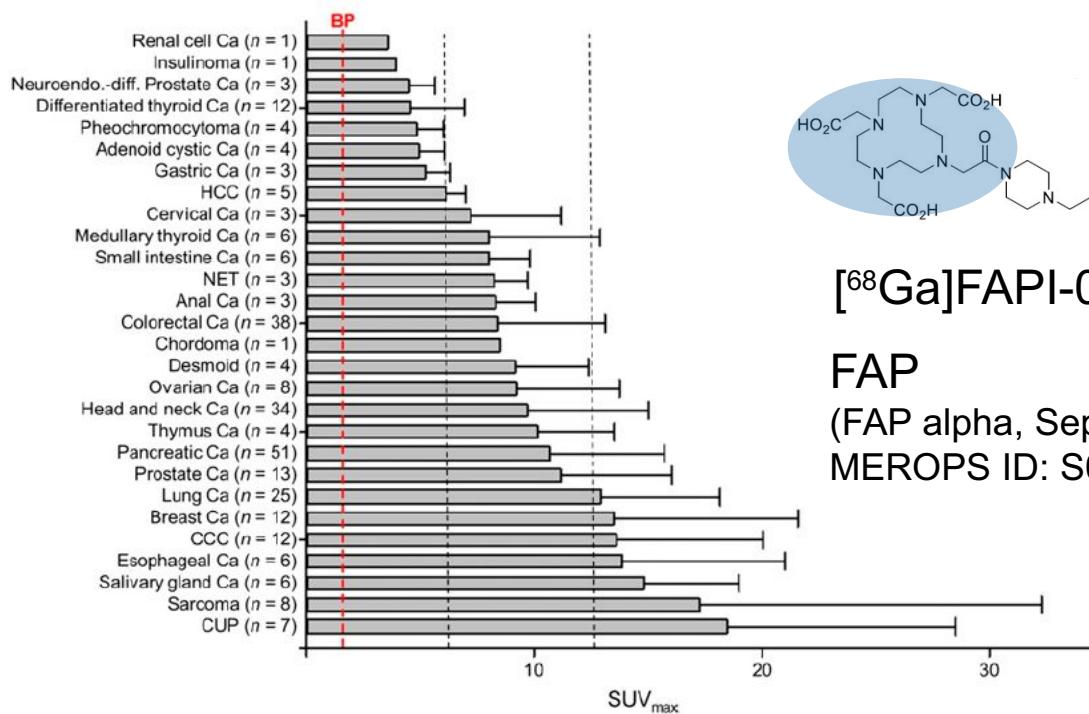
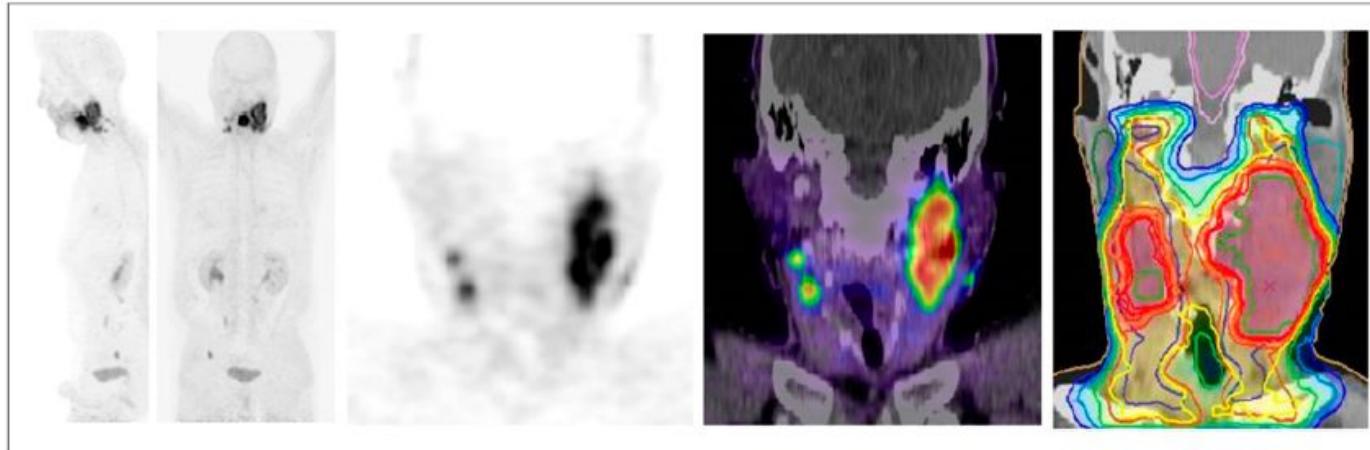
= $[^{225}\text{Ac}]\text{Ac}^{3+}$
or $[^{133}\text{La}]\text{La}^{3+}$

Targeting the tumor microenvironment (TME)

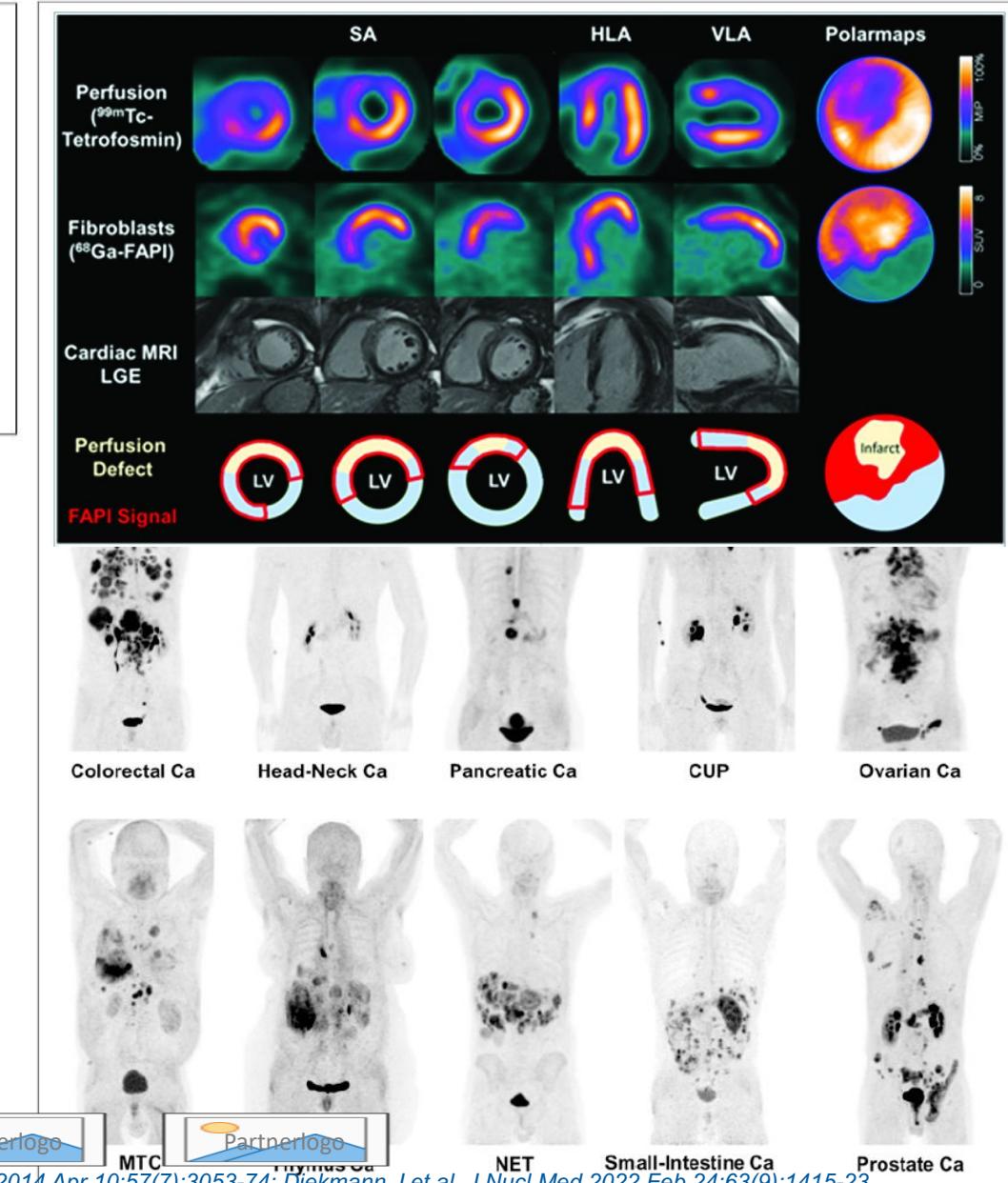




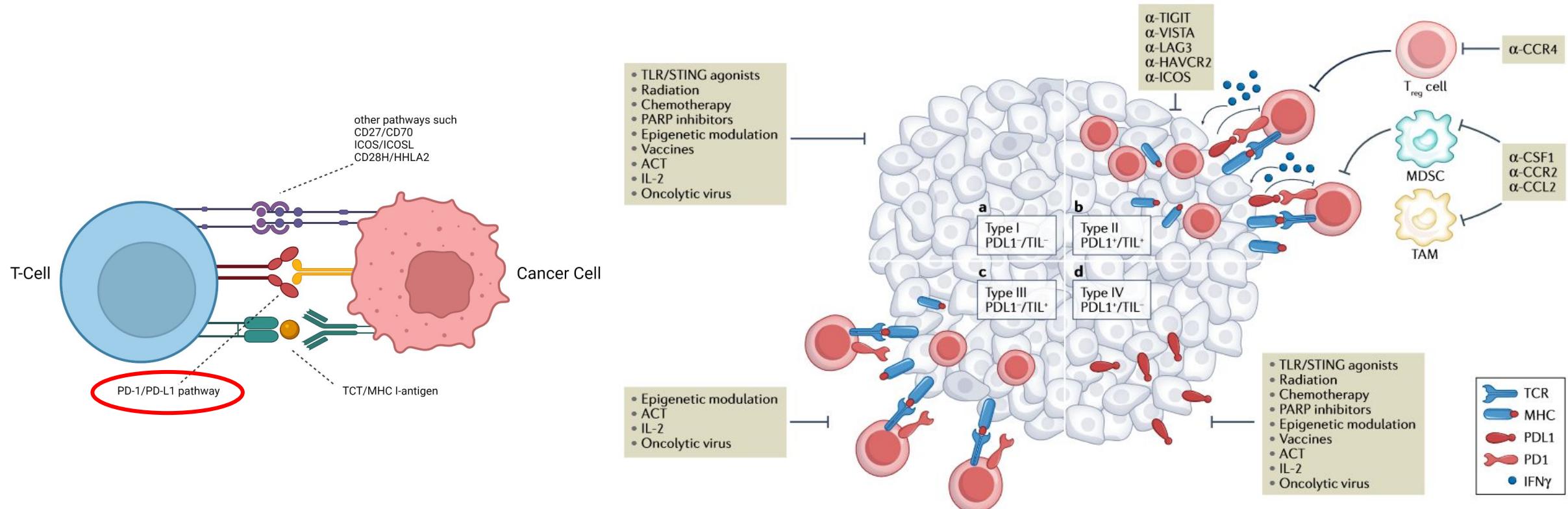
FAPI PET/CT: Tracer uptake in 28 different kinds of cancer vs. prognostic marker after MI



[⁶⁸Ga]FAPI-04
FAP
(FAP alpha, Seprase)
MEROPS ID: S09.007



Clinical need for molecular imaging of PD-1/PD-L1 axis within the TME



- Overexpressed in several cancer types, e.g. lung, colorectal, breast and ovarian cancer, melanoma
- Immune checkpoint inhibitor (ICI) **monotherapy**: only ca. 30% response rate, understanding of **adaptive immune resistance** needed
- Clinicians need a tool for **therapy decision** and **monitoring** of target expression and dynamics over the course of the disease

Clinical need for molecular imaging of PD-1/PD-L1 axis within the TME



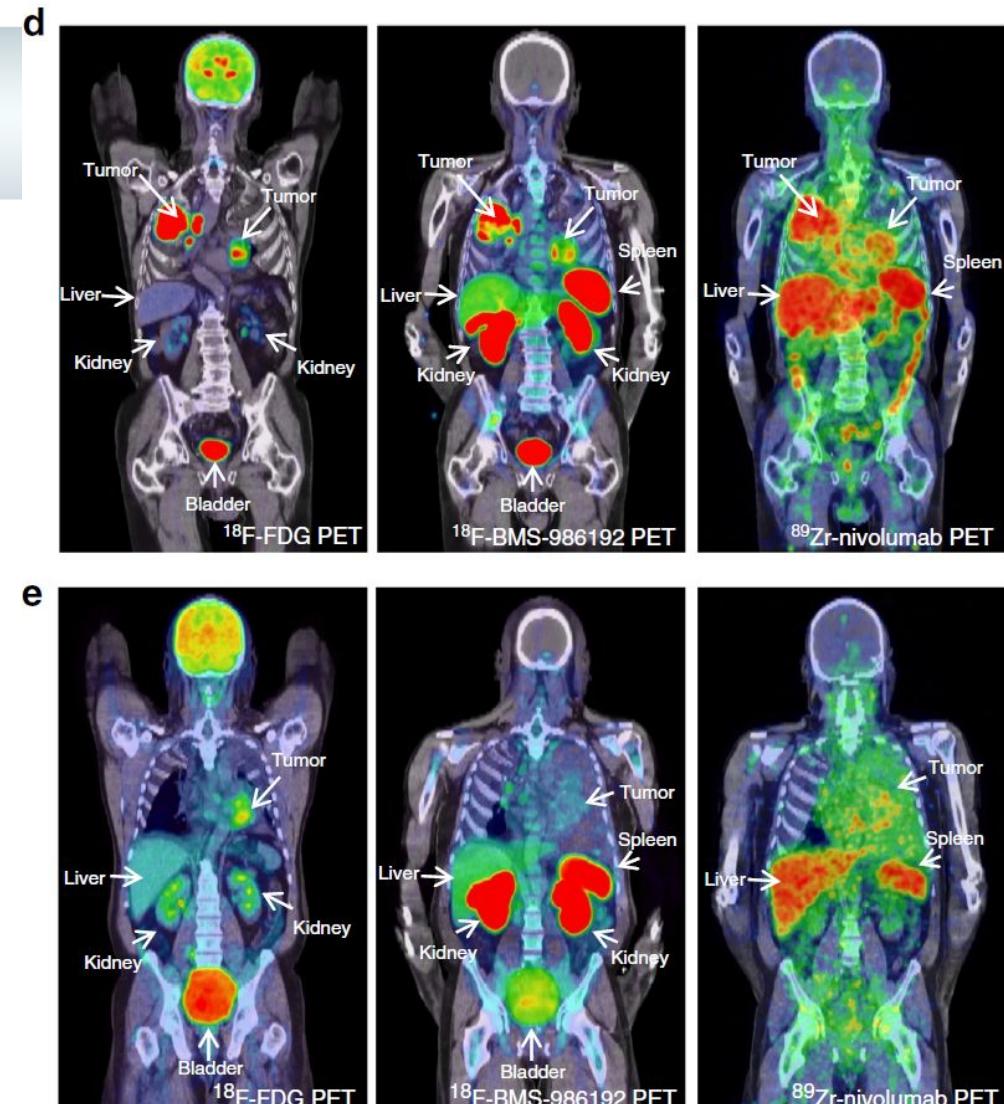
ARTICLE

DOI: 10.1038/s41467-018-07131-y

OPEN

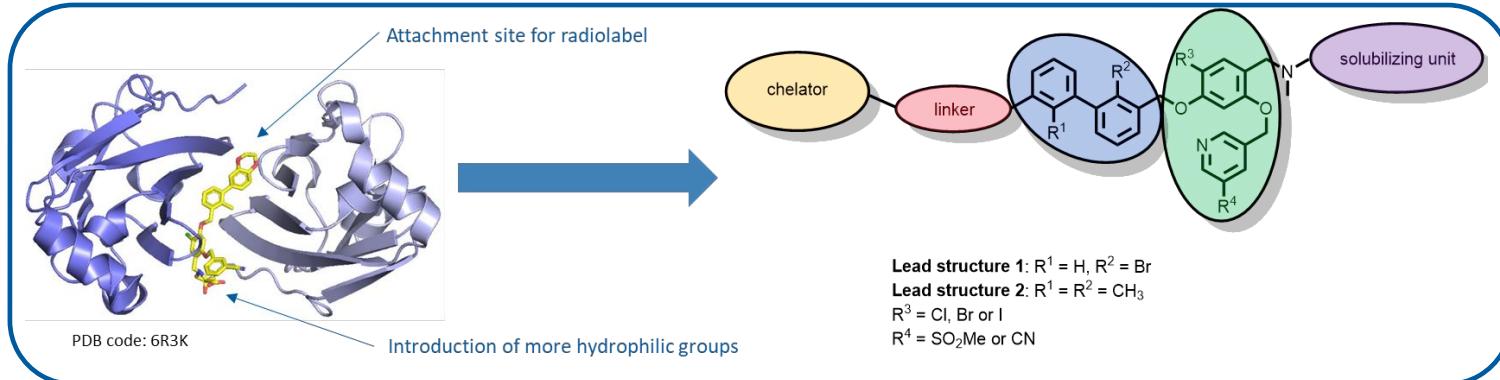
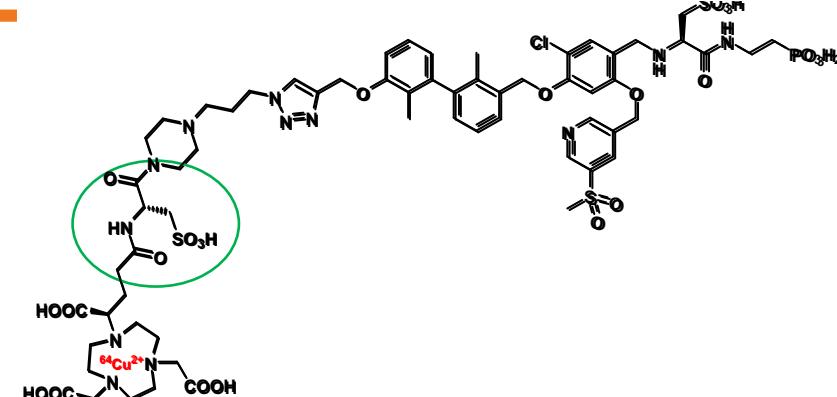
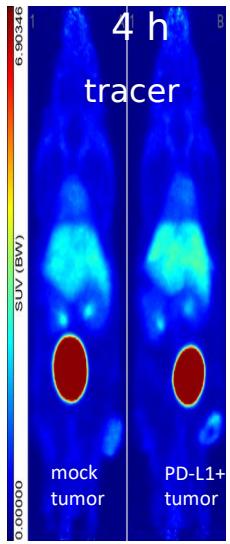
Whole body PD-1 and PD-L1 positron emission tomography in patients with non-small-cell lung cancer

A.N. Niemeijer¹, D. Leung², M.C. Huisman³, I. Bahce¹, O.S. Hoekstra³, G.A.M.S. van Dongen³, R. Boellaard³, S. Du², W. Hayes², R. Smith², A.D. Windhorst¹, N.H. Hendrikse³, A. Poot³, D.J. Vugts³, E. Thunnissen⁴, P. Morin², D. Lipovsek², D.J. Donnelly², S.J. Bonacorsi², L.M. Velasquez², T.D. de Gruyjl¹, E.F. Smit⁶ & A.J. de Langen^{1,6}

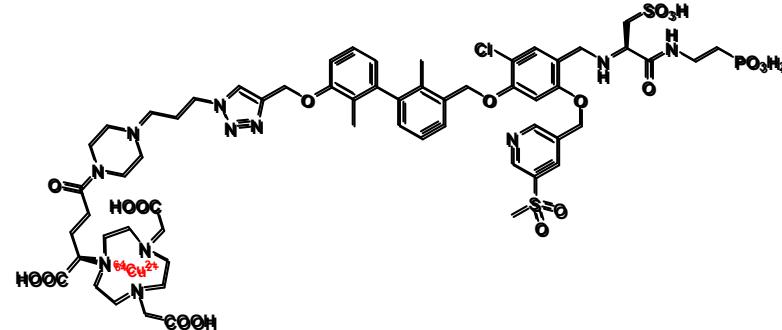
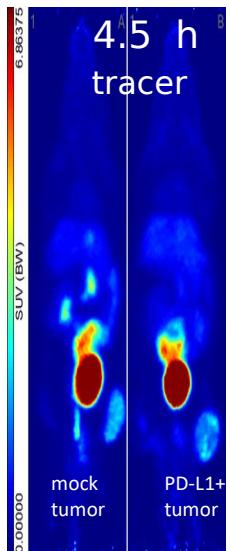


In vivo evaluation of PD-L1 Tracer pipeline

- renal clearance
- low tumor uptake



- renal clearance
- increased tumor uptake



We should not forget the other Classes of Theranostic Tracers...

- Somatostatin Receptor (SSTR)-targeting antagonists
- Norepinephrine (NE) analogs
- C-X-C chemokine receptor 4 (CXCR4)-targeting ligands
- Carbonic anhydrase IX (CA-IX)-targeting inhibitors
- Glucagon-like peptide-1 (GLP-1) receptor agonists
- $\alpha_v\beta_6$ -integrin targeting ligands
- Gastrin-Releasing Peptide Receptor (GRPr)-targeting peptides
- Cholecystokinin 2 receptor (CCK2R)/gastrin receptor analogs
- and more...



Thank You!