CaNa₂EDTA for Improvement of Radioimmunodetection and Radioimmunotherapy with ¹¹¹In and ⁹⁰Y-DTPA-Anti-CEA MAbs in Nude Mice Bearing Human Colorectal Cancer

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¹¹¹In and ⁹⁰Y, dissociated from ¹¹¹In-labeled-monoclonal antibody (MAb) and ⁹⁰Y-labeled MAb, may cause deterioration of the image quality in radioimmunodetection (RID) and undesirable irradiation of nontargeted tissue in radioimmunotherapy (RIT), respectively. The aim of this study was to investigate any improvement in RID and RIT with 111In-MAb and 80Y-MAb by pre- and postadministration of calcium disodium ethylenetriaminetetraacetic acid (CaNa2EDTA). Methods: Murine MAb F33-104 against carcinoembryonic antigen (CEA) was labeled with ¹¹¹In or ⁹⁰Y by the diethylenetriamine pentaacetic (DTPA)-anhydride method. The influence of CaNa2EDTA on loss of radioactivity from ¹¹¹In-MAb or ⁹⁰Y-MAb in serum was investigated in vitro. The effects of CaNa₂EDTA, administered before and after ¹¹¹In-MAb or ⁹⁰Y-MAb, on the biodistribution of radioactive isotopes in nude mice bearing human colon adenocarcinoma LS 180 tumor expressing CEA, or human pulmonary carcinoma PC 9 tumor expressing no CEA, were then examined. As a control, 0.9% NaCl was used in both the in vitro and in vivo studies. Results: CaNa₂EDTA did not cause any decrease in levels of radioactivity of radiolabeled MAbs. Pre- and post-treatment with CaNa₂EDTA reduced radioctivity in both specific and nonspecific tumors at 72 h after ¹¹¹In-MAb injection resulting in an increase of the specific tumor-to-nonspecific tumor radioactivity ratio. The levels of hepatic and renal radioactivity were also subsequently decreased by CaNa₂EDTA. On the other hand, CaNa₂EDTA pre- and post-treatment reduced levels of bony, hepatic, and renal radioactivity at 24, 72, and 72 h, respectively, after 90Y-MAb injection. although it had no effect on tumor radioactivity. Conclusion: Preand post-treatment with CaNa2EDTA would be of great use in humans who undergo RID or RIT with ¹¹¹In-MAb and ⁹⁰Y-MAb accompanied by disassociation of the labeled radionuclides.

Key Words: ¹¹¹In; ⁹⁰Υ; calcium disodium ethylenediaminetetraacetic acid; radioimmunodetection; radioimmunotherapy

J Nuci Med 2000; 41:337-344

Radioimmunodetection (RID) involves finding biologic markers in malignant tumor cells and may serve as a confirmatory test for growing neoplasms. It can also serve to qualify a patient for radioimmunotherapy (RIT) using the same antibody but a different isotope (1). ¹¹¹In is a γ emitter at 171 and 245 keV, with a half-life of 67.9 h. ⁹⁰Y is a B emitter at a maximum energy of 2.3 MeV, with a half-life of 64.0 h. 90Y is known to have certain radiolabeling characteristics in common with ¹¹¹In. Therefore, a combination of ¹¹¹In and ⁹⁰Y with monoclonal antibodies (MAbs) may play a significant role in RID and RIT of various malignant diseases. These radioactive metals are necessary as an appropriate chelator to label MAb. Diethylenetriamine pentaacetic dianhydride (DTPA-anhydride) has been used as a chelator for covalent attachment to an MAb and for long-term radionuclide labeling (2-4). However, release of ¹¹¹In from ¹¹¹In-DTPA-MAb in blood may result in transport by transferrin to the liver and other organs of the reticuloendothelial system. The liver uptake poses a significant problem that drastically limits the usefulness of ¹¹¹In in clinical trials, because many carcinomas metastasize to the liver (1,5). Bone marrow activity may also interfere with the detection of bone metastases (6). Renal radioactivity of ¹¹¹In-MAb may cause artifacts in the upper abdomen and make routine clinical use more problematic. On the other hand, ⁹⁰Y, leaked from ⁹⁰Y-DTPA-MAb in blood, can accumulate in bone, because 90 Y is itself a bone-seeking agent (1,7). The bone uptake may cause myelosuppression. To improve RID and RIT with ¹¹¹In- and ⁹⁰Y-DTPA-MAbs, several strategies have been investigated, including the use of avidin-biotin labeling techniques (either biotinylated antibodies and ¹¹¹In-labeled avidin or streptoavidin, or streptavidin-conjugated MAb followed by injection of radiolabeled biotin) (8-11), to develop metal chelates that remain intact during the catabolism of conjugated MAb, and thus ensure the excretion of the labeled species (12-16), or to combine with autologous

Received Jan. 19, 1999; revision accepted Jun. 21, 1999.

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bone marrow transplantation (17). A few chelates for labeling may have immunogenic properties (5,16). Calcium disodium ethylenetriaminetetraacetic acid (CaNa₂EDTA), which has been clinically used for treatment of heavy metal poisoning, may eliminate several metallic radionuclides from the body effectively. The pharmacologic effects of CaNa₂EDTA result from the formation in the body of chelates with divalent and trivalent metals. Accessible metal ions (both exogenous and endogenous) with a higher affinity for CaNa₂EDTA than calcium will be chelated, mobilized, and excreted (18). CaNa₂EDTA has been reported to facilitate elimination of ¹¹¹In from mice bearing human tumor cells prelabeled with ¹¹¹In-oxine (19). It also has been shown that the administration of CaNa2EDTA substantially increased the tumor-to-muscle radioactivity ratio in nude mice injected with ¹¹¹In-labeled MAb (20). CaNa₂EDTA has been shown in human subjects and mice to accelerate 90Y excretion by chelating the released 90Y without compromising the tumor uptake of 90Y-labeled MAb and to allow an increase in the administered dosage of ⁹⁰Y-labeled MAb, as a result of the expected reduction in myelotoxicity (21,22). In this study, the possibility of improvement of RID and RIT with ¹¹¹In- and ⁹⁰Y-DTPA-MAb with CaNa₂EDTA pre- and post-treatment was investigated, and the efficacy is discussed.

MATERIALS AND METHODS

Cell Lines and Animal Models

A human colon adenocarcinoma LS 180 cell line expressing carcinoembryonic antigen (CEA) was obtained from the American Type Culture Collection (Rockville, MD) and maintained in Eagle's minimum essential medium with nonessential amino acids in Earle's Balanced Salt Solutions supplemented with 10% fetal bovine serum (FBS). A human pulmonary squamous cell carcinoma PC 9 cell line expressing no CEA was cultured in Roswell Park Memorial Institute 1640 medium supplemented with 10% FBS. Female nude mice with a BALB/c/nu/nu background were obtained from the Institute of Experimental Animal Research, Gunma University School of Medicine (Gunma, Japan) at 4 wk of age and inoculated subcutaneously in the right rear flank with tumor cells (1 \times 10⁷ cells/mouse). Mice were allowed free access to commercial chow and distilled, deionized water during the experiment. Ambient temperature during the study was maintained at 21-23°C, and the mice were exposed to a 12-h light, 12-h dark cycle. Mean tumor weight was <0.50 g. Animal studies were performed in compliance with relevant laws relating to the conduct of animal experiments issued by the Gunma University Ethical Committee.

Radiolabeling of MAb

Murine MAb F33-104 (IgG1) was generated by a conventional hybridoma method with highly purified CEA from liver metastases of colorectal cancer as an immunizing antigen and reacted against B3 of protein epitopes on the CEA (23,24). MAb F33-104 (6.67 \times 10⁻⁵ mmol) in 2 mL 0.1 mol/L NaHCO₃ was reacted with DTPA-anhydride (DOJIN, Kumamoto, Japan) (23.3 \times 10⁻⁵ mmol) in dimethyl sulfoxide at 4°C for 12 h. These reaction conditions gave 1.8–2.1 DTPA groups per MAb molecule, determined by ¹¹¹In

labeling of the crude mixture. The conjugation of DTPA with MAb in a 3.5:1 molar ratio caused the maximum loss of 20% in immunoreactivity of Mab, although the condition gave the MAb the optimum labeling efficiency in the combined labeling of ¹¹¹In and ⁹⁰Y. The DTPA-conjugated MAb was purified from unconjugated chelate molecules by Sephadex G25 gel filtration (Pharmacia, Uppsala, Sweden) using 0.1 mol/L NaHCO3 as an eluant and was dialyzed in 50 mmol/L phosphate-buffered saline (PBS), pH 7.5, at 4°C for 24 h. For ¹¹¹In labeling, 500 µg DTPA-conjugated MAb in 0.1 mol/L sodium acetate buffer, pH 5.8, was mixed with ¹¹¹In-chloride (74 MBq/mL; Nihon Medi-Physics Co. Ltd., Nishinomiya, Japan) and allowed to react at room temperature for 60 min. After the addition of disodium salt EDTA (Na2EDTA; DOJIN) to a final concentration of 5 mmol/L to chelate unbound ¹¹¹In, the ¹¹¹In-MAb was purified by Sephadex G25 gel filtration using 0.1 mol/L sodium acetate buffer, pH 5.8. For 90Y labeling, 500 µg DTPA-conjugated MAb in 0.1 ml/L sodium acetate buffer, pH 5.8, was mixed with 90Y-acetate (925 MBq/mL), which was obtained by incubation of an equal volume of 1 mol/L sodium acetate buffer, pH 5.8, and ⁹⁰Y-chloride (Nordion; Kanata, Ontario, Canada) for 30 min at 37°C and allowed to react at room temperature for 60 min. After the addition of EDTA, the 90Y-MAb was purified by Sephadex G25 gel filtration. The purified ¹¹¹In-MAb and ⁹⁰Y-MAb contained <2% free radioactive ¹¹¹In and ⁹⁰Y, respectively, and the specific levels of radioactivity were calculated as approximately 74 MBq/mg. For a control, MAb F33-104 was labeled with ¹²⁵I by a chloramine-T method (specific activity, 440 MBq/mg) (24,25).

In Vitro Influence of Serum on ¹¹¹In-MAb or ⁹⁰Y-MAb

¹¹¹In-MAb or ⁹⁰Y-MAb was incubated with human normal serum or 50 mmol/L PBS, pH 7.5, as a control for 0, 3, 24, 72, 120, and 168 h at 37°C in an atmosphere of 5% carbon dioxide in air (10.4 µg MAb/mL). The influence of serum on the radioactivity of radiolabeled MAbs was estimated by cellulose diacetate electrophoresis as described (4,24,26). Cellulose diacetate (Separax-S; Fuji Photo Film Co. Ltd., Tokyo, Japan) was cut into 110×10 mm strips, soaked in 0.06 mol/L barbital buffer solution, pH 8.6. The strips then were laid between the anode and cathode in a flat bed electrophoresis tank. Each 1-µL sample was applied to the midpoints of the strips using a sample applicator for high-performance liquid chromatography (HPLC). ¹¹¹In-acetate, ¹¹¹In-DTPA, ⁹⁰Yacetate, and ⁹⁰Y-DTPA incubated with serum (to approximately 740 kBq/mL) were also subjected to electrophoresis. The radiolabeled chelates were obtained by direct mixtures of chelators and radionuclides for 60 min at room temperature. After electrophoresis under constant current of 0.8 mA/strip for 30 min at room temperature, the strips were dried, cut into smaller 5×10 mm strips, and put into plastic tubes. The radioactivity of fractions was counted with a NaI well scintillation γ counter (Aloka, Tokyo, Japan). A 10% energy window was centered over the 245 keV of ¹¹¹In. For the ⁹⁰Y count, a window was set at 100 keV to infinity, and the counting efficiency of the NaI well scintillation γ counter was approximately 12%. After subtraction of levels of radioactivity corresponding to free radionuclides and chelated radionuclides, the radioactivity remaining at the MAb was calculated as a percentage of the radioactivity of the whole strip at each incubation time. The study was repeated 5 times in duplicate.

In Vitro Influence of CaNa₂EDTA on ¹¹¹In-MAb or ⁹⁰Y-MAb

Athymic murine serum was mixed with CaNa₂EDTA (Bleian Inj.; Nisshin Pharmacy Co. Ltd., Yamagata, Japan) to a final concentration of 1.6 mg/mL, corresponding to twice the level of the

initial serum concentration in a biodistribution study described below, or to 0.9% NaCl as a control. ¹¹¹In-MAb or ⁹⁰Y-MAb was then incubated with the mixture at 37°C for 0, 3, 24, 72, 120, and 168 h in an atmosphere of 5% carbon dioxide in air (10.4 µg MAb/mL serum). The influence of chelator on the radioactivity of radiolabeled MAbs was estimated by cellulose diacetate electrophoresis using the same method as that described above. ¹¹¹In-EDTA and ⁹⁰Y-EDTA incubated with serum (to ~740 kBq/mL) were also subjected to electrophoresis as additional references.

In Vitro Influence of CaNa₂EDTA on ¹¹¹In-MAb or ⁹⁰Y-MAb Bound to Tumor Cells

LS 180 cells were grown to approximately 80% confluence in 4 dishes (150 \times 150 mm) and were preincubated with ¹¹¹In-chloride (740 kBq) in 20 mL fresh medium supplemented with 10% FBS for 60 min at 37°C in an atmosphere of 5% carbon dioxide in air, to avoid the influence of incorporation of radionuclides into tumor cells (prelabeling). After triple washing with 20 mL fresh medium, 1 µL of the mixture of ¹¹¹In-MAb and serum (10.4 µg MAb/mL) incubated for 72 or 168 h at 37°C was added into the dishes and incubated at 37 °C for 60 min. The cells were then incubated with 32 mg CaNa₂EDTA (1.6 mg/mL) or 0.9% NaCl as a control at 37°C for 60 min in air after triple washing with 20 mL fresh medium. After collection of 1×10^7 cells in 200 µL PBS (136.8 mmol/L NaCl, 2.7 mmol/L KCl, 8.1 mmol/L Na₂HPO₄, and 1.5 mmol/L KH₂PO₄) in microtubes, the cells were separated by centrifugation at 10,000g for 5 min and were counted in a NaI well scintillation γ counter. Results were expressed as the mean \pm SD of [counts/min of cells with CaNa₂EDTA]/[counts/min of cells with 0.9% NaCl] × 100) (%) from a 5-time interassay in duplicate. The same procedure, except for prelabeling, was performed for ⁹⁰Y-MAb. Cell viability was ascertained at >95% by trypan blue staining.

Effect of CaNa₂EDTA on Biodistribution of LS 180 Tumor- or PC 9 Tumor-Bearing Nude Mice with ¹¹¹In-MAb or ⁹⁰Y-MAb

CaNa₂EDTA (37.5 mg/kg) was slowly administered intraperitoneally before and after intravenous injection of ¹¹¹In-MAb or ⁹⁰Y-MAb (500 µg MAb/kg of mouse body weight; specific activity, 74 MBq/mg) to nude mice bearing LS 180 tumor or PC 9 tumor. As a control, 0.9% NaCl was used in place of the chelator. Mice were killed under general anesthesia with diethylether (Wako, Osaka, Japan) at 3, 24, 72, 120, and 168 h after intravenous injection of ¹¹¹In-MAb or ⁹⁰Y-MAb. The protocol is shown in Figure 1. Circulating blood was replaced by 0.9% NaCl. The right atrium was cut and opened, and, after sampling blood by a heart puncture, 0.9% NaCl was gently perfused into the left ventricle with a small syringe. The tumor and organs were removed and cut into pieces weighing <200 mg, and the volume of the blood sample was <100µL. The levels of radioactivity of each piece of tumor, of organs, and of blood were counted in a NaI well scintillation γ counter. Under this condition, a sufficient linearity between ⁹⁰Y radioactivity and counting rate was obtained. Results were expressed as percentage injected dose/gram tissue (%ID/g) normalized to a 20-g mouse for each tissue radioactivity. Specific tumor-to-normal tissue radioactivity ratio was obtained from ([%ID/g LS 180 tumor]/[%ID/ g tissue]). Specific tumor (LS 180 tumor)-to-nonspecific tumor (PC 9 tumor) radioactivity was calculated as ([mean %ID/g LS 180 tumor]/[mean %ID/g PC 9 tumor]). Serum calcium levels from blood of mice with CaNa₂EDTA or 0.9% NaCl were monitored at 168 h after injection by the orthocresol phthalein complexone method. Circulating CEA concentration in the blood of LS 180 tumor- or PC 9 tumor-bearing mice at various points during the study was determined by CEA-immunoradiometric assay kit Daiichi II (Daiichi Radioisotope Laboratory, Tokyo, Japan).

Data Analysis

Statistical comparisons were made by the Student t test. Differences were considered statistically significant when P < 0.05.

RESULTS

In Vitro Studies

Loss of radioactivity from ¹¹¹In-MAb or ⁹⁰Y-MAb in human serum was approximately 10% and 33%, respectively, for up to 168 h, whereas loss of radioactivity from ¹¹¹In-MAb and ⁹⁰Y-MAb in PBS was approximately 3% and 5%, respectively (Fig. 2A). No influence of CaNa₂EDTA on loss of radioactivity from ¹¹¹In-MAb or ⁹⁰Y-MAb was shown (Fig. 2B). There was no difference in loss of radioactivity from radiolabeled MAbs between human serum and murine serum. No effect of CaNa₂EDTA on loss of radioactivity



FIGURE 1. Protocol of in vivo studies.



FIGURE 2. (A) Loss of radioactivities from ¹¹¹In-MAb and ⁹⁰Y-MAb in serum. (B) Influence of CaNa₂EDTA on loss of radioactivities from ¹¹¹In-MAb and ⁹⁰Y-MAb in serum.

from ¹¹¹In-MAb or ⁹⁰Y-MAb binding to LS 180 cells was shown (99.4% \pm 0.57% for 72-h mixture versus 99.2% \pm 0.39% for 168-h mixture; 98.4% \pm 1.48% versus 98.3% \pm 1.42%, respectively).

In Vivo Studies

CaNa₂EDTA significantly decreased the %ID/g of tumor in LS 180 tumor-bearing mice from 72 h after injection of ¹¹¹In-MAb compared with that of the control (Fig. 3). In addition, the hepatic and renal levels of radioactivity in CaNa₂EDTA-treated mice bearing LS 180 tumor were also significantly reduced compared with those of controls (Fig. 3). With respect to other tissues or blood, CaNa₂EDTA had no influence on the radioactive levels (%ID/g). The tumor-to-blood ratio in mice bearing LS 180 tumor was significantly decreased from 72 h after injection of ¹¹¹In-MAb by CaNa₂EDTA compared with that of the control (Table 1), but the tumor-to-liver or tumor-to-kidney radioactivity ratios were not affected (Fig. 4). On the other hand, in mice bearing





TABLE 1

Effect of Pre- and Postadministered CaNa₂EDTA on Tumor-to-Blood Radioactivity Ratio in LS 180 Tumor-Bearing Mice Injected with ¹¹¹In-MAb or ⁹⁰Y-MAb

Time after injection (h)	¹¹¹ In-MAb		90Y-MAb	
	0.9% NaCl treatment	CaNa ₂ EDTA treatment	0.9% NaCl treatment	CaNa ₂ EDTA treatment
3	0.35 ± 0.07	0.36 ± 0.04	0.69 ± 0.10	0.73 ± 0.12
24	2.28 ± 0.38	2.24 ± 0.19	4.44 ± 0.23	4.60 ± 0.36
72	9.65 ± 0.93	8.49 ± 0.61*	36.2 ± 5.52	37.9 ± 4.05
120	58.2 ± 5.37	50.6 ± 4.90*	42.0 ± 6.15	42.8 ± 5.20
168	89.6 ± 6.75	79.3 ± 6.60*	53.2 ± 7.40	54.6 ± 7.13
*P <	0.05 betweer	n 0.9% NaCl-	treated (cont	rol) mice and
CaNa ₂ ED	TA-treated mic	æ.		

Values are mean ± SD.

PC 9 tumor, CaNa₂EDTA significantly reduced the %ID/g of tumor from 72 h after injection of ¹¹¹In-MAb (Fig. 3). The specific tumor-to-nonspecific tumor radioactivity ratio was definitely raised from 72 h after injection of ¹¹¹In-MAb by CaNa₂EDTA treatment compared with that of the control (Fig. 5).

CaNa₂EDTA significantly decreased the bony radioactivity of mice bearing LS 180 tumor from 24 h after injection of



FIGURE 4. Effect of pre-and postadministered CaNa₂EDTA on tumor-to-liver and -kidney radioactivity ratios in LS 180 tumor-bearing mice injected with ¹¹¹In-MAb.



FIGURE 5. Effect of pre- and postadministered CaNa₂EDTA on specific tumor-to-nonspecific tumor radioactivity ratio of ¹¹¹In-MAb or ⁹⁰Y-MAb.

⁹⁰Y-MAb compared with that of the control (Fig. 6). The hepatic and renal levels of radioactivity in LS 180 tumorbearing mice were significantly reduced by CaNa₂EDTA treatment from 72 h after injection of ⁹⁰Y-MAb, compared with that of the control mice (Fig. 6). CaNa₂EDTA had no effect on %ID/g of tumor in LS 180 tumor-bearing mice (Fig. 6). With respect to other tissues or blood, CaNa₂EDTA had no influence on the levels of radioactivity (%ID/g). CaNa₂EDTA had no effect on tumor-to-blood radioactivity ratio in mice bearing LS 180 (Table 1). CaNa₂EDTA significantly raised the tumor-to-bone, tumor-to-liver, and tumor-to-kidney radioactivity ratios in mice bearing LS 180 tumor from 24, 72, and 72 h, respectively, after injection of ⁹⁰Y-MAb, compared with those of controls (Fig. 7). On the other hand, in mice bearing PC 9 tumor, CaNa₂EDTA had no effect on the %ID/g of tumor tissue. The specific tumor-tononspecific tumor radioactivity ratio of ⁹⁰Y-MAb was not influenced by CaNa₂EDTA (Fig. 5).

No significant growth of the LS 180 or PC 9 tumor was found during these studies. In all mice injected with CaNa₂EDTA, no inflammation of the abdominal wall was seen macroscopically. No weight loss or other sign of toxicity such as shivering was observed, nor was any macroscopic change observed in mice kidneys. No significant difference in concentration of serum calcium was noted between the CaNa₂EDTA-treated mice and the normal mice $(4.62 \pm 0.25 \text{ mEq/L}, n = 39; 4.65 \pm 0.15 \text{ mEq/L}, n = 43)$. No circulating CEA was detected during the study in the blood of mice bearing LS 180 or PC 9 tumors (<1 ng/mL).

DISCUSSION

CaNa₂EDTA did not deplete the levels of radioactivity of radiolabeled MAbs in vitro. In the tumor-bearing mice, CaNa₂EDTA pre- and post-treatment reduced the radioactivity in both specific and nonspecific tumors at 72 h after



FIGURE 6. Effect of pre- and postadministered CaNa₂EDTA on biodistribution of radioactivity in LS 180 tumor-bearing mice injected with 90 Y-MAb. **P* < 0.05 for CaNa₂EDTA-treated mice and controls.

¹¹¹In-MAb-injection, and it raised the specific tumor-tononspecific tumor radioactivity ratio but lowered the specific tumor-to-blood radioactivity ratio. In the LS 180 tumor-bearing mice, pre- and postadministration of CaNa₂EDTA decreased the hepatic and renal levels of radioactivity at 72 h after ¹¹¹In-MAb injection but did not affect the tumor-to-liver or -kidney radioactivity ratios. By contrast, in the tumor-bearing mice injected with ⁹⁰Y-MAb, pre-and post-treatment with CaNa₂EDTA did not affect the radioactivity in either specific or nonspecific tumors, nor did it influence the specific tumor-to-nonspecific tumor radioactivity ratio or the tumor-to-blood radioactivity ratio. Pre- and postadministered CaNa₂EDTA reduced the bony, hepatic, and renal levels of radioactivity in the LS 180 tumor-bearing mice at 24, 72, and 72 h after ⁹⁰Y-MAb injection and raised the specific tumor-to-bone, -liver, and -kidney radioactivity ratios. When not used in combination with preadministration, postadministration only of CaNa₂EDTA had no effect



FIGURE 7. Effect of pre- and postadministered CaNa₂EDTA on tumor-to-liver, -kidney, and -bone radioactivity ratios in LS 180 tumor-bearing mice injected with ⁹⁰Y-MAb. *P < 0.05 for CaNa₂EDTA-treated mice and controls.

on raising the specific tumor-to-nonspecific tumor radioactivity ratio in ¹¹¹In-MAb, and the power of reduction in bony, hepatic, and renal levels of radioactivity of ⁹⁰Y-MAb was weakened (data not shown). The introduction of pretreatment with CaNa₂EDTA showed an early effect on bony radioactivity for ⁹⁰Y-MAb. In tumor-bearing mice with ¹¹¹In-chloride and normal mice with ⁹⁰Y-acetate, pre- and postadministration of CaNa₂EDTA was shown to more powerfully control the levels of radioactivity in the tumor and bone, liver, and kidneys, respectively, than postadministration only (unpublished data, Watanabe N, December 1998). Pretreatment with CaNa₂EDTA also appears to be viable for the immediate removal of extracellular free radionuclides.

Soluble ¹¹¹In may localize in human malignant tumors without preference for cell type (27,28). The site of ¹¹¹In accumulation in tumor cells was the cytoplasmic lysosomes (29). Tumors include extracellular components such as connective tissue and vessels, in addition to cells, and various pathologic changes such as necrosis and inflammation. In tumors xenografted in nude mice, the actual distribution of ¹¹¹In was predominant in connective tissue (especially inflammatory tissue) rather than in viable tumor cells themselves (30). The ¹¹¹In was bound to acid mucopoly-saccharides or the sulfated carbohydrate chain of sulfated glycoprotein produced as intercellular substances in inflammatory.

matory tissue (30). ¹¹¹In activity was rarely seen in necrotic tumor tissue. Therefore, it was reasonable to assume that the free ¹¹¹In disassociated from ¹¹¹In-MAb by catabolism or instability of the labeling (or both) or internalization was retained in the tumor, partly in the tumor cells and partly in the extracellular space. Furthermore, CaNa₂EDTA treatment chelated the free, extracellular ¹¹¹In (and the CaNa₂EDTA might inhibit the incorporation of ¹¹¹In into the tumor cells), resulting in reduced radioactivity in the tumor. The finding that free radioactivity from ¹¹¹In-labeled MAb may be retained in tumors was reported in the early stage of an investigation into RID (31-33). The free radionuclide dissociated from 90Y-MAb has a strong potential for redistribution into bone. In a previous study we showed that CaNa₂EDTA could not remove the 90Y binding to the bone (unpublished data, Watanabe N, December 1998). Therefore, this CaNa₂EDTA-mediated effect on bony radioactivity was the result of chelation of the 90Y liberated from the radiolabeled MAb before localization in bone. The early distribution of radioactivity in the liver and kidneys appeared to be the result of radiolabeled MAb itself binding to cells, through the Fc receptor in most cases. Sequentially, free radionuclides are a result of the catabolism and inherent instability of radiolabeled MAbs. Finally, both radiolabeled MAbs and freed radionuclides are nonspecifically distributed in the liver and kidneys. It is assumed that CaNa₂EDTA scavenges the free, extracellular radionuclides in the liver and kidneys.

Thus, pre- and post-treatment with CaNa₂EDTA has an effect on the improvement of specificity of tumor radioactivity in RID, in addition to reducing hepatic and renal levels of radioactivity (improvement of imaging quality for diagnosis). On the other hand, pre- and postadministered CaNa₂EDTA may permit a sufficient increase of ⁹⁰Y-MAb dosage for cancer treatment in RIT, because of the increase in the tumor-to-bone, tumor-to-liver, and tumor-to-kidney radioactivity ratios.

CONCLUSION

This study strongly suggests that pre- and post-treatment with CaNa₂EDTA would be of great use for humans in both RID and RIT with ¹¹¹In- and ⁹⁰Y-MAb when radionuclides are freed from the radiolabeled MAbs.

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