

^{11}C dosimetry scans should be abandoned

Paolo Zanotti-Fregonara¹, Adriaan A Lammertsma², Robert B Innis¹

1 Molecular Imaging Branch, National Institute of Mental Health, Bethesda, Maryland

2 Department of Radiology and Nuclear Medicine, Amsterdam UMC, location VUmc, Amsterdam, Netherlands

Corresponding author:

Paolo Zanotti Fregonara

Molecular Imaging Branch

National Institute of Mental Health

10 Center Drive, MSC-1026

Bldg. 10, Rm. B1D43

Bethesda, MD 20892-1026

Tel: 301-451-8898

Email: zanottifregonp@nih.gov

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Before a new tracer can be used in clinical research, it is customary to perform dosimetry scans in animals and humans to assess whether the radiation exposure is acceptable. The main parameter to assess the radiation exposure is the effective dose (ED), which is expressed in Sieverts and defined as the tissue-weighted sum of the equivalent doses in the different organs. According to the U.S. Food and Drug Administration, new radiotracers require an Investigational New Drug Application (IND). Although there are no formal dose limitations for INDs, most institutions limit the yearly ED from research scans to 50 mSv. European countries apply a limit of 10 mSv for minor-to-intermediate risk levels, based on the Medical Exposures Directive (97/43/Euratom) established by the European Commission. Sometimes, the dose to individual organs is needed as well, especially for tracers administered under the conditions specified in the Radioactive Drug Research Committee (RDRC) regulations.

New PET tracers are commonly labeled with either ^{11}C or ^{18}F . However, these two isotopes are different from a dosimetric standpoint, because the average ED of ^{11}C -tracers ($5.2 \pm 1.7 \mu\text{Sv}/\text{MBq}$; $n=77$) (Suppl. Table 1) is about one fourth the average ED from ^{18}F -tracers ($20.5 \pm 7.6 \mu\text{Sv}/\text{MBq}$; $n=144$) (Suppl. Table 2). In addition, ^{11}C doses have a smaller variability compared to ^{18}F doses: the dose range is 3.2 to 14.1 $\mu\text{Sv}/\text{MBq}$ for ^{11}C (a four-fold difference) and 3.7 to 50 $\mu\text{Sv}/\text{MBq}$ for ^{18}F (a ratio of 13.5).

With this letter, we argue that performing ^{11}C dosimetry scans is antithetical to two widely accepted principles that govern medical ethics committees, namely (1) to reduce animal experimentation and (2) to avoid unnecessary radiation exposure to the general public. Instead, ^{11}C dosimetry scans for new tracers should be abandoned in both animals and humans and replaced by a standard average dose of 5 $\mu\text{Sv}/\text{MBq}$. This would not compromise the safety of healthy volunteers and patients and would not significantly reduce the accuracy of dose estimation because (1) dose calculations in animals, even primates, have little predictive value for humans and (2) the results obtained from human dosimetry, both in terms of ED and organ dose, are mostly dependent on how the dose is calculated.

As Figure 1 clearly shows, ^{11}C dosimetry estimations are remarkably consistent, with only one outlying value: the dose of 14.1 $\mu\text{Sv}/\text{MBq}$ for the serotonin 1A receptors tracer ^{11}C -WAY-100635 (1), which stands at about seven standard deviations from the average of the other ^{11}C tracers. Arguably, extreme dose values may be explained by methodological issues, rather than biodistribution. The dosimetry of ^{11}C -WAY-100635 in rats was estimated at 4.1 $\mu\text{Sv}/\text{MBq}$ (unpublished data from MRC Cyclotron Unit, Hammersmith Hospital, London). In addition, tracers for the same target, and labeled with the same isotope, should not be radically different from a biological and biophysical point of view: the ED of ^{11}C -CUMI-101, also a tracer for Serotonin 1A receptors, is only 5.3 $\mu\text{Sv}/\text{MBq}$ (2). In any case, even if the dose of 14.1 $\mu\text{Sv}/\text{MBq}$ for ^{11}C -WAY-100635 was correct, it would still be about one standard deviation below the average dose for ^{18}F tracers. Notably, the ^{18}F group also has one major outlier: the dose from ^{18}F -tetrafluoroborate was estimated at the very high value of 50 $\mu\text{Sv}/\text{MBq}$ in healthy volunteers (average between the male dose at 36 $\mu\text{Sv}/\text{MBq}$ and the female dose at 64 $\mu\text{Sv}/\text{MBq}$) in one study (3), but at 32.6 $\mu\text{Sv}/\text{MBq}$ by another study (4), despite the dose being calculated in thyroid cancer patients, and no significant differences between males and females were reported.

Even without considering extreme outliers, variations around the mean values are largely due to how the dose is calculated. For instance, the choice of using a dynamic bladder model and its voiding time may significantly affect the final dose. The doses for different voiding times are not systematically

reported but, for example, a faster voiding schedule would reduce the ED of ^{11}C -flumazenil by 13% (5) and that of ^{18}F -CP-18 by 61% (6).

Comparing the dose obtained by two different teams for the same tracer is a useful natural experiment to evaluate the weight of dose calculations approaches. In the literature there are 21 tracers for which human dosimetry has been estimated more than once by two different teams. In 18 of these, the ED was reported for both tracers. The average relative difference of these 18 tracers was 42% (Suppl Table 3). Only for three tracers the two teams found a dose difference smaller than 10%.

The dose to the target organ is estimated even more variably than the ED. For organs that can void their content, the dose is largely dependent on the voiding parameters simulated in the study. To take the tracers above described, a faster bladder voiding reduced the dose to the bladder by 33% for ^{11}C -flumazenil (5) and by 74% for ^{18}F -CP-18 (6). Similarly, the dose to the gallbladder, the target organ for ^{18}F -fluortriopride, was reduced by 71% by a fatty meal (7). Among the 21 tracers with at least two dosimetry evaluations by different teams, in only 11 the two teams identified the same target organ, with an average relative difference in dose of 165% (and a median of 72%) (Suppl Table 3).

In summary, given their narrow variability around the mean value of $5\ \mu\text{Sv}/\text{MBq}$, the dosimetry estimates reported in ^{11}C papers could be as different as the dose found for another ^{11}C tracer, had a different team performed the analysis or a different methodology to calculate the dose been used.

Among the animals used to extrapolate the human dose, monkeys are a better model than rodents, because they are more closely related to humans. Monkeys, however, are not widely available, are expensive, and require sophisticated medical monitoring.

We verified the agreement in terms of ED (Suppl Table 4) and target organ doses (Suppl Table 5) of 16 ^{11}C tracers and 21 ^{18}F tracers for which dosimetry from human and nonhuman primates was available. For both groups of tracers, monkey scans unpredictably under- or overestimated the human ED with a mean absolute percentage difference of 31%. Out of these 37 tracers, the target organ was reported for both species in 32. Out of these 32 pairs of studies, in only 11 the target organ was the same in both monkeys and humans, and the monkey dose poorly predicted the human dose (mean difference of 42 absolute percentage points). To highlight the impact of methodology in the outcome of dosimetry studies, the same team (or part of the same team) performed the calculations for both species in 9 of the 11 tracers where the target organ was the same, but the same team was responsible for 13 out of 21 studies in which the target organ was different.

Finally, we wish to make clear that we advocate abandoning dosimetry scans only for ^{11}C ligands, and not for isotopes with a longer half-life. The dosimetry (in humans) for ^{18}F tracers should be maintained, because they deliver a higher dose and have a higher variability (Figure 1). With the aim of reducing unnecessary exposure to the general public, we suggest nevertheless to use either the first-in-human protocol implemented at the NIH (8), which recommends dosimetry scans only for those tracers that prove to be successful, or the approach used at the Amsterdam University Medical Center, where only a single low-dose ($74\ \text{MBq}$) ^{18}F whole-body scan is performed before proof-of-concept studies, in order to rule out abnormal tracer distributions. The dosimetry of more irradiating positron emitters, such as ^{89}Zr -whose dose is about two orders of magnitude higher than that of ^{11}C (9,10), should be calculated for each tracer before it can be employed.

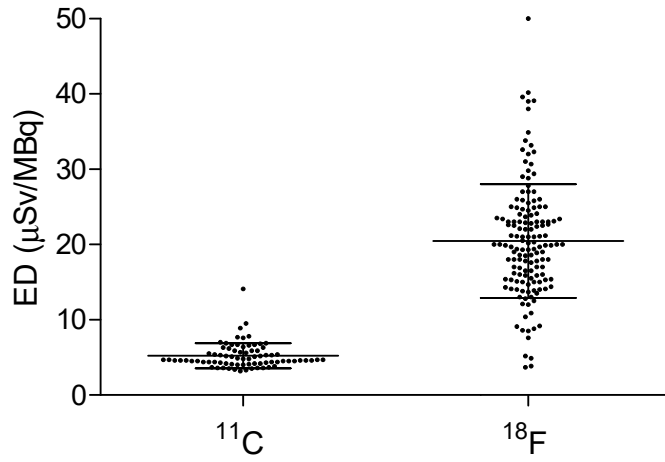
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Figure 1



Scatterplots showing the estimation of human dose estimated for ^{11}C tracers (n =77) and for ^{18}F tracers (n = 144). The dose of ^{11}C tracers is about one fourth the dose of ^{18}F tracers, and its variability lower.

Supplemental Table 1: Human doses from ¹¹C-labeled tracers.

Target	Tracer	ED (μ SV/MBq)	Critical organ	Critical organ dose (μ SV/MBq)	Number of subjects	Reference
Acetylcholinesterase	Donepezil	5.2	Pancreas	27.1	6	(1)
Adenosine A1 receptor	MPDX	3.5	Liver	11	3	(2)
Adenosine A2A receptors	Preladenant	3.7	Gallbladder	17	5	(3)
Adenosine A2A receptors	TMSX	3.6	Liver/ Gallbladder	11	3	(2)
Amino acid transport	MeAIB	4	Pancreas	18	25	(4)
Antiglycemic drug	Metformin	9.5	Bladder	134	4	(5)
Beta amyloid	BTA1	4.3	Liver	20.1	5	(6)
Beta amyloid	Pib	4.7	Gallbladder	41.5	16	(7)
Beta amyloid	Pib	5.3	Gallbladder	44.8	6	(8)
Butyrylcholinesterase	MP4B	4.2	Kidney	13.7	7	(9)
Cannabinoid CB1 receptors	MePPEP	4.6	Liver	16.2	7	(10)
Cannabinoid CB2 receptors	NE40	3.6	Small intestine	15.6	6	(11)
Central adrenoceptors	Mirtazapine	6.8	Lungs	34	1	(12)
Cholestatic disease	Cholylsarcosine	6.2	Gallbladder	179.9	8	(13)
COX-1	PS13	4.6	Spleen	27.8	15	NIMH data
COX-2	MC1	4.6	Liver	18	2	NIMH data
Dopamine D1 receptors	NNC112	5.7	Gallbladder	32.4	7	(14)
Dopamine D2 receptors	Raclopride	6.3	Gallbladder	31.5	6	(15)
Dopamine D2 receptors	Raclopride	6.7	Kidneys	40.6	3	(16)
Dopamine D2/D3 receptors	PHNO	4.5	Liver	17.9	6	(17)
Dopamine system	NPA	6.7	Gallbladder	28.1	6	(18)
Dopamine transporters	PE2I	6.4	Bladder	18	3	(19)

Dopamine transporters	CFT	8.9	Bladder	63.2	6	(20)
Epidermal growth factor receptor	PD153035	4.7	Bladder	60.8	9	(21)
Extrastriatal dopamine D ₂ receptor	FLB 457	5.9	Kidney	17.1	6	(22)
Fatty acid amide hydrolase	Carbonyl-URB694	4.6	Gallbladder	111	6	(23)
Fatty acids metabolism	Palmitate	3.2	Liver	27.5	2	(24)
GABA receptors	MPGA	4.8	Small intestine	33	3	(25)
GABA receptors	Flumazenil	5.2	Bladder	36.8	5	(26)
GABA receptors	Flumazenil	7.6	Bladder	63.2	6	(27)
Glucose metabolism	Glucose	4.3 ^a	Brain	11.6	33	(28)
Glycine transporter 1	RO5013853	3.3	Liver	16	3	(29)
Glycine transporter 1	GSK931145	4.5	Liver	11.5	8	(30)
H3 receptors	MK-8278	5.4	Pancreas	40.2	3	(31)
Histamine H3 receptors	TASP457	6.9	Pancreas	27.4	3	(32)
Imidazoline2 binding site	BU99008	5.6	Heart	28	4	(33)
Infection imaging	Trimethoprim	4.4	Kidney	14.5	3	(34)
mGlu1 receptors	ITMM	4.4	Bladder	12.5	12	(35)
mGlu1 receptors	ITMM	4.6	Bladder	13.2	3	(36)
mGlu2 receptors	JNJ-42491293	4.5	N/A	N/A	3	(37)
mGlu5 receptors	ABP688	3.7 ^a	Liver	16.4	5	(38)
mGlu5 receptors	FPEB	3.7	Gallbladder	41.2	6	(39)
mGlu5 receptors	SP203	4.4	Gallbladder	38.1	8	(39)
Mu-opiate receptors	Carfentanil	4.6	Bladder	36.5	5	(40)
Neuroinflammation	Ketoprofen	4.7	Bladder	41	6	(41)
Nicotine	Nicotine	5.4	Bladder	14.7	11	(42)
Nicotinic acetylcholine receptors	CHIBA-1001	6.9	Small intestine	24	3	(43)
NMDA receptors	GMOM	4.5	Spleen	12.7	5	(44)
NMDA receptors	CNS5161	10.6 ^a	Lungs	39.3	5	(45)

NOP1 receptors	NOP1	4.3	Gallbladder	21	9	(46)
OATP1B3	Telmisartan	4.2	Gallbladder	41.6	6	(47)
P2X7 receptor	JNJ54173717	4.5	Gallbladder	25	3	(48)
P-glycoprotein	dLop	7.8	Kidney	50.1	8	(49)
P-glycoprotein	Elacridar	3.4	Liver	27.6	3	(50)
P-glycoprotein	Tariquidar	3.6	Liver	31.9	3	(50)
P-glycoprotein	Laniquidar	4.4	Liver	25	6	(51)
Phosphodiesterase 4	Rolipram	4.8	Gallbladder	23.1	8	(52)
Serotonin 1A receptors	WAY-100635	14.1	Bladder	194	6	(53)
Serotonin 1A receptors	CUMI-101	5.3	Pancreas	32	9	(54)
Serotonin 2A receptors	Cimbi-36	5.5	Spleen	18.4	5	(55)
Serotonin 2A receptors	Cimbi-36_5	5.3	Spleen	17.9	2	(55)
Serotonin 6 receptors	GSK215083	7.7	Lungs	25.6	6	(56)
Serotonin transporters	Dasb	7	Lungs	32.8	7	(57)
Sigma receptors	SA4503	6.7	Spleen/ Thyroid	24	3	(2)
Synaptic density	UCB-J	7.6	Bladder (males) Liver (females)	22.4; 24.8	4	(58)
TSPO protein	PBR28	6.6	Kidney	52.6	7	(59)
TSPO protein	PK11195	5.1	Kidney	14	5	(60)
TSPO protein	PK11195	4.6 ^a	Bladder	12	7	(61)
TSPO protein	CB184	5.9	Kidney	21	5	(62)
TSPO protein	DPA-713	5.9	Lungs	20.1	6	(63)
TSPO protein	DAA1106	4.1	Spleen	18.2	12	(64)
TSPO protein	ER176	4.1	Kidney	14.3	9	(65)
Tumor imaging	Methyl-thymidine	3.8	Liver	37	6	(66)
Tumor imaging	Choline	4.4	Kidney	21	6	(67)
Tumor imaging	Docetaxel	4.7	Liver	35.2	5	(68)
Tumor imaging	Acetate	4.9	Pancreas	17	6	(69)
Tumor imaging	Acetate	3.5	Kidney	52	14	(70)
Tumor imaging	Methionine	5.1	Bladder	27	5	(71)
Tumor imaging	Erlotinib	3.6	Liver	29.4	1	(72)

Tumor imaging	Methyl-L-Cysteine	4.0	Liver	10.1	6	(73)
Tumor imaging	4DST	4.2	Bladder	17.6	3	(74)

When separate doses for men and women or for different ethnicities are reported, the average value was used. Doses to children were not considered.

^a Effective dose equivalent (EDE). Tracers for which the dosimetry is expressed as EDE are not included in the mean \pm SD of the tracer doses, nor in Figure 1

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Supplemental Table 2: Human doses from ¹⁸F-labeled tracers.

Target	Tracer	ED (μ SV/MBq)	Critical organ	Critical organ dose (μ SV/MBq)	Number of subjects	Reference
Adenosine 2A receptor	MNI-444	23	ULI	99	4	(1)
Adenosine A1 receptor	CPFPX	17.6	Gallbladder	136.2	6	(2)
Amino acid transporter 1	NKO-035	20	Bladder	302	4	(3)
Amino acid transporter 1	BF3-Tyr	3.7	N/A	N/A	2	(4)
Apoptosis	F-ML-10	15.4	Bladder	172	8	(5)
Apoptosis	CP-18	38	Bladder	536	7	(6)
Beta amyloid	FPYBF-2	8.5	Liver	32.6	4	(7)
Beta amyloid	FC119S	3.9	N/A	N/A	3	(8)
Beta-amyloid	FACT	18.6	Gallbladder	333	6	(9)
Beta-amyloid	Flutemetamol (GE067)	33.8	Gallbladder	287	6	(10)
Beta-amyloid	Flutemetamol (GE067)	26	Bladder	114	6	(11)
Beta-amyloid	Florbetaben (BAY94-9172)	14.7	Gallbladder	132.4	3	(12)
Beta-amyloid	Florbetaben (BAY94-9172)	16.5	Gallbladder	103	12	(13)
Beta-amyloid	Florbetapir (AV-45)	16	Gallbladder	150	9	(14)
Beta-amyloid	Florbetapir (AV-45)	13	N/A	N/A	3	(15)
Beta-amyloid	Florbetapir (AV-45)	19.3	Gallbladder	184.7	3	(16)
Beta-amyloid	Florbetapir (AV-45)	18.6	Gallbladder	143	9	(17)
Beta-amyloid	Florbetapir (AV-45)	17.8	Gallbladder	28.9	6	(18)
Beta-secretase 1	PF-06684511	24.7	Pancreas	92.9	5	(19)
Bone imaging	FNA	17	Bladder	80	8	(20)
Boron neutron capture therapy	FBPA	23.9	Kidney	32	3	(21)
Boron neutron capture	FBPA	15	Heart	14	6	(22)

therapy						
Cannabinoid CB1 receptors	FMPEP-d2	19.7	Bladder	66.2	7	(23)
Cannabinoid CB1 receptors	MK-9470	22.8	Gallbladder	159	8	(24)
Cardiac sympathetic innervation	4F-MHPG	21.1	Bladder	175	4	(25)
Cardiac sympathetic innervation	3F-PHPG	20.3	Bladder	165	4	(25)
Caspase 3	ICMT-11	25	Gallbladder	594	8	(26)
c-Met receptor	AH113804	29.8	Bladder	351	6	(27)
Deoxycytidine kinase	Clofarabine	20	Bladder	234	5	(28)
Deoxycytidine kinase	L-18F-FMAC	9.1	Bladder	54.3	3	(29)
Deoxycytidine kinase	L-18F-FAC	7.6	Bladder	49.6	3	(29)
Deoxycytidine kinase	FAC	5.2	Bladder	20.4	3	(29)
Deoxycytidine kinase	FAC	13.7	Bladder	55.7	3	(30)
Dopamine D2/D3 receptors	Fallypride	21.1	Gallbladder	120	5	(31)
Dopamine D3 receptors	Fluortripride	22.5	Gallbladder	436	10	(32)
Dopamine transporters	FE-PE2I	23	Bladder	119	5	(33)
Dopamine transporters	FP-CIT	8.6 ^a	Bladder	58.6	12	(34)
Dopaminergic system	FDOPA	19.9	Bladder	150	18	(35)
Estrogen receptors	16 α -F-estradiol	27	Gallbladder	797	10	(36)
Estrogen receptors	16 α -F-estradiol	22 ^b	Liver	126	49	(37)
Fatty acids metabolism	fluoropivalate	15.4	Liver	70.6	24	(38)
Fatty acids metabolism	FluorBetaOx	14	Bladder	110	8	(39)
Folate receptor alpha	AzaFol	18	Liver	51.9	6	(40)
Gastrin-Releasing Peptide receptor	BAY 864367	23	Gallbladder	240	5	(41)
Gastrin-Releasing Peptide receptor	BAY 864367	14.3	Bladder	49.9	10	(42)
Gene expression	FHBG	15.9	Bladder	94.2	10	(43)

Glucose metabolism	FDG	29	Bladder	310	6	(44)
Glucose metabolism	FDG	24 ^c	Bladder	73	24 ^d	(45)
Glucose metabolism	FDG	15	Bladder	52	30	(46)
Glucose metabolism	FDG	15.3	Bladder	84.6	8	(47)
Glucose metabolism	FDG	19.9	Bladder	154	183	(48)
Glycine transporter 1	CFpyPB (MK-6577)	24.5	Gallbladder	267	3	(49)
Glycoprotein IIb/IIIa receptors	GP1	21.2	Bladder	88.4	30	(50)
Histone deacetylase 6	EKZ-001	39.1	Upper large intestine	270	4	(51)
Hypoxia	FMISO	14 ^b	Bladder	29	60	(52)
Hypoxia	FETNIM	19	Bladder	127	27	(53)
Hypoxia	EF5	18	Bladder	120	16	(54)
Hypoxia	EF5	23	Bladder	170	10	(55)
Hypoxia	DiFA	14.4	Bladder	94.7	8	(56)
Hypoxia	FAZA	13.5	Bladder	47	5	(57)
Hypoxia	HX4	27	Bladder	299	4	(58)
Infection imaging	Fluorodeoxysorbitol	21	Bladder	248	6	(59)
Integrins	Galacto-RGD	18	Bladder	200	5	(60)
Integrins	RGD-K5	31	Bladder	376	4	(61)
Integrins	FPPRGD2	39.6	Bladder	233.3	5	(62)
Melanoma imaging	P3BZA	19.3	Bladder	120	6	(63)
mGlu1 receptors	FIMX	23.4	Bladder	251	4	(64)
mGlu5 receptors	SP203	17.8	Bladder	76	7	(65)
mGlu5 receptors	PSS232	15.3	Gallbladder	23	6	(66)
mGlu5 receptors	FPEB	25	Bladder	258	9	(67)
mGlu5 receptors	FPEB	16.9	Gallbladder	191	6	(68)
Mitochondria	FBnTP	27	Liver	128	3	(69)
Muscarinic receptors	F-DEX	19.7	Liver	52.9	5	(70)
Myocardial perfusion	Flurpiridaz (BMS-747158)	19	Kidney	66	13	(71)
Myocardial perfusion	BFPET	18	Kidney	N/A	6	(72)

Neuroendocrine tumors	MFBG	23	Bladder	186	10	(73)
Nicotinic acetylcholine receptor	nifene	24.9	Bladder	179.7	4	(74)
Nicotinic acetylcholine receptors	A-85380	19.4	Bladder	81.8	3	(75)
Nicotinic acetylcholine receptors	A-85380	39	Bladder	180	6	(76)
Nicotinic acetylcholine receptors	A-85380	23.7	Bladder	153	2	(77)
Nicotinic acetylcholine receptors	flubatine	23.4	Bladder	80.2	3	(78)
Nicotinic acetylcholine receptors	AZAN	14	Bladder	23	2	(79)
Nicotinic acetylcholine receptors	NCFHEB	22.9	Bladder	80.2	3	(80)
Nitric oxide synthase	NOS	15.9	Bladder	95.3	16	(81)
Norepinephrine transporter	LMI1195	26	Bladder	101.5	12	(82)
Norepinephrine transporter	FMeNER-D2	17	Bladder	38	4	(83)
O-GlcNAcase	LSN3316612	20.5	Bladder	86.4	6	(84)
P2X7 receptor	JNJ-64413739	22	Gallbladder	256	3	(85)
Phosphodiesterase 10A	JNJ-42259152	24.9	Gallbladder	239	6	(86)
Phosphodiesterase 10A	MNI-659	24.1	Gallbladder	505	4	(87)
Phosphodiesterase 2A	PF-05270430	34.9	Gallbladder	N/A	4	(88)
Prostate cancer	F-choline	18 ^e	Kidney	79	10	(89)
Prostate cancer	F-choline	34.1 ^b	Kidney	170	12	(90)
Prostate cancer	FDHT	12.5 ^a	Bladder	86.8	7	(91)
Prostate cancer	FDHT	20	Bladder	61	11	(92)
Prostate cancer	DCFBC	19.9	Bladder	32.4	5	(93)
Prostate cancer	JK-PSMA-7	10.9	Kidney	17.6	10	(94)
Prostate cancer	PSMA-11	12.8	Bladder	126	6	(95)

Prostate cancer	CTT1057	23	Bladder	259	5	(96)
Prostate cancer	DCFPyL	17	Lacrimal glands	242	9	(97)
Prostate cancer	DCFPyL	13.9	Kidney	94.5	9	(98)
Prostate cancer	PSMA-1007	22	Kidney	170	3	(99)
Prostate cancer	FSU-880	9.2	Kidney	54.4	6	(100)
Prostate cancer	Florastamin	4.9	Kidney	62	15	(101)
Pyruvate kinase M2	DASA-23	23.5	Gallbladder	607.8	5	(102)
Serotonin 5-HT1A receptors	Mefway	40.2	Bladder	471	6	(103)
Sigma 1 receptors	Fluspidine	21	Liver	76	4	(104)
Sigma-1 receptors	FTC-146	25.9	Bladder	149.8	10	(105)
Sodium iodide symporter	tetrafluoroborate	50	Thyroid	31	8	(106)
Sodium iodide symporter	tetrafluoroborate	32.6	Thyroid	135	5	(107)
Somatostatin receptors	AIF-OC	22.4	Spleen	159	6	(108)
Somatostatin receptors	AIF-OC	23.1	Spleen	142	3	(109)
Tachykinin NK(1) receptors	SPA-RQ	32.3	Kidney	92	7	(110)
Tau protein	PI-2620	33.2	Right colon	242	6	(111)
Tau protein	AV1451 (T807)	22.5	Liver	81.2	6	(112)
Tau protein	GTP1	30.7	Gallbladder	14.1	6	(113)
Tau protein	MK-6240	29.4	Gallbladder	202	3	(114)
Tau protein	RO-948	15	Gallbladder	150	6	(115)
Tau protein	THK-5351	22.7	Gallbladder	242	12	(116)
Tau protein	JNJ-64326067	25.5	Right colon (males), bladder (females)	152, 182	6	(117)
TSPO	PBR06	18.5	Gallbladder	367	7	(118)
TSPO	FEPPA	20.2	Lungs	56.5	6	(119)
TSPO	DPA-714	21	Small intestine	47	6	(120)
Tumor imaging	5-fluorouracil	12.1	Gallbladder	79.9	15	(121)
Tumor imaging	FLT	15.5 ^a	Bladder	176.5	18	(122)
Tumor imaging	FACBC (GE-148) (fluciclovine)	14.1	Liver	52.2	6	(123)
Tumor imaging	FACBC (GE-148)	22.1	Pancreas	102.2	6	(124)

(fluciclovine)						
Tumor imaging	FET	16.5	Bladder	60	7	(125)
Tumor imaging	fluoropaclitaxel	28.8	Gallbladder	229.5	3	(126)
Tumor imaging	fluoro-l-proline	15.1	Bladder	44.1	6	(127)
Tumor imaging	BAY 94-9392 (FSPG)	32	Bladder	400	5	(128)
Tumor imaging	FFNP	20	Gallbladder	113	12	(129)
Tumor imaging	ISO-1	16	Gallbladder	91	12	(130)
Tumor imaging	NMK36	13.8	Liver	40.6	6	(131)
Tumor imaging	SKI	25.8	Colon	167	5	(132)
Tumor imaging	(2S, 4R)4-fluoroglutamine	19.4	Uterus	54.9	6	(133)
Tumor imaging	(2S, 4R)4-fluoroglutamine	18.9	Bladder	186	6	(134)
Tumor imaging	FdCyd	21.2	Bladder	79.6	5	(135)
Tumor imaging	Fludarabine	10.4	Spleen	37.5	10	(136)
Tumor imaging	D4-FCH	25	Kidney	106	8	(137)
Tumor imaging	BAY 86-9596	16.2	N/A	N/A	5	(138)
Tumor imaging	FMP	13	N/A	N/A	5	(139)
Tumor imaging	BAY 85-8050 (TIM-1)	8.8	Kidney	25.3	5	(140)
Tumor imaging	FAPI-74	14.1	Bladder	75.8	10	(141)
Vesicular acetylcholine transporter	VAT	12	Gallbladder	104	3	(142)
Vesicular acetylcholine transporter	FEOBV	22.6	Upper large intestine	101	3	(143)
Vesicular monoamine transporter	FP-(+)-DTBZ	27.8	Pancreas	153.3	9	(144)

When separate doses for men and women or for different ethnicities are reported, the average value was used. Doses to children were not considered.

^a Value estimated from the data reported in the original paper (estimations taken from (65))

^b Effective dose equivalent (EDE). Tracers for which the dosimetry is expressed as EDE are not included in the mean \pm SD of the tracer doses, nor in Figure 1

^c Effective dose is estimated to be higher than total-body dose by approximately a factor of two (45).

^d Residence times were calculated with a variable number of subjects pooled from different biodistribution studies (45).

^e Risk-weighted absorbed dose coefficient

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Table 3: Tracers for which the human dosimetry has been estimated more than once. When the target organ is the same in both studies, their doses and their relative differences are reported.

	Effective dose ($\mu\text{Sv}/\text{MBq}$)	Relative difference (%)	Target organ	Dose to the target organ ($\mu\text{Sv}/\text{MBq}$)	Relative difference (%)	References
¹¹C Tracer						
ITMM ^a	4.4	4.6	Bladder	12.5	5.6	(1)
	4.6		Bladder	13.2		(2)
Pib	4.7	12.8	Gallbladder	41.5	8	(3)
	5.3		Gallbladder	44.8		(4)
Raclopride	6.3	6.3	Gallbladder			(5)
	6.7		Kidney			(6)
Flumazenil	5.2	46.2	Bladder	36.8	71.7	(7)
	7.6		Bladder	63.2		(8)
PK11195	5.1	N/A ^b	Kidney			(9)
	4.6 ^b		Bladder			(10)
Acetate	4.9	40	Pancreas			(11)
	3.5		Kidney			(12)
¹⁸F Tracer						
BAY94-9172 (Florbetaben)	14.7	12.2	Gallbladder	132.4	28.5	(4)
	16.5		Gallbladder	103		(13)
AV-45 (florbetapir)	16	48.5 ^c	Gallbladder	150	539 ^c	(14)
	13		N/A	N/A		(15)
	19.3		Gallbladder	184.7		(16)
	18.6		Gallbladder	143		(17)
	17.8		Gallbladder	28.9		(18)
Flutemetamol (GE067)	33.8	30	Gallbladder			(19)
	26		Bladder			(20)
FBPA	23.9	59.3	Kidney			(21)
	15		Heart			(22)
FAC ^a	5.24	161.5	Bladder	20.4	173	(23)
	13.7		Bladder	55.7		(24)
16 α -F-estradiol	27	N/A ^b	Gallbladder			(25)
	22 ^b		Liver			(26)
BAY 864367	23	60.8	Gallbladder			(27)
	14.3		Bladder			(28)
FDG	29	93.3 ^c	Bladder	94.2	496.2 ^c	(29)
	24 ^d		Bladder	310		(30)
	15		Bladder	73		(31)
	15.3		Bladder	52		(32)
	19.9		Bladder	84.6		(33)
EF5	18	27.8	Bladder	120	41.7	(34)
	23		Bladder	170		(35)
FPEB	25	47.9	Bladder			(36)
	16.9		Gallbladder			(37)

	19.4		Bladder	81.8		(38)
A-85380	39	101 ^c	Bladder	180	120 ^c	(39)
	23.7		Bladder	153		(40)
F-choline	18 ^e	N/A ^b	Kidney	79	115.2	(41)
	34.1 ^b		Kidney	170		(42)
AIF-OC	22.4	3.1	Spleen	159	12	(43)
	23.1		Spleen	142		(44)
FDHT	12.5 ^f	60	Bladder	86.8	42.3	(45)
	20		Bladder	61		(46)
DCFPyL ^a	17	22.3	Lacrimal glands			(47)
	13.9		Kidney			(48)
Tetrafluoroborate	50	53.4	Thyroid	31	335.5	(49)
	32.6		Thyroid	135		(50)
FACBC (GE-148)	14.1	56.7	Liver			(51)
(fluciclovine)	22.1		Pancreas			(52)
(2S, 4R)4-	19.4	2.6	Uterus			(53)
fluoroglutamine	18.9		Bladder			(54)

Relative differences are the ratio of the difference between the two values over the smaller value.

If one of the values is expressed as Effective Dose Equivalent, the difference is not calculated.

^a Tracer for which both dosimetry studies were performed by the same team

^b Effective Dose Equivalent

^c Difference between the highest and lowest value

^d Effective dose is estimated to be higher than total-body dose by approximately a factor of two

^e Risk-weighted absorbed dose coefficient

^f Value estimated from the data reported in the original paper (estimations taken from (55))

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Table 4: Effective dose extrapolated from monkeys and measured directly in humans, and their relative difference.

	Effective dose from monkeys (μSv/MBq)	Effective dose from humans (μSv/MBq)	% difference compared to the human dose	References
¹¹C Tracer				
Rolipram	6.6	4.8	38	(1)
DASB	6	7	-14	(2,3)
PBR28	10.3	6.6	56	(4)
CUMI-101	6.9	5.3	30	(5); Parsey unpubl
MePPEP	6.6	4.6	43	(6); NIMH data
dLop	9.4	7.8	21	(7,8)
PK11195	5.3	5.1	4	(9,10); NIMH data
		4.6 ^a	N/A	
Raclopride	6.7	6.3	6	(11-13)
		6.7	0	
GSK931145	5.2	4.5	16	(14)
NNC112	3.9	5.7	-32	(15,16)
Erlotinib	3.7	3.6	3	(17)
MK-8278	4.8	5.4	11	(18)
PHNO	5	4.5	11	(19,20)
Pib	7.4	4.7	57	(21-23)
		5.3	40	
NOP1	5	4.3	16	(24,25)
UCB-J	3.3	7.6	-57	(26,27)
¹⁸F Tracer				
FMPEP-d2	25.1	19.7	27	(6); NIMH data
RGD-K5	40	31	29	(28)
FPEB	23.7	16.9	98 ^b	(29-32)
		33.5	25	
SP203	27	17.8	52	(33); NIMH data

BMS747158	15	19	-21	(34,35)
PBR06	30.3	18.5	64	(36); NIMH data
Fluoropaclitaxel	22	28.8	-24	(37,38)
PF-06684511	43	24.7	74	(39,40)
AV1451 (T807)	18.9	22.5	-16	(41,42)
Fluortriopride	20 ^c	22.5	-11	(43,44)
FE-PE2I	21	23	-9	(45,46)
Tetrafluoroborate	24.7	50	-51	(47-49)
		32.6	-24	
PF-05270430	21.7	34.9	-38	(50,51)
	24.9		-29	
VAT	17.5	12	46	(52,53)
FIMX	25.4	23.4	9	(54); NIMH data
MNI-444	21.9 ^d	23.1	-5	(55,56)
LMI1195	18.9	26	-27	(57,58)
MNI-659	19.7	24.1	-18	(31,59)
HX4	42	27	56	(60)
FMeNER-D2	33.2	17	95	(61,62)
LSN3316612	22	20.5	7	(63,64)

^a Effective dose equivalent (10). By consequence, the comparison with the ED from monkeys is not calculated.

^b Largest difference between the two monkey studies (31,32) and the two human studies (29,30).

^c Different values of effective dose extrapolated from monkeys are given (44). We chose the one that is the closest to the human dose (43).

^d Two different ED values were estimated with two different approaches. We report here the one (Scaled Monkey Organ Weight) that gives the closest approximation to human data (+5%). The other approach (No Correction for Organ Weight Difference) would have given a difference of -23% (55).

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Table 5: Target organs in monkeys and humans for the same tracers. The doses and their differences are reported only for the 11 tracers for which monkey and human data identified the same target organ

	Target organ from monkeys	Dose from monkeys (μSv/MBq)	Target organ from humans	Dose from humans (μSv/MBq)	% difference in organ dose compared to the human dose	References
¹¹C Tracer						
Rolipram	Bladder		Gallbladder			(1)
DASB	Bladder		Lungs			(2,3)
PBR28	Lungs		Kidney			(4)
CUMI-101	Bladder		Pancreas			(5); Parsey unpubl
MePPEP	N/A		Liver			(6); NIMH data
dLop	Thyroid		Kidney			(7,8)
PK11195	N/A		Kidney Bladder			(9,10); NIMH data
Raclopride	Gallbladder		Gallbladder Kidney			(11-13)
GSK931145	Liver	18.1	Liver	11.5	57	(14)
NNC112	Kidney		Gallbladder			(15,16)
Erlotinib	Liver	17.4	Liver	29.4	-41	(17)
MK-8278	N/A		Pancreas			(18)
PHNO	Kidney		Liver			(19,20)
Pib	Gallbladder	41	Gallbladder Gallbladder	41.5 44.8	-1 -8	(21-23)
NOP1	Gallbladder	35.6	Gallbladder	21	70	(24,25)
UCB-J	Liver(males) Brain (females)		Bladder (males) Liver (females)			(26,27)
¹⁸F Tracer						
FMPEP-d2	Bladder	135	Bladder	66.2	104	(6); NIMH data
RGD-K5	Bladder	400	Bladder	376	6	(28)
FPEB	Gallbladder Upper intestine		Gallbladder Bladder			(29-32)

SP203	N/A		Bladder			(33); NIMH data
BMS747158	Heart		Kidney			(34,35)
PBR06	Gallbladder	199	Gallbladder	367	-46	(36); NIMH data
Fluoropaclitaxel	Gallbladder	190	Gallbladder	229.5	-17	(37,38)
PF-06684511	N/A		Pancreas			(39,40)
AV1451 (T807)	Kidney		Liver			(41,42)
Fluortriopride	Gallbladder	18.1	Gallbladder	436	-96	(43,44)
FE-PE2I	Upper intestine		Bladder			(45,46)
Tetrafluoroborate	Stomach		Thyroid			(47-49)
			Thyroid			
PF-05270430	Gallbladder		GI Tract (males),			(50,51)
	Gallbladder		Bladder (females)			
VAT	Liver		Gallbladder			(52,53)
FIMX	Bone		Bladder			(54); NIMH data
MNI-444	Gallbladder		Upper intestine			(55,56)
LMI1195	Bladder	100	Bladder	101.5	-1	(57,58)
MNI-659	Digestive tract		Gallbladder			(31,59)
HX4	Bladder	42	Bladder	27	56	(60)
FMeNER-D2	Kidney		Bladder			(61,62)
LSN3316612	Kidney		Bladder			(63,64)

The organ doses of three tracers are not listed: ^{18}F -FPEB, ^{11}C -raclopride, and ^{11}C -UCB-J

The dose for ^{18}F -FPEB has been estimated twice in rhesus monkeys (31,32) and twice in humans (29,30). The target organ was identified as either the gallbladder (31) or the upper large intestine (32) in monkeys and as either the gallbladder (30) or the bladder (29) in humans.

For ^{11}C -raclopride, the gallbladder was identified as the target organ in monkeys by Herscovitch et al (13) and in humans by Slifstein et al (12).

However, Ribeiro et al identified the kidneys as the target organ (11). Notably, the kidney dose of 40.6 $\mu\text{Sv}/\text{MBq}$ estimated by Ribeiro et al (11) is about one order of magnitude greater than the kidney dose estimated by Slifstein et al. at 6.8 $\mu\text{Sv}/\text{MBq}$ (12).

Since multiple studies are more likely to find at least one common target organ, these organ doses have not been included in the table.

Similarly, ^{11}C -UCB-J has two different target organs for males and females for both monkeys and humans. The only common organ is the liver, which is the target organ for male monkeys and women.

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