Design and evaluation of novel PET and SPECT tracers for imaging the monoamine system and the P-gp transporter

Sylvie De Bruyne
Pharmacist

Thesis submitted to obtain the degree of Doctor in Pharmaceutical Sciences

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Promotor: Prof. Dr. Apr. F. De Vos
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Gent, augustus 2009

De promoter : De auteur :

Prof. Dr. Filip De Vos Sylvie De Bruyne
The first practical application of a radioisotope was made by George de Hevesy in 1911. At the time de Hevesy was a young Hungarian student working in Manchester with naturally radioactive materials. Not having much money he lived in modest accommodation and took his meals with his landlady. He began to suspect that some of the meals that appeared regularly might be made from leftovers from the preceding days or even weeks, but he could never be sure. To try and confirm his suspicions de Hevesy put a small amount of radioactive material into the remains of a meal. Several days later when the same dish was served again he used a simple radiation detection instrument - a gold leaf electroscope - to check if the food was radioactive. It was, and de Hevesy's suspicions were confirmed.
Je zou verwachten dat het enige stuk dat in het Nederlands geschreven wordt het snelst en eenvoudigst zou schrijven. Dit blijkt niet zo te zijn…

Eerst en vooral wil ik Prof Guido Slegers bedanken om mij 5 jaar geleden de kans te geven dit doctoraatswerk aan te vatten.

Mijn promoter Prof Dr Apr Filip De Vos bedank ik om mij de mogelijkheid te geven dit doctoraatsonderzoek volledig zelfstandig en in alle vrijheid te voltooien.

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(Ex)-collega’s (Bart, Veerle, Ludo, Ruth, Elke, Ingrid, Rien, Peter, Lieve, Joeri, Dirk, Fijo, Davy, Nico, Ghilaine, Valerie, Magali, Liesbet, Leoni, Caroline, Lieselotte en Dominique) ik vond het heel prettig om met jullie samen te werken. Jullie waren altijd bereid naar mijn frustraties te luisteren en te helpen waar nodig. Wim, Davy, Nico, Ghilaine, Valerie, de koffiepauzes met jullie waren ideale momenten om te ontspannen en natuurlijk ook te roddelen 😊. Wim, merci voor de assistentie bij computerproblemen. Ingrid, ik ken niemand anders met zoveel onderzoeksenthousiasme. De fietsritten naar en van het labo waren altijd héél ontspannend. Dominique, de happy hours met jou waren telkens een feest 😊. Lieselose, merci voor alle cyclotron-assistentie. Caroline en Magali, jullie zijn zeer sociale collega’s die altijd tijd maakten voor een ontspannende babbel. Liesbet, het was prettig samenwerken met zo een begripvolle en geduldige collega. Ik ben je enorm dankbaar voor het nalezen
Acknowledgements

van de volgende 200 pag. Leonie, ik had dit op voorhand niet verwacht maar ik vond het héél gezellige jaren in “ons” syntheselabo. Ik heb me altijd goed amuseerd tijdens de vele uren in het labo. Ik kon altijd bij jou terecht voor raad over experimenten en de resultaten. Liesbet en Leonie, merci voor de vele injecties. Alle (ex-)collega’s: bedankt voor de leuke jaren op het labo en de drie fantastische en memorabele weekends! De labo-avondjes waren ook steeds iets om naar uit te kijken.

Sofie, Ine, Marjan, Margriet, Ellen en Ilse, ik ben blij dat ik jullie tijdens mijn farmaciejaren heb leren kennen en kijk altijd uit naar de gezellige vrouwenavonden met jullie (die veel te weinig voorkomen). Sofie, Ine en Marjan, jullie hebben me overtuigd van het feit dat ik wel geschikt was om te doctoreren en daar ben ik jullie nog steeds heel dankbaar voor. Ilse, dankzij jou ben ik op het labo radiofarmacie terecht gekomen. Jammer genoeg zijn we er niet beide kunnen beginnen.

Vrienden, bedankt voor alle interesse en steun tijdens de voorbije jaren. Dankzij jullie kon ik de stress van het doctoraatswerk eventjes vergeten!

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<td>ABC</td>
<td>ATP binding cassette</td>
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<tr>
<td>ADAM</td>
<td>2-((2-((Dimethylamino)methyl)phenyl)thio)-5-iodophenylamine</td>
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<tr>
<td>ADHD</td>
<td>Attention Deficit Hyperactivity Disorder</td>
</tr>
<tr>
<td>ATP</td>
<td>Adenosine Triphosphate</td>
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<td>BBB</td>
<td>Blood-Brain Barrier</td>
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<td>β-CIT</td>
<td>RTI-55, 2ß-Carbomethoxy-3ß-(4-iodophenyl)nortropane</td>
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<td>WIN 35,428, 2ß-Carbomethoxy-3ß-(4-fluorophenyl)nortropane</td>
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<td>BH₃</td>
<td>Borane</td>
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<td>CNS</td>
<td>Central Nervous System</td>
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<td>COMT</td>
<td>Catecholamine-O-methyltransferase</td>
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<tr>
<td>cpm</td>
<td>Counts per minute</td>
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<td>CsA</td>
<td>Cyclosporin A</td>
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<td>CT</td>
<td>Computed Tomography</td>
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<td>Curie</td>
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<td>Abbreviation</td>
<td>Full Form</td>
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<tr>
<td>Da</td>
<td>Dalton</td>
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<td>DASB</td>
<td>3-Amino-4-(2-dimethylaminomethylphenyl-sulfanyl)benzonitrile</td>
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<td>DAT</td>
<td>Dopamine Transporter</td>
</tr>
<tr>
<td>DMF</td>
<td>Dimethylformamide</td>
</tr>
<tr>
<td>DMSO</td>
<td>Dimethylsulfoxide</td>
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<tr>
<td>DNA</td>
<td>Desoxyribonucleic Acid</td>
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<td>DOPA</td>
<td>Dihydroxyphenyl-alanine</td>
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<tr>
<td>ECD</td>
<td>Ethyl Cysteinate Diethylester</td>
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<td>EI</td>
<td>Electron Impact</td>
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<tr>
<td>ESI-MS</td>
<td>Electrospray Ionization Mass spectrum</td>
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<td>Et$_3$N</td>
<td>Triethylamine</td>
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<td>Eu(hfc)$_3$</td>
<td>Europium tris<a href="-">3-heptafluoropropylhydroxy methylene</a>-camphorate</td>
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<td>eV</td>
<td>Electron Volt</td>
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<td>2ß-Carbomethoxy-3ß-(4-chlorophenyl)-8-(2-fluoroethyl)nortropane</td>
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<td>Fluoromethylreboxetine</td>
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<td>FP-CIT</td>
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<td>FT-NMR</td>
<td>Fourier Transform NMR</td>
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<td>1-((4-Fluorophenyl)(phenyl)methoxy)ethyl)-4-(3-phenylpropyl)piperazine,</td>
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<td>GBR 12909</td>
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<tr>
<td>HCl</td>
<td>Hydrochloric Acid</td>
</tr>
<tr>
<td>HCOOH</td>
<td>Formic Acid</td>
</tr>
<tr>
<td>H$_2$O$_2$</td>
<td>Hydrogen Peroxide</td>
</tr>
<tr>
<td>HPLC</td>
<td>High Performance Liquid Chromatography</td>
</tr>
<tr>
<td>IBZM</td>
<td>Iodobenzamide</td>
</tr>
<tr>
<td>ID</td>
<td>Injected Dose</td>
</tr>
<tr>
<td>IPBM</td>
<td>2-{\alpha-(2-Iodophenoxy)benzyl}morpholine</td>
</tr>
<tr>
<td>i.v.</td>
<td>Intravenously</td>
</tr>
<tr>
<td>$J$</td>
<td>Coupling Constant</td>
</tr>
<tr>
<td>kb</td>
<td>Kilobase</td>
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<tr>
<td>K$_3$EDTA</td>
<td>Tripotassium Ethylenediaminetetraacetate</td>
</tr>
<tr>
<td>MAO</td>
<td>Monoamine Oxidase</td>
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<td>MC80</td>
<td>6,7-Dimethoxy-2-(6-methoxy-naphthalen-2-ylmethyl)-1,2,3,4-tetrahydro-isoquinoline</td>
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<td>MeNER</td>
<td>Methylreboxetine</td>
</tr>
<tr>
<td>MeOH</td>
<td>Methanol</td>
</tr>
<tr>
<td>MHz</td>
<td>Megahertz</td>
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<tr>
<td>m.p.</td>
<td>Melting Point</td>
</tr>
<tr>
<td>MPP*</td>
<td>1-Methyl-4-phenylpyridinium</td>
</tr>
<tr>
<td>MPTP</td>
<td>1-Methyl-4-phenyl-1, 2, 3, 6-tetrahydropyridine</td>
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<td>MRI</td>
<td>Magnetic Resonance Imaging</td>
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<tr>
<td>MW</td>
<td>Molecular Weight</td>
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<tbody>
<tr>
<td>NaH</td>
<td>Sodium Hydride</td>
</tr>
<tr>
<td>NaHCO₃</td>
<td>Sodium Bicarbonate</td>
</tr>
<tr>
<td>NaI</td>
<td>Sodium Iodide</td>
</tr>
<tr>
<td>NaI(Tl)</td>
<td>Sodium Iodide doped with Thallium</td>
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<tr>
<td>NaOH</td>
<td>Sodium Hydroxide</td>
</tr>
<tr>
<td>Na₂SO₄</td>
<td>Sodium Sulfate</td>
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<tr>
<td>NBD</td>
<td>Nucleotide Binding Domain</td>
</tr>
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<td>n.c.a.</td>
<td>No Carrier Added</td>
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<td>NET</td>
<td>Norepinephrine Transporter</td>
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<td>NH₄OH</td>
<td>Ammonium Hydroxide</td>
</tr>
<tr>
<td>NMR</td>
<td>Nuclear Magnetic Resonance</td>
</tr>
<tr>
<td>NMRI</td>
<td>Naval Medical Research Institute</td>
</tr>
<tr>
<td>PBS</td>
<td>Phosphate Buffered Saline</td>
</tr>
<tr>
<td>PD</td>
<td>Parkinson’s Disease</td>
</tr>
<tr>
<td>PE2I</td>
<td>(N-(3\text{-i}odopro-2\text{-en}y)l)-2\beta\text{-car}bomethoxy-3\beta-(4\text{-m}ethylphenyl)nortropane)</td>
</tr>
<tr>
<td>PET</td>
<td>Positron Emission Tomography</td>
</tr>
<tr>
<td>P-gp</td>
<td>Permeability-glycoprotein</td>
</tr>
<tr>
<td>p.i.</td>
<td>Post Injection</td>
</tr>
<tr>
<td>ppm</td>
<td>Parts per Million</td>
</tr>
<tr>
<td>ROI</td>
<td>Region of Interest</td>
</tr>
<tr>
<td>RP-HPLC</td>
<td>Reversed Phase-HPLC</td>
</tr>
<tr>
<td>RS 2315</td>
<td>(N\text{-phenethyl-1}\text{H-pyrrole-2-carboxamide})</td>
</tr>
<tr>
<td>RS 2360</td>
<td>((R)-N\text{-}(1\text{-cyclohexylethyl-1}\text{H-pyrrole-2-carboxamide})</td>
</tr>
<tr>
<td>RS 2115</td>
<td>(N\text{-phenethyl-1}\text{H-pyrrole-2-carboxamide})</td>
</tr>
<tr>
<td>RS 2226</td>
<td>((R)-N\text{-}(1\text{-cyclohexylethyl-1}\text{H-pyrrole-2-carboxamide})</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Definition</td>
</tr>
<tr>
<td>--------------</td>
<td>------------</td>
</tr>
<tr>
<td>SD</td>
<td>Standard Deviation</td>
</tr>
<tr>
<td>SERT</td>
<td>Serotonin Transporter</td>
</tr>
<tr>
<td>SPECT</td>
<td>Single Photon Emission Computed Tomography</td>
</tr>
<tr>
<td>T1/2</td>
<td>Half-life</td>
</tr>
<tr>
<td>Tr</td>
<td>Retention Time</td>
</tr>
<tr>
<td>TBAH</td>
<td>Tetrabutylammonium hydroxide</td>
</tr>
<tr>
<td>THF</td>
<td>Tetrahydrofuran</td>
</tr>
<tr>
<td>TLC</td>
<td>Thin Layer Chromatography</td>
</tr>
<tr>
<td>TMD</td>
<td>Transmembrane Domain</td>
</tr>
<tr>
<td>TMS</td>
<td>Trimethylsilane</td>
</tr>
<tr>
<td>UV</td>
<td>Ultraviolet</td>
</tr>
<tr>
<td>VOI</td>
<td>Volumes of Interest</td>
</tr>
<tr>
<td>WAY100635</td>
<td>(N)-(2-[4-(2-methoxyphenyl)-1-piperaziny]ethyl)-(N)-(2-pyridyl)cyclohexanecarboxamide</td>
</tr>
<tr>
<td>(\delta)</td>
<td>Chemical Shift</td>
</tr>
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</table>
Thesis Outline

***
Neuroimaging has provided the means to elucidate healthy physiological processes in human beings along with the causes and consequences of neurological and psychiatric disorders. The use of suitable radiopharmaceuticals assists clinicians in the diagnosis and care of patients with brain disorders. The human brain consists of millions of inter-communicating neurons. Mental processes are driven by the complex interplay of neurotransmitter systems and their disruption underlies many diseases of the central nervous system. A prerequisite of efficient drug treatment of diseases of the central nervous system is that sufficient amounts of the drug enter the brain. An important factor determining this bioavailability is the capability to accumulate in the brain. Active transport by P-glycoprotein (P-gp) from the brain back into the bloodstream has a major impact on drug resistance to psychotropic drugs.

In this thesis we aimed to develop radiotracers for targets of the dopamine and norepinephrine system that causes neurotransmitter inactivation being the norepinephrine transporter, the dopamine transporter and monoamine oxidase. By the discovery that one of the designed radiotracers is modulated by P-gp, the focus of this thesis was redirected towards imaging of P-gp function and expression.

Chapter 1 gives a short overview of the medical imaging techniques and describes the requirements of a valuable radiopharmaceutical for SPECT or PET imaging.

Chapter 2 discusses the blood-brain barrier and the transport of compounds across this barrier. One of the most important transport mechanisms limiting brain uptake of drugs, P-gp, is detailed in this chapter.
The dopamine and norepinephrine system and more specifically the dopamine transporter, the norepinephrine transporter and monoamine oxidase, are discussed in Chapter 3.

In Chapter 4 the general material and methods are described.

The lack of a valuable radiotracer for the norepinephrine transporter, leads us to the development of an iodinated reboxetine analogue, \(^{[123\text{I}]}(\delta,\delta)-\text{IPBM}\), to visualize this transporter. Chapter 5 reports the synthesis, radiosynthesis and preliminary evaluation of \(^{[123\text{I}]}(\delta,\delta)-\text{IPBM}\).

In Chapter 6 the radiolabelling as well as the \textit{in vivo} characterization of two \(^{[11\text{C}]}\)-labelled pyrrole-2-carboxamide derivatives, \(^{[11\text{C}]}\)-RS 2315 and \(^{[11\text{C}]}\)-RS 2360, are described. \textit{In vitro}, RS 2315 and RS 2360 were both potent inhibitors of monoamine oxidase-A. The search for new ligands for MAO-A with optimal kinetic properties is justified by the lack of an ideal ligand and the observation that fluctuations in MAO-A functionality are associated with human diseases and tobacco addiction.

The synthesis along with the radiolabelling and \textit{in vivo} evaluation of \(^{[123\text{I}]}\)-FMIP as a selective radiotracer for the dopamine transporter is reported in Chapter 7. FMIP has nanomolar affinity for the dopamine transporter and better selectivity over the other monoamine transporters compared to the already existing ligands for dopamine transporter imaging with SPECT.

The contribution of P-gp to the low brain uptake of \(^{[123\text{I}]}\)-FMIP along with its potential as P-gp imaging agent are investigated in Chapter 8. To date, no iodinated SPECT ligands for P-gp imaging have been published.

Finally, Chapter 9 describes the radiolabelling of an \textit{in vitro} characterized substrate (MC80) of the P-gp pump with \(^{11\text{C}}\)C and the evaluation of this tracer \textit{in vivo} for its potential to image P-gp function or expression.
Chapter 1

General Introduction
Chapter 1

General Introduction

1.1. Medical imaging

1.1.1. HISTORICAL BACKGROUND

The first known method for medical imaging made use of X-rays and has been discovered in 1895 by Wilhelm Röntgen. Nowadays there exist different imaging techniques that can be divided into two categories: structural and functional imaging.

Structural imaging is primarily aimed at anatomical localisation of pathological processes. Besides X-rays, computed tomography (CT) and magnetic resonance imaging (MRI) are the most important ones. Due to their short wavelength, X-rays penetrate through most tissues depending on the density of the tissue. The detection of X-rays on a photographic plate, providing an image that is in accordance with the density of the tissues. This makes them especially useful in the detection of pathology of the skeletal system. To a lesser extent, they are also used for identifying some disease processes in soft tissue. Imaging alternatives for soft tissues are CT and MRI. CT has been developed in 1967 and is still the gold standard in the diagnosis of a large number of different disease entities. CT also uses X-rays but here, the X-ray source rotates around the patient, resulting in a high quality three dimensional image (resolution of 1 mm). MRI has been discovered a few years later than CT and is not only used for structural but also for functional imaging. MRI technology is based on nuclear magnetic resonance (NMR). The advantaged of MRI is that it provides high contrast images between
the different types of soft tissues within the body without exposing subjects to ionizing radiation.

Functional imaging is, rather than anatomical imaging, focussed on physiological processes like metabolism, blood flow, receptor binding, etc. The pivotal functional imaging techniques, Positron Emission Tomography (PET) and Single Photon Emission Computed Tomography (SPECT), belong to the domain of nuclear medicine. Widespread clinical use of nuclear medicine began in the early 1950's. Unlike the use of X-rays and CT where radiation is passed through the body, nuclear imaging modalities detect the radiation emitted by the human body after administration of radiopharmaceuticals. This provides very accurate images of the area of the body being investigated. Depending on the radiopharmaceutical used, information about certain biological changes or processes is gathered, leading to knowledge or diagnosis of diseases (For review see Guy, 1996; Wolbarst and Hendee, 2006).

1.1.2. PET

PET is a non-invasive imaging method used to study physiological, biochemical and pharmacological processes in the human body. PET utilizes positron ($\beta^+$) emitting isotopes. Positrons are particles with an equal mass as electrons, but with a positive charge. The positron travels a short distance in tissue until it interacts with an electron, in a process called annihilation. The total mass of positron and electron is converted into electromagnetic energy, producing two photons of 511 keV emitted under an angle of 180° (Wong and Brasic, 2001; Lewellen, 2008). A PET scanner contains a set of detectors arranged in a ring surrounding the object to be imaged (Figure 1.1). The pair of photons produced from a single annihilation will be detected almost simultaneously on opposing pairs of scintillation detectors as a coincidence event. The rings of scintillation detectors register thousand of coincidence events emitted from the subject and convert them into an electrical signal that can be registered. The acquired emission data
are then converted into a tomographic image via computerised reconstruction algorithms. Theoretically, PET has a resolution of 2 - 4 mm (Wong and Brasic, 2001; Lewellen, 2008; Ganguly et al., 2009).

Figure 1.1 Principle of PET camera

Radionuclides commonly used in PET are $^{18}$F ($T_{1/2} \approx 110$ min), $^{11}$C ($T_{1/2} \approx 20.4$ min), and $^{15}$O ($T_{1/2} \approx 2$ min). The stable counterparts of $^{11}$C and $^{15}$O are the building blocks of all living matter which makes it possible to incorporate them into the molecules of interest without changing their pharmacological or physiological properties. On the other hand, the presence of an on-site cyclotron is required to produce the radionuclides with relative short half-lives, immediately prior to use (Wong and Brasic, 2001).

1.1.3. SPECT

The origin of SPECT can be found in the groundbreaking experiments on emission tomography performed approximately 50 years ago (Kuhl and Edwards, 1963). SPECT is used to gain information on physiological parameters or certain biological processes based on the in vivo distribution of the radioactivity,
measured by external mapping of the location and density of the emitted photons. SPECT cameras detect single photons and consist of a collimator, one or more scintillation crystals and photomultiplier tubes (Figure 1.2). The properties of these three parts determine the sensitivity and spatial resolution of the SPECT camera. The use of a collimator restricts the flow of photons to only those that reach the detector in a ninety degree angle, allowing localisation of the radionuclide. Thereafter, the scintillation crystal absorbs the energy from the photons and converts it to visible light which can be detected by the photomultiplier tubes. A sodium iodide crystal, doped with thallium (NaI(Tl)) is commonly used as the scintillator in SPECT imaging. Subsequently, the photomultiplier tubes convert these light photons into an electrical charge which is then amplified to a detectable level. Three dimensional tomographic images in the coronal, horizontal and sagittal planes are reconstructed by computer software programs from the data collected (Ruth, 2009).

![Figure 1.2 Schematic view of a SPECT camera](image)

Two- and triple-head rotating cameras have been developed resulting in improved sensitivity and higher spatial resolution. Workable resolution is about 6
mm, which is low compared to PET cameras. Because a PET camera only detects the coincidence events, there is no need for a collimator, improving the sensitivity and resolution of the PET camera.

The ideal radionuclide for SPECT imaging possesses a relative short half-life and emits photons in high abundance and with sufficient energy to penetrate the body without undesirable scatter or attenuation. $^{99m}\text{Tc}$ ($T_{1/2} \approx 6\text{ h}$, 140.5 keV) is the best and least expensive radionuclide but its metallic characteristics make it difficult to work with. Another commonly used isotope is $^{123}\text{I}$ ($T_{1/2} \approx 13.2\text{ h}$, 159 keV). SPECT radionuclides are not commonly found in nature which makes it difficult to incorporate them into biological active molecules without changing the physiological properties of the molecule (Kung, 1991).

1.1.4. SMALL ANIMAL IMAGING

Small animal imaging requires, due to the size of the subjects involved, higher spatial resolution than most clinical systems can provide. This has led to the development of µSPECT and µPET (Peremans et al., 2005). To achieve a higher spatial resolution, scanners must use higher-resolution detectors and obtain finer spatial sampling while maintaining the sensitivity as high as possible (Sossi and Ruth, 2004; Rowland et al., 2008).

Preclinical µSPECT mainly use pinhole collimation achieving spatial resolution of 0.5 to 2 mm. The major limitation of pinhole µSPECT is the reduced field of view and subsequently the reduced sensitivity. By setting up additional pinholes and focusing them on different regions, it is possible to increase the field of view, improve the sensitivity, and obtain high spatial resolution when using sufficiently small pinhole diameters (Beekman et al., 2005; Rowland et al., 2008; Vanhove et al., 2008).

Enhancement of preclinical PET is mainly focused on improved photon detection material. Compared to the commonly used detection material NaI(Tl), Lutetium Orthosilicate has a high density and high light yield. This allows
reduction in the size of individual crystals and thus leads to higher spatial resolutions while maintaining the same sensitivity (Ruth, 2009). As well as the hardware improvement, development of software that provides more accurate data quantification and image reconstruction contributes to the successful application of preclinical PET and SPECT (Sossi and Ruth, 2004; Rowland et al., 2008).

1.2. Neuroimaging

The human brain is a complex organ, consisting of millions of intercommunicating neurons. Due to the complexity of the central nervous system (CNS) our knowledge about CNS disorders is still limited. The understanding of biochemical abnormalities relating to disease and disease processes is pivotal to the future development of effective diagnosis, treatment and management of neurological and psychiatric illness. Since the development of suitable radioligands in the late 1970's, the use of non-invasive imaging modalities (PET and SPECT) is a valuable tool for \textit{in vivo} brain mapping and drug development in the future (Wong and Brasic, 2001; Gee, 2003).

1.2.1. RADIOPHARMACEUTICALS

Radiopharmaceuticals can be divided into two categories being: diagnostic and therapeutic radiopharmaceuticals. For the preparation of radiopharmaceuticals, a radionuclide is coupled to a drug with a certain target in the human body. In this thesis, only radiopharmaceuticals for brain imaging will be discussed. The development of new and improved radiopharmaceuticals is a research field that is actively explored. To obtain a new, valuable radiopharmaceutical, some critical points have to be considered during the radiotracer development (Kung, 1991). First, a possible interesting radiotracer must be selected out of the thousand molecules designed by chemists; preferentially, a molecule with high \textit{in vitro}
affinity ($K_d$ in nanomolar range) and selectivity (at least more than 10) for its target. Subsequently, radiolabelling opportunities that do not alter the affinity and selectivity are required. Lipophilicity is another important parameter since it determines the ability of the molecule to cross the blood-brain barrier (BBB). The lipophilicity is often expressed by the log $D_{7.4}$, which is the logarithm of the partition coefficient between n-octanol and water at physiological pH. An ideal log $D_{7.4}$ should be between 1.5 and 3 (Waterhouse, 2003). A molecule that is too hydrophilic (log $D_{7.4} < 1.5$) will not pass the BBB by passive diffusion. Elevated values of log $D_{7.4}$ on the other hand, result in high nonspecific binding. The ability of the molecule to penetrate the BBB is not only determined by the partition coefficient. The molecular weight has to be lower than 650 g/mol, the molecule may not be charged and binding to plasma proteins must be reversible. The presence of multispecific xenobiotics transporters at the BBB can cause efflux of the molecule out of the brain. Consequently, a lower brain uptake than expected from its lipophilicity is observed. P-glycoprotein is an example of such a transporter (For review see Stöcklin, 1992; Elsinga, 2002).

When preparing radiopharmaceuticals, the chemical, radiochemical and radionuclidic purity are of great importance. This implies that the tracer solution has to be free of unlabelled and labelled impurities and undesirable radionuclides. Further is the specific activity, expressed as the amount of radioactive molecules over the total mass of those molecules present in the tracer solution, also of critical importance. Specific activity is usually formulated as GBq/µmol or Ci/µmol. As most radiotracers for brain imaging are injected intravenously, special requirements including pH, isotonicity, sterility and apyrogenicity are necessary.

When all the mentioned requirements are fulfilled, the radiopharmaceutical can be evaluated in vivo. It is important that the administrated radiotracer is highly distributed to the organ of interest resulting in a high target to non-target ratio. The radiotracer must interact with the system in a known and reproducible fashion. Rapid metabolism of the radiopharmaceutical is undesirable when the
specific binding of the radiopharmaceutical to its target must be detected. Radiolabelled metabolites can bind to other molecules or take part in unknown biochemical processes and result in nonspecific accumulation of radioactivity. The presence of radiometabolites in plasma that cannot cross the BBB does not disturb the signal to noise ratio (Elsinga, 2002; Stöcklin, 1992).

1.2.2. NEUROIMAGING WITH PET AND SPECT

The ability of SPECT and PET to image specific biomolecules in the living brain provides a unique tool for clinical researchers. Given this, it is not surprising that over the last decade a large number of radiotracers have been developed to image and quantify the various neurotransmitter systems. As mentioned before, development of a suitable radioligand is fraught with problems and there are many compounds reported in the development phase that never reached the end point of \textit{in vivo} use in man.

Some radiopharmaceuticals successful in clinical SPECT studies are \[^{99m}\text{Tc}]\text{ECD} \text{ (tracer for cerebral blood flow), } \[^{123}\text{I}]\text{IBZM} \text{ (dopamine D2 receptor tracer), } \[^{123}\text{I}]\text{ADAM} \text{ (serotonin transporter tracer) and the dopamine transporter tracer } \[^{123}\text{I}]\text{FP-CIT} \text{ (for review see Camargo, 2001; Zipursky et al., 2007; Sharma and Ebadi, 2008).}

The most important clinically used PET brain tracers are \[^{18}\text{F}]\text{DOPA, } \[^{11}\text{C}]\text{raclopride (dopamine D2 receptor tracer), } \[^{11}\text{C}]\text{DASB (serotonin transporter tracer), and the serotonin 5-HT}_{1A} \text{ receptor tracer } \[^{11}\text{C}]\text{WAY100635 (For Review see Fowler et al., 2003; Shiue and Welch, 2004; Zipursky et al., 2007).}

1.3. References


General Introduction – Chapter 1

Chapter 2

Blood-brain barrier transport

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Chapter 2

Blood-brain barrier transport

2.1. The blood-brain barrier

2.1.1. GENERAL

The brain is a very delicate organ and homeostasis in the neural microenvironment is essential for the perfect functioning of the brain. Therefore, the brain must be protected against metabolic fluctuations in blood composition. However, at the same time contact with blood must be maintained for nutrient supply and waste disposal. This complex task is accomplished by the blood-brain barrier (BBB) (Aigner et al., 1997). The existence of such a barrier between blood and brain was first demonstrated by Ehrlich (1885). At the end of the 1960’s, the tight junctions and the fine structural localization of the BBB were discovered (Reese and Karnovsky 1967; Brightman and Reese 1969).

The BBB is not the only barrier that limits drug transport to the brain parenchyma. There are two more barriers described: 1) blood-cerebrospinal-fluid barrier (presented by the choroid plexus epithelium in the ventricles) and 2) the ependyma (epithelial layer of cells covering the brain tissue in the ventricles and limiting the transport of compounds from the cerebrospinal-fluid to the brain tissue). Based on total blood flow and its wide vascular bed, the BBB is functionally the most important global influx barrier. The human BBB has a total blood vessel length of approximately 600 km with an estimated surface of 20 m² (Pardridge 2002; de Boer and Gaillard 2007).
Brain capillary endothelial cells, pericytes, astrocytes and neuronal cells (Figure 2.1) compose the BBB (Rubin and Staddon 1999; Ballabh et al., 2004; de Boer and Gaillard 2007). Brain capillary endothelial cells are distinguished from peripheral endothelial cells. Their specific characteristics such as tight junctions prevent paracellular transport of compounds from blood to the brain. Furthermore, low vesicular transport, high metabolic activity and lack of fenestrations prevent transcellular transport of xenobiotics to the brain. These specific features are induced and maintained by the astrocytes as well as by the neuronal endings. This barrier is very efficient and makes the brain practically inaccessible for lipid-insoluble compounds and large molecules. As a consequence, the therapeutic value of many promising drugs is diminished and cerebral diseases proved to be most refractory to therapeutic interventions. Given the prevalence of brain diseases, this is a considerable problem (Oldendorf 1977; Brightman 1977; Aigner 1997; Bodor and Buchwald 1999).

2.1.2. INFLUX IN THE BRAIN

Invasive drug delivery and drug delivery based on BBB transport are the two strategies used to bring molecules into the brain. The invasive strategy is rarely applied and will therefore not be discussed in this thesis (For review see Pardridge 1997; 2002; 2007). The non-invasive strategy can be divided into two
main drug transport possibilities across the BBB: passive diffusion and active transport systems.

Passive diffusion of substances through the BBB depends on molecular weight, lipophilicity and intermolecular forces (Levin 1980; Pardridge 1998; Bodor and Buchwald 1999; Habgood et al., 2000). There is a molecular weight threshold of approximately 650 g/mol with respect to drug penetration through the BBB. The more lipid-soluble a drug, the more easily it will move from the polar environment of the blood across the nonpolar BBB. Lipophilicity can be measured by the partition coefficient between octanol and water. The intermolecular forces are determined by the functional groups of the molecule. Measurement of the surface activity, which takes into account the hydrogen binding capabilities and the hydrophobic properties, can predict the ability of substances to passively diffuse through the BBB (Pardridge 1998).

Active transport systems can be divided into absorptive-, carrier- or receptor-mediated transport. Absorptive-mediated transcytosis is initiated by the binding of cationic substances to negative charges on the plasma membrane. This process does not involve specific plasma membrane receptors. Upon binding of the cationic compound to the plasma membrane, endocytosis occurs (de Boer et al., 2003). The carrier-mediated transport is used for blood-to-brain transport of nutrients and vitamins. At least eight different nutrient transport systems have been identified, with each transporting a group of nutrients of the same chemical structure. A tool for enhancing BBB transport of drugs is to modify the drugs structurally to mimic the endogenous nutrients (For review see Pardridge 2002; 2007). Receptor-mediated transport enables larger endogenous molecules, such as peptides, proteins and genes to specifically enter the brain. Conjugation of exogenous molecules such as recombinant proteins and antisense agents to brain transport vectors makes it possible to deliver them to the brain. The brain transport vector is comprised of endogenous peptides or peptidomimetic
monoclonal antibodies that undergo receptor-mediated transport (For Review see Pardridge 1999; 2002; 2007; de Boer and Gaillard 2007).

2.1.3. **EFFLUX OUT OF THE BRAIN**

To maintain homeostasis of the brain, the BBB combines restricted entering of endogenous and exogenous compounds to the brain with specialized transport mechanisms for efflux of these compounds out of the brain. These multispecific xenobiotic transporters are conventionally grouped into families based on molecular and functional similarities. Several different drug transporter families have been identified, including the organic anion transporter, multidrug resistance-associated protein, multidrug resistance protein, organic anion transporting polypeptide, organic cation transporter, concentrative nucleoside transporter and equilibrative nucleoside transporter subfamilies (Zhang et al., 2004; Huai-Yun et al., 1998; Bauer et al., 2005; Kim, 2005). The first described drug efflux transporter was P-glycoprotein (P-gp), followed by several members of the multidrug resistance-associated protein family and more recently breast cancer related protein (For review see Taylor 2002; de Boer 2003; Bauer et al., 2005; Löscher and Potschka 2005; Dallas et al., 2006). To date, P-gp is the best known and most important drug efflux pump.

2.2. **P-glycoprotein**

2.2.1. **HISTORICAL BACKGROUND**

The ATP-binding cassette (ABC) family of transport proteins represents one of the largest families of proteins in living organisms. Its members have been found in each kind of organism examined so far. These transporters mediate drug absorption, distribution and excretion and therefore play a central role in cellular physiology (Ayrton and Morgan 2001). It is difficult to characterize a
physiological system in dept without identifying a role for an ABC transporter. Over the last 15 years, there has been a significant increase in the molecular characterization of transport proteins in animals and man. There are seven known distinct subfamilies of ABC transporters, designated A - G. P-gp, the most important transporter, belongs to the ABCB subfamily (For review see Klein et al., 1999; Dean et al., 2001; Schinkel and Jonker 2003; Sun et al., 2003). P-gp is the most extensively studied mammalian ABC transporter and is often regarded as the prototype for understanding the biochemical mechanisms. In 1976, Juliano and Ling identified this efflux pump. Because the glycoprotein they found appeared to be unique to mutant cells that displayed altered drug permeability, they named it permeability-glycoprotein (P-glycoprotein or P-gp). The discovery of P-gp was groundbreaking because it explained multidrug resistance, a frequently observed phenomenon in tumours (Juliano and Ling, 1976). In 1989, two independent research groups found expression of P-gp at the human BBB (Cordon-Cardo et al., 1989; Thiebaut et al., 1989). P-gp is highly expressed at the luminal membrane of endothelial cells which is a perfect localization to protect the brain from xenobiotics (Biegel et al., 1995; Beaulieu et al., 1997). Therefore, P-gp is generally recognized to be the most important element of the selective, active BBB for efflux of xenobiotics and has been the main focus of BBB research over the last decade.

2.2.2. EXPRESSION, STRUCTURE AND FUNCTION

In humans, P-gp is encoded by two genes, MDR1 and MDR2. Only the MDR1 gene, located on chromosome 7q21, is responsible for the multidrug resistance. The closely related MDR2 gene, also called MDR3, is involved in intrahepatic cholestasis (Klein et al., 1999). In contrast to humans, mice have three genes encoding P-gp: mdr1a (also called mdr3), mdr1b (also called mdr1) and mdr2. As in humans, the mdr2 gene does not contribute to multidrug resistance. The tissue distribution of mdr1a and mdr1b differ from each other, but together these
proteins cover the same areas as the single MDR1 P-gp in humans. This suggests that mouse mdr1a and mdr1b together fulfil the same physiological role(s) as MDR1 in human (Croop et al., 1989; Chen et al., 1986; van der Blikt et al., 1988; Hsu et al., 1989; Gros et al., 1986; Devault and Gros 1990).

![Glycosylation sites](image)

**Figure 2.2** Predicted Secondary structure of P-gp (Schinkel et al., 1999)

TMB = transmembrane domain; NBD = nucleotide binding domain

The MDR1 gene product (Figure 2.2) is a 170 kDa transmembrane protein that consists of 1280 amino acids. It is organized as a single polypeptide consisting of two similar halves; a carboxy and an amino halve (Dey et al., 1997). Each part consists of a transmembrane domain containing six helices and an intracellular ATP-binding site also known as nucleotide binding domain (NBD). Intracellular and extracellular loops connect the transmembrane segments with the first extracellular loop being highly N-glycosylated. The NBD contains three conserved domains among the ABC transporters: walker A and B domains and a signature motif (C). The NBD binds and hydrolyzes ATP which provides the energy for active drug export that can occur against a large concentration gradient. Binding of substrates occur at the transmembrane domains (Gottesman et al., 1996; Sauna and Ambudkar, 2001; Higgins and Linton 2004; For review see Endicott and Ling 1989; Gottesman and Pastan, 1993; Bosch and Croop 1998; Gottesman and Ambudkar 2001; Ambudkar et al., 2005).
**Table 2.1** mRNA expression of P-gp (adapted from Croop et al., 1989; Schinkel et al., 1999)

<table>
<thead>
<tr>
<th>Tissue</th>
<th>MDR1 (human)</th>
<th>mdr1a (mouse)</th>
<th>mdr1b (mouse)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stomach</td>
<td>+</td>
<td>-</td>
<td>+</td>
</tr>
<tr>
<td>Intestines</td>
<td>++ +</td>
<td>++ +</td>
<td>+</td>
</tr>
<tr>
<td>Liver</td>
<td>++ +</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Adrenal gland</td>
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<td>++ ++ +</td>
<td>+++ +</td>
</tr>
<tr>
<td>Ovary</td>
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</tr>
<tr>
<td>Testis</td>
<td>+</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Kidney</td>
<td>++ +</td>
<td>+</td>
<td>+ +</td>
</tr>
<tr>
<td>Uterus</td>
<td>+</td>
<td>(+)</td>
<td>+</td>
</tr>
<tr>
<td>Pregnant uterus</td>
<td>++</td>
<td>(+)</td>
<td>+++ +</td>
</tr>
<tr>
<td>Brain</td>
<td>++</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Skeletal muscle</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Heart</td>
<td>Data not available</td>
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<td>+</td>
</tr>
<tr>
<td>Lung</td>
<td>+</td>
<td>++</td>
<td>+</td>
</tr>
<tr>
<td>Spleen</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
</tbody>
</table>

The relative expression is indicated by +, and very low or undetectable levels with -

Apart from expression in the BBB, drug-transporting P-gp pumps are expressed in a range of other tissues (Table 2.1). The most prominent sites are the endometrium of the pregnant uterus, the apical surface of mucosal cells in the small and large intestines, the biliary canalicular membrane of hepatocytes and the luminal membrane of proximal tubular epithelial cells in the kidney. High levels are also located in the adrenal glands of mice and humans. This tissue distribution suggests that P-gp plays a role in excreting toxic xenobiotics and metabolites into intestinal lumen, bile and urine, respectively (Figure 2.3). In addition, moderate levels were found in a range of other tissues (Thiebaut et al., 1987; Croop et al., 1988; Cordon-Cardo et al., 1989).
2.2.3. PHYSIOLOGICAL ROLE OF P-GP

Firm evidence for the purpose of P-gp came from studies in which mdr1 genes were inactivated by insertional mutagenesis (For review see Borst and Ambudkar, 1996; Ambudkar et al., 1999; Schinkel, 1999). The physiological function of P-gp at the BBB is to protect the brain from potentially harmful substances by exporting these substances out of the brain. Intestinal P-gp is an important factor in limiting the entry of substrate drugs from the intestinal lumen to the bloodstream. Therefore it can have a major negative effect on the oral bioavailability of drugs. Intestinal P-gp can further contribute to the direct excretion of drugs from the bloodstream into the intestinal lumen. The bile canalicular P-gp contributes to the hepatobiliary excretion of drugs. Together these effects can result in a markedly slower elimination of drugs from the bloodstream and in a clear shift from primarily fecal to primarily urinary excretion of some drugs. Expression of P-gp in the placenta suggests a role for P-gp in protecting the foetus from toxic xenobiotics. Because of its localization in steroid-secreting glands, P-gp might be involved in secretion of steroids, or in protecting the plasma membranes of steroid-secreting cells from the toxic effects.
of high steroid concentration (Schinkel 1997; Ambudkar et al., 1999; Schinkel 1999; Tanigawara 2000). Taking together, the physiological function of P-gp is the protection of the cells and organism against toxic compounds.

Since the finding that resistance to anticancer drugs in human cancers is due to the expression of the P-gp transporter (Chen et al., 1986) it has become clear that P-gp also has a major impact on drug resistance to psychotropic drugs like anti-epileptics (Löscher and Potschka, 2001; Luna-Tortós et al., 2008), anti-HIV drugs (Kim et al., 1998; Huisman et al., 2000), antidepressants and others (Schinkel et al., 1996; Wang et al 2003; Linnet and Ejsing, 2008; Schinkel and Jonker 2003).

The degree of expression and the functionality of the MDR1 gene product can directly affect the distribution, absorption and elimination of P-gp substrates. Consequently, variations in the expression levels and activity of P-gp have a major impact on the therapeutic efficacy of many drugs. This implicates that absorption of drugs is variable among individuals (Kim et al., 2001; Ambudkar et al., 2003; Ebinger et al., 2006; Brinkmann et al., 2001). Currently, more than 100 mutations in the human P-gp gene have been identified (Maeda et al., 2008). Some of these polymorphisms are directly related to human diseases such as epilepsy (Löscher 2007; Kwan and Brodie 2005; Siddiqui et al., 2003), Parkinson disease (Kortekaas et al., 2005), Alzheimer disease (Lam et al., 2001; Vogelgesang et al., 2002) and others (Turgut et al., 2008; Langford et al., 2004; Löscher and Potschka 2005).

2.3. Modulation of P-gp

2.3.1. SUBSTRATES

P-gp recognizes and transports a structurally, chemically and pharmacologically diverse range of compounds with molecular weights between 200 Da and 1900
Da. Drugs that are found to be substrate for P-gp include anthracyclines (daunorubicin), vinca alkaloids (vincristine), calcium channel blockers (verapamil), anti-emetics (domperidone), the immunosuppressivum Cyclosporin A (CsA) and so on (Table 2.2) (Bauer et al., 2005; Linnet and Ejsing, 2007).

Table 2.2 Examples of drugs transported by P-gp

<table>
<thead>
<tr>
<th>Cardiovascular medication</th>
<th>Cytotoxic agents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verapamil</td>
<td>Doxorubicin</td>
</tr>
<tr>
<td>Diltiazem</td>
<td>Daunorubicin</td>
</tr>
<tr>
<td>Digoxin</td>
<td>Paclitaxel</td>
</tr>
<tr>
<td>Carvedilol</td>
<td>Opioids</td>
</tr>
<tr>
<td>Lovastatin</td>
<td>Morphine-6-glucuronide</td>
</tr>
<tr>
<td><strong>Anti-emetics</strong></td>
<td></td>
</tr>
<tr>
<td>Domperidone</td>
<td>Phentanyln</td>
</tr>
<tr>
<td>Ondansetron</td>
<td>Loperamide</td>
</tr>
<tr>
<td><strong>HIV protease inhibitors</strong></td>
<td></td>
</tr>
<tr>
<td>AZT</td>
<td>Antibiotics</td>
</tr>
<tr>
<td>Ritonavir</td>
<td>Erythromycin</td>
</tr>
<tr>
<td>Saquinavir</td>
<td>Rifampicin</td>
</tr>
<tr>
<td><strong>Others</strong></td>
<td></td>
</tr>
<tr>
<td>Dexamethasone (glucocorticoid)</td>
<td></td>
</tr>
<tr>
<td><strong>Immunosuppressive drugs</strong></td>
<td></td>
</tr>
<tr>
<td>Cyclosporin A</td>
<td>Doxorubicin (antineoplastic)</td>
</tr>
<tr>
<td>Tacrolimus</td>
<td>Midazolam (benzodiazepine)</td>
</tr>
<tr>
<td></td>
<td>Ivermectin (antihelmintic)</td>
</tr>
</tbody>
</table>

The mechanism by which P-gp recognizes this wide range of substrates is less clear at the moment (Schinkel et al., 1996; Tanigawara, 2000; Bart et al., 2000; Linnet and Ejsing, 2008). Given the potential of P-gp to affect bioavailability and tissue distribution, particularly CNS drug distribution, it would be very useful to understand the structural features that make a compound a substrate or inhibitor of P-gp. However, specific structure-activity models of a P-gp pharmacophore have proven to be difficult to develop. A general pharmacophore with two or three electron donor groups in a fixed spatial separation has been suggested by Seelig et al. (1998). It has also been proposed that a planar aromatic domain and the presence of a basic nitrogen atom are features of substrates but drugs lacking these features could also be transported (Sun et al., 2003). The only common
denominator for all P-gp substrates is their amphipatic nature (Schinkel et al., 2003). Partitioning into the lipid membrane is the rate-limiting step for the interaction of a substrate with P-gp. Dissociation of the P-gp-substrate complex is determined by the number and strength of the hydrogen bonds formed between the substrate and the transporter. If two substrates are applied simultaneously to P-gp, the compound with the highest potential to form hydrogen bonds, generally act as an inhibitor (Seelig et al., 2000).

2.3.2. INHIBITORS

In view of the potential contribution of P-gp to the drug resistance observed during chemotherapy in a number of clinical tumors, there is a widespread interest in the use of so-called P-gp reversal or modulating agents. Co-administration of such blockers with conventional chemotherapy in cancer patients might reverse the P-gp-mediated multidrug resistance of the tumor, and thus enhance the response to therapy. Another therapeutic implication of these reversal agents is the enhancement of brain uptake of some drugs. This is favourable for therapy when the intended pharmacological target is positioned behind the BBB. Keeping in mind the protective role of P-gp at the BBB, P-gp modulators should be used carefully.

Because of the potentially important therapeutic implications of reversal agents, several P-gp blockers with high efficacy and low toxicity have been developed. Reversal agents are as diverse in structure as the previously identified transported drugs. In fact, many compounds initially identified as reversal agents turned out to be themselves transported by P-gp, which suggests that they inhibit transport of other compounds in a competitive manner (Schinkel 1997; Huisman et al., 2000; Varma et al., 2003).

Based on the specificity and affinity, P-gp inhibitors are classified into three generations. First-generation inhibitors are pharmacological actives, which are in clinical use for other indications but have shown to inhibit P-gp. These include
verapamil, CsA, reserpine and tamoxifen. The use of these compounds is limited by their side effects when administrated with a dose that is required to inhibit P-gp. Valspodar, biricodar and GF120918 are examples of second-generation modulators. They are analogues of the first-generation compounds but lack the pharmacological activity of the original molecule and possess usually a higher P-gp affinity. Despite their better pharmacological profile, these agents display lack of absolute selectivity thereby limiting their clinical use. Most of them are often inhibitors of other ABC transporters or cytochrome P<sub>450</sub>3A. Third-generation inhibitors are the most potent, highly selective P-gp modulators, having only little influence on cytochrome P<sub>450</sub>3A drug metabolism and showing only little interaction with chemotherapeutic agents. Members of this class are zosuquidar, tariquidar, laniquidar and ONT-093 (Tan et al., 2000; Varma et al., 2003; Fricker and Miller 2004; Nobili et al., 2006).

2.3.3. IMAGING OF P-GP

Non-invasive imaging of P-gp functionality or expression with PET or SPECT could have several applications. PET or SPECT could be applied to evaluate the efficacy of candidate modulators that have passed initial in vitro screening assays. It might also allow selection of the proper modulator and dosing schedule for the individual patient. Information on the dynamic transport of P-gp will avoid unnecessary treatment with modulators in those patients who will not benefit. Another interesting application could be the monitoring of P-gp functionality in psychiatric and neurological disorders which could implicate the efflux pump as a possible cause in these diseases. So far, several radioligands for PET and SPECT have been proposed among which [<sup>11</sup>C]verapamil, [<sup>11</sup>C]N-desmethyl-loperamide (Lazarova et al., 2008), [<sup>11</sup>C]loperamide (Zoghbi et al., 2007), [<sup>11</sup>C]colchicine (Levchenko et al., 2000), [<sup>11</sup>C]carvedilol (Elsinga et al., 2005) and [<sup>18</sup>F]MPPF (Lacan et al., 2008; Passchier et al., 2000) for PET and [<sup>99m</sup>Tc]sestamibi and [<sup>99m</sup>Tc]tetrofosmin (Ballinger et al., 1996) for SPECT (For review see Elsinga et
al., 2004; Elsinga et al., 2005; Vaidyanathan and Zalutsky, 2004) (Figure 2.4). Two of them, $[^{11}C]\text{verapamil}$ and $[^{99m}Tc]\text{sestamibi}$, have been used in clinical trials and will be discussed briefly.

![Chemical structures of tracers](image)

**Figure 2.4** Tracers evaluated for imaging P-gp

$[^{99m}Tc]\text{sestamibi}$ is a radiopharmaceutical used clinically to study myocardial perfusion (Mandalapu et al., 1999). It was demonstrated that $[^{99m}Tc]\text{sestamibi}$, a substrate for P-gp as well as for multidrug resistance protein 1, is especially useful for imaging P-gp expression in tumors rather than brain (Kostakoglu et al., 1996; Barbarics et al., 1998 for review see Hendrikse et al., 1999).

Differences in tissue concentrations of $[^{11}C]\text{verapamil}$ was demonstrated between mdr1a knock-out mice and wild type mice. The brain uptake of $[^{11}C]\text{verapamil}$ is
remarkably higher in mdr1a knock-out mice (9.5 fold) as well as after pretreatment with CsA (10.6 fold) indicating that \(^{[11C]}\)verapamil is effectively transported by P-gp at the BBB (Hendrikse et al., 1998). Evaluation of \(^{[11C]}\)verapamil for \textit{in vivo} imaging of P-gp functionality in non-human primates proved its usefulness as a tool for evaluating P-gp function (Lee et al., 2006). Nevertheless, metabolism of \(^{[11C]}\)verapamil makes the determination of a pharmacokinetic model, and so absolute quantification, more complex (Syvanen et al., 2008; Luurtsema et al., 2004).

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Chapter 3

Catecholamine system in the brain
Chapter 3

Catecholamine system in the brain

3.1. Catecholamine pathways in the brain

3.1.1. GENERAL INTRODUCTION

Catecholamines (dopamine, norepinephrine and epinephrine) are neurotransmitters named after their chemical structure. They contain a benzene ring with two hydroxyl groups (catechol) and a side chain of ethylamine or one of its derivatives. All catecholamines are synthesized starting from tyrosine, an amino acid synthesized out of phenylalanine or derived from food proteins. Tyrosine accumulates in neurons by an active transport mechanism. There, it is converted to dihydroxyphenyl-alanine (DOPA) by the enzyme tyrosine hydroxylase. L-DOPA is then decarboxylated to dopamine which is stored in vesicles in the nerve terminals (Weiner, 1970) where it can be further oxidized to norepinephrine using dopamine-ß-hydroxylase (Figure 3.1) (Goodall and Kirshner, 1958).

Both neurotransmitters are released in the synaps through a calcium-dependent process initiated by nerve impulse activity (Figure 3.1). The released neurotransmitters can now interact with dopamine and adrenoreceptors, respectively. Termination of the signal occurs by reuptake in the presynaptic neuron using the dopamine and norepinephrine transporter or by enzymatic degradation of the neurotransmitter using the enzymes monoamine oxidase (MAO) and catecholamine-O-methyltransferase (COMT). Reuptake is the main mechanism responsible for inactivation (Kanner and Schuldiner, 1987; Schmitz et al., 2003). The recycled neurotransmitter can be restored in vesicles by vesicular
monoamine transporters or further metabolized by MAO or COMT. Extravesicular dopamine is metabolized to dihydroxyphenylacetic acid whereas extracellular dopamine is degraded to homovanillic acid. 3-Methoxy-4-hydroxyphenylethylenglycol is the major metabolite formed by degradation of norepinephrine (Maas and Landis, 1968; Peyrin and Dalmaz, 1975; Eisenhofer and Fineberg, 1993; Kopin, 1994).

**Figure 3.1** Schematic representation of noradrenergic synaptic signalling 
(Klabunde, 2008)

\[
\text{DA} = \text{Dopamine}; \text{DD} = \text{DOPA decarboxylase}; \text{DOPA} = \text{dihydroxyphenyl-alanine}; \\
\text{DBH} = \text{dopamine-β-hydroxylase}; \text{NE} = \text{Norepinephrine}; \text{TH} = \text{tyrosine hydroxylase}; \\
\text{Tyr} = \text{tyrosine}
\]

The transporters responsible for inactivation of dopamine and norepinephrine as well as the enzyme MAO, will be further discussed.

### 3.1.2. NORADRENERGIC SYSTEM IN THE BRAIN

The major noradrenergic nucleus in the brain is the locus coeruleus. The locus coeruleus is the main source of the noradrenergic innervation in the hippocampus, thalamus, cerebellum as well as most cortical areas (Figure 3.2).
The lateral tegmental system, another group of noradrenergic cells, has its cells of origin located in discrete regions of the pons and medulla. These norepinephrine-containing cells innervates the hypothalamus and parts of the amygdale, but has also descending projections to the spinal cord (Nicholas et al., 1996; Aston-Jones, 2002).

![Noradrenergic pathways in the human brain (CNSforum.com)](image)

**Figure 3.2** Noradrenergic pathways in the human brain (CNSforum.com)

Norepinephrine is involved in mood regulation, sleep regulation, memory, expression of behaviour and the general degree of alertness and arousal (Aston-Jones, 2002; Murchison et al., 2004). The actions of norepinephrine are carried out via the binding to the adrenoreceptors, a class of G-protein coupled receptors. There are two main groups of adrenergic receptors, α and β, which are further divided into $\alpha_{1A}$, $\alpha_{1B}$, $\alpha_{1D}$, $\alpha_{2A}$, $\alpha_{2B}$, $\alpha_{2C}$ and $\beta_1$, $\beta_2$, $\beta_3$. All receptors are G-protein coupled receptors and are localized post- or presynaptic (Nicholas et al., 1996; Docherty, 1998).

### 3.1.3. DOPAMINERGIC SYSTEM IN THE BRAIN

The dopaminergic neurons are classified into four main pathways (Figure 3.3) (For review see Reid, 1977; Moore and Bloom, 1978; Marsden, 2006). The
nigrostriatal pathway projects from the substantia nigra to the dorsal striatum. This pathway contains about 80% of all dopaminergic innervations and is involved in the regulation of movements (Cousins and Salamone, 1996). The dopaminergic neurons involved in the mesolimbic and mesocortical pathways both originates in the ventral tegmental area. The mesolimbic pathway projects towards limbic areas such as nucleus accumbens and amygdale whereas the mesocortical pathway most densely projects to the prefrontal cortex. The mesolimbic system plays a role in emotional expression and motivation (Cabib et al., 1996). Memory, organization, attention and social behaviour are affected by the mesocortical pathway (Floresco and Magyar, 2006). Finally, the tuberoinfundibular pathway exists of a group of small neurons, signalling from the hypothalamus towards the pituitary gland. In this last pathway, dopamine inhibits prolactin release (Andrews and Grattan, 2004).

**Figure 3.3** Dopaminergic pathways in the human brain (Rang et al., 1999)

Ac = nucleus accumbens; Am = amygdaloid nucleus; C = cerebellum; Hip = hippocampus; Hyp = hypothalamus; P = pituitary gland; Sep = septum; Str = corpus striatum; Th = thalamus; N = substantia nigra

The actions of dopamine are mediated by binding to specific membrane receptors, which belongs to the family of seven transmembrane domain G-protein coupled receptors. Two types of dopamine receptors, termed D₁ and D₂
were originally distinguished based on their biochemical and pharmacological properties. The D$_1$-like family includes the D$_1$ and D$_3$ receptors while the D$_2$-like receptors are further divided into D$_2$, D$_3$ and D$_4$. The most common receptors, D$_1$ and D$_2$, are involved in regulation of behaviour and are localized in striatum (D$_1$ and D$_2$), cortical regions (D$_1$ and D$_2$), amygdale (D$_2$), hippocampus (D$_2$) and thalamus (D$_2$). Presynaptically localized D$_2$ receptors are involved in the regulation of the biosynthesis and the release of dopamine (Jackson and Westlind-Danielsson, 1994, Marsden, 2006).

3.2. Catecholamine transporters

3.2.1. GENERAL INTRODUCTION

Synaptic signalling is primarily terminated by active transport of the neurotransmitter in neuronal cells by neurotransmitter transporters. Once inside the neuronal cell, neurotransmitters can be further transported into synaptic vesicles by vesicular carriers. These processes are responsible for the homeostasis of neurotransmitter pools within nerve endings. Both at the plasma and vesicular membranes, neurotransmitter influxes are directly coupled to transmembrane ion gradients which provide the energy for the retrotransport (Kanner and Schuldiner, 1987).

Neurotransmitter transporters can be classified in superfamilies, families, and subfamilies according to their primary structure and site of action. In particular, the latter criterion allows the distinction of two superfamilies: the plasma membrane transporters and the vesicular membrane transporters. The superfamily of plasma membrane transporters can be further divided into two families depending on their ionic dependence: the Na$^+$/Cl$^-$-dependent transporters and the Na$^+$/K$^+$-dependent transporters. Based on their substrate preferences, the Na$^+$/Cl$^-$-dependent transporters are classified into subfamilies among which the amino acid transporters and monoamine transporters (Masson
et al., 1999; Zahniser and Doolen, 2001). This thesis focuses on the dopamine transporter (DAT) and norepinephrine transporter (NET), both members of the monoamine transporter subfamily. The serotonin transporter (SERT) is the third transporter belonging to the monoamine transporters.

3.2.2. HISTORICAL BACKGROUND

The presence of an active transport system for the cellular uptake of norepinephrine at sympathetic nerve endings was suggested by studies on the tissue uptake and retention of [3H]-labelled norepinephrine administered to animals (Whitby et al., 1961; Hertting et al., 1961). Regional differences within the brain for the uptake of dopamine and norepinephrine indicated the existence of a separate mechanism for the neuronal reuptake of dopamine. Striatal synaptosomes showed a much higher affinity for uptake of dopamine than norepinephrine, whereas in other brain regions, the difference was less pronounced. There were no stereoselective preferences for uptake of D- and L-isomers of norepinephrine in the striatum, whereas in other regions, the L-isomer was the preferred substrate. This observation suggested that norepinephrine uptake in the striatum is mediated by DAT whereas in other regions, NET was abundant (Snyder and Coyle, 1969; Coyle and Snyder, 1969).

3.2.3. STRUCTURE, FUNCTION AND MECHANISM

Up to date, no X-ray crystallographic or high-resolution structural information is available for the topological assignments of the transporters. The identification of the cDNAs for the catecholamine transporters has contributed greatly to our understanding of the molecular structure and function of these important proteins (Amara and Kuhar, 1993).

The polytopic membrane proteins, DAT and NET show high homology (66 %) and share several structural features (Figure 3.4). They are both composed of 12
transmembrane domains (TMD), several similarly configured intracellular and extracellular loops with phosphorylation and glycosylation sites, and intracellular located amino- and carboxy-terminal residue. One large extracellular loop is positioned between TMD 3 and TMD 4 and contains a variable number of N-glycosylation sites (Giros and Caron., 1993). The presence of several intracellular sites for phosphorylation, suggests that second messengers may regulate transporter function and/or subcellular redistribution. Phosphorylation can occur by several enzymes with protein kinase A and C and calcium-modulin kinase II as the most important ones. TMD 1, 2 and 4 - 8 show the highest degree of sequence identity between DAT and NET. The conservation of sequence in these membrane-spanning domains argues for their functional importance in transport activity. The carboxy-terminal region, spanning from TMD 9 through the carboxy-terminal tail, seems to be responsible for the observed stereoselectivity and high affinity for their respective substrates (Giros et al., 1994; Buck and Amara, 1994 and 1995; Brüss et al., 1995; Hersch et al., 1997; Zahniser and Doolen, 2001).

**Figure 3.4** Topology of catecholamine transporters (Torres et al., 2003)
The observation that extracellular Na\(^+\) ions were a necessary requirement for substrate uptake provided one of the first insights into the transport mechanism. It is now well established that the mechanism by which transporter proteins mediate catecholamine uptake involves sequential binding and co-transport of Na\(^+\) and Cl\(^-\) ions. The driven force for transporter-mediated catecholamine uptake is the ion concentration gradient that is created and maintained by the plasma membrane Na\(^+\)/K\(^+\) ATPase. In the case of DAT, two Na\(^+\) ions and one Cl\(^-\) ion are transported with the substrate, whereas NET co-transport its substrate with one Na\(^+\) ion and one Cl\(^-\) ion (Kanner and Schuldiner, 1987; Torres et al., 2003). A detailed description of the mechanism and regulation of transport is beyond the scope of this thesis but has extensively been discussed and reviewed by others (Rudnick and Clark, 1993; Sonders and Amara, 1996; Kavanaugh, 1998; Beckman and Quick, 1998; Torres, 2003; Meliaken, 2004; Blakely et al., 2005).

3.2.4. NOREPINEPHRINE TRANSPORTER

3.2.4.1. Structure and localization

Pacholzyk et al. (1991) identified the cDNA encoding for the human NET using an expression cloning strategy in COS cells. The NET cDNA was isolated from the SK-N-SH human neuroblastoma cell line on the basis of its ability to direct the transport of \(^{125}\text{I}\)-labelled meta-iodobenzylguanidine, a norepinephrine analogue. The sequence of the NET cDNA predicts a protein of 617 amino acids weighing approximately 69 kDa. The human NET gene (SLC6A2) is located on chromosome 16q12.2, spans about 45 kb and consists of 14 exons (Gelernter et al., 1993; Porzgen et al., 1995). NET has 3 glycosylation sites on the second extracellular loop and also a few phosphorylation sites (Figure 3.5). A high affinity of NET for both dopamine and norepinephrine has been demonstrated whereas the affinity for epinephrine and the effectiveness of its transport is much lower (Moron et al., 2002; Bönisch and Bruss, 1994). As mentioned before, the
highest NET density is found in the locus coeruleus whereas striatum has negligible amounts of NET. Peripherally, NET is mainly localized in heart, lungs and smooth muscles (Raisman et al., 1982; Ressler and Nemeroff, 1999; Smith et al., 2006).

**Figure 3.5** Topology of the rat norepinephrine transporter (Brüss et al., 1997)

Solid dots represent the 26 amino acid residues that are divergent in rat NET but are conserved in the human and bovine NETs.

3.2.4.2. **NET and human diseases**

Depression and anxiety disorders are common recurring disorders with a prevalence of 7 - 11 % (Ressler et al., 2007). The estimated annual cost of depression in the US alone was approximately 44 billion dollar in 1990 (Greenberg et al., 1993). More than 40 years of research through experimental models and in the clinical setting, have clearly indicated the importance of norepinephrine neurotransmission in the pathophysiology and subsequent treatment of affective and mood disorders such as major depression (For review
see Ressler and Nemeroff, 1999; Brunello et al., 2002). Given the importance of NET to noradrenergic transmission it is conceivable that regulation of the level of expression of NET gene in noradrenergic neurons may be a natural mechanism by which noradrenergic neurotransmission can be adjusted in vivo in response to physiological demands placed on this system. Evidence for such a mechanism was first provide by Lee et al. (1983), who demonstrated that NET is upregulated and downregulated in response to enhanced availability or depletion of norepinephrine, respectively. Thus, levels of NET appear to be regulated in order to maintain ‘normal’ concentrations of norepinephrine in the noradrenergic synaps (Lee et al., 1983). Klimek et al. (1997) demonstrated a reduced NET density in the locus coeruleus measured by a lower \[^{3}H\]nisoxetine binding to NET in brain tissues collected post-mortem from subjects diagnosed with major depression (Klimek et al., 1997). Variations in the genes encoding for NET could be involved in predisposing individuals to psychiatric disorders. Linkage analysis for depression and other psychiatric disorders and the genetic variations of the NET gene displayed contradictory findings (For review see Hahn and Blakely, 2007). A few studies demonstrate positive association between the NET gene and psychiatric disorders (Urwin et al., 2002; Inoue et al., 2004; Ryu et al., 2004; Sun et al., 2008) while others show no association at all (Hadley et al., 1995; Owen et al., 1999; Sand et al., 2002; Zill et al., 2002).

The basis for the treatment of depression is to moderate the levels of neurotransmitters. Several classes of drugs have been identified and used as antidepressants (for Review see Leonard, 1999). Reboxetine (Figure 3.6) is the first potent, selective and specific norepinephrine reuptake inhibitor. Two chiral centres are present in reboxetine. However, due to the regio- and stereo-specificity of the key reactions used for its synthesis, only two diastereomers are present in reboxetine; it is a racemic mixture of RR- and SS-2-[\(\alpha\)-(2-ethoxyphenoxy)benzyl]morpholine methanesulphonate (Melloni et al., 1984). Extensive research indicated that reboxetine is a clinically active, efficacious and well-tolerated antidepressant. Since 1997, reboxetine is on the market with
different trade names including Edronax®, Norebox® and Vestra® and so on (Dostert et al., 1997; Holm and Spencer, 199; Wong et al., 2000).

Figure 3.6 Chemical structures of Reboxetine mesylate and Atomoxetine

Atomoxetine (Figure 3.6), also known as \((\cdot)-N\text{-}methyl\gamma\text{-}(2\text{-}methyl\text{-}phenoxy)\text{benzenepropanamine, is another selective and potent inhibitor of norepinephrine reuptake (Wong et al., 1982). It is currently on the market as Strattera® for the treatment of attention deficit hyperactivity disorder (ADHD). ADHD is the most common neurobehavioural disorder of childhood and affects about 5 - 10 % of school-aged children. ADHD is characterized by inattention, hyperactivity and impulsivity. Until a few years ago, only stimulants have been approved for the treatment for ADHD. Although these agents have shown efficacy, they also have some limitations including a 10 - 30 % failure rate, intolerance, abuse liability and adverse effects such as insomnia and anxiety. Atomoxetine is the first non stimulant indicated for the management of ADHD. Over the last 7 years its pharmacokinetics, pharmacodynamics and clinical efficacy has well been established (Bymaster et al., 2002; Mattiuz et al., 2003; Corman et al., 2004; Sauer et al., 2005).

3.2.4.3. Imaging of NET

Because of the low density of NET in brain, radioligands should be highly selective and specific. Imaging of the NET has lagged behind due to the lack of
selective NET radioligands that give a high signal to noise ratio. Some potent NET reuptake inhibitors that have been labelled for \textit{in vitro} or \textit{in vivo} mapping of brain NET are discussed briefly.

Desipramine, a well-known tricyclic antidepressant, is a highly potent and selective inhibitor of NET. Tritium-labelled desipramine has been used for \textit{in vitro} autoradiographic studies of NET in the human brain post mortem (Gross-Isseroff et al., 1988; Bäckström and Marcusson, 1990). Van Dort et al. (1997) reported the radiosynthesis of desipramine and its 2-hydroxy metabolite with $^{11}$C but the \textit{in vivo} evaluation was not included. $[^{11}\text{C}]$desipramine has been evaluated \textit{in vivo} by Schou et al. (2005). An almost complete homogenous brain uptake was displayed, indicating that $[^{11}\text{C}]$desipramine has a high non-specific binding and is subsequently not suitable for imaging NET (Schou et al., 2005).

Although nisoxetine is very selective for NET \textit{in vitro}, $[^{11}\text{C}]$nisoxetine exhibits very high levels of nonspecific binding \textit{in vivo}, making it practically unsuitable for PET (Haka et al., 1989; Ding et al., 2005). An iodinated analogue of nisoxetine with promising \textit{in vitro} properties has been developed (Chumpradit et al., 1992; Kiyono et al., 2003; Kung et al., 2004). Unfortunately, (R)-$^{[125}\text{I}]$2-iodonisoxetine also failed the \textit{in vivo} tests; it displayed high nonspecific binding resulting in a high background uptake (Kiyono et al., 2004; Kung et al., 2004).

Evaluation of $[^{11}\text{C}]$talopram, $[^{11}\text{C}]$talsupram, $[^{11}\text{C}]$oxaprotiline and $[^{11}\text{C}]$lortalamine demonstrated lack of selective NET binding \textit{in vivo}, even though their \textit{in vitro} potentials were promising (McConathy et al., 2004; Ding et al., 2005; Schou et al., 2005).

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{structure.png}
\caption{Structure of NET radioligands}
\end{figure}
Recently, $^{11}$C and $^{18}$F labelled analogues of reboxetine (Figure 3.8) have been synthesized and evaluated as PET radioligands in rodents, monkeys and humans. *In vivo* evaluation of (S,S)-$[^{11}$C]methylreboxetine (MeNER) displayed a regional distribution consistent with the known distribution of NET. Blocking studies in mice demonstrated the selectivity towards NET. Further evaluation of (S,S)-$[^{11}$C]MeNER in nonhuman primates and human brain showed that no equilibrium was used during the PET measurement. This together with a somewhat noisy final signal at later time points lead to the preparation and evaluation of radiofluorinated analogues to extend the PET scanning time (Schou et al., 2003; Wilson et al., 2003; Ding et al., 2003; Severance et al., 2007). Its $[^{18}$F]fluoromethyl analogue, (S,S)-$[^{18}$F]FMeNER, displayed not only significant uptake in the NET-rich regions but also showed a high bone uptake due to *in vivo* defluorination. With the intention of reducing the *in vivo* defluorination, the di-deuterated analogue, (S,S)-$[^{18}$F]FMeNER-D$_2$ was developed. PET studies indicated that the extent of defluorination was significantly reduced while the selectivity and affinity towards NET was retained (Schou et al., 2004; Seneca et al., 2005; Lin et al., 2005). These data encourage further PET studies using (S,S)-$[^{18}$F]FMeNER-D$_2$ in humans (Schou et al., 2005; Arakawa et al., 2008, Takano et al., 2008).

**Figure 3.8** Structures of (S,S)-reboxetine (A), (S,S)-$[^{11}$C]MeNER (B) and (S,S)-$[^{18}$F]FMeNER-D$_2$ (C)
3.2.5. DOPAMINE TRANSPORTER

3.2.5.1. Structure and localization

Human DAT cDNA’s were first isolated using highly homologous rat DNA or human NET cDNA sequences. The human DAT gene (SLC6A3) was mapped to chromosome 5p15.3. The organization of the entire gene has been reported. It spans about 65 kb of the human genome and consists of 15 exons separated by 14 introns (Giros et al., 1992; Kawari et al., 1997; Bannon et al., 2001). Transcription and translation of SLC6A3 results in an 80 kDa large transmembrane protein consisting of 620 amino acids (Figure 3.9).

![Figure 3.9](image)

**Figure 3.9** Sequence and Topology of the human dopamine transporter (Giros and Caron, 1993)

Cysteines 180 and 189 in the second extracellular loop are disulfide bonded. Asparagine residues 181, 188, and 205 in the second extracellular loop are linked with glycosyl groups. Methionine residues are indicated as black circles with white letters.

DAT is predominantly present in the brain although it is also found in the periphery. In the brain, DAT co-localizes with markers for tyrosine hydroxylase and dopamine D2 receptors. Striatum has the highest DAT density whereas cerebellum is almost negligible of DAT (Chen and Reith, 2000; Uhl, 2003; Piccini,
Peripheral organs expressing DAT are the lungs, the gastro-intestinal system (Mitsuma et al., 1998; Mezey et al., 1999) and the pancreas (Mezey et al., 1996). DAT mediates uptake of dopamine and is an inefficient transporter of norepinephrine (Giros et al., 1992).

**3.2.5.2. Psychostimulants and DAT**

Addiction to psychoactive drugs continues to be one of the most significant medical, social, and economic problems facing society. Drug addiction has been considered as a brain disorder characterized by compulsive drug-seeking behaviour and uncontrollable use of the drug. The major dysfunction and dysregulation associated with addictive disorders involves the brain’s natural reward system. It has been shown that drugs interact with regions of the brain where dopaminergic terminals are abundant, specifically the mesolimbic pathway (Koob and Bloom, 1988; Wise, 1996; Koob, 2000; Pierce and Kumaresan, 2006). Cocaine and amphetamine, including methamphetamine and methylenedioxymethamphetamine (ecstasy) are powerful central nervous system stimulants which are widely abused (for review see Howell and Kimmel, 2008). Currently, no effective pharmacotherapy for psychostimulant abuse has demonstrated efficacy for long-term use. Both drugs increase the extracellular levels of monoamines. Although cocaine and amphetamines affect all three monoamine concentrations, the rewarding, reinforcing and stimulating effects are believed to depend primarily on its interaction with DAT (Ritz et al., 1987; Giros et al., 1996; Amara and Sonders, 1998; Carboni et al., 2001; Elliott and Beveridge, 2005).

Cocaine, a naturally occurring molecule that can be isolated from Erythroxylon coca, exerts its action by blocking dopamine reuptake, thereby increasing the concentration of dopamine in the synapase, which then causes overstimulation of dopamine receptors (Figure 3.10) (Witkin et al., 1991; Kuhar and Boja, 1991; Volkow et al., 1997; Geracitano et al., 2006).
Figure 3.10 Influence of drugs on the function of DAT (Torres et al., 2003)

Amph = amphetamine; DA = dopamine; DAT = dopamine transporter; L-DOPA = L-dihydroxyphenyl-alanine

Amphetamine is a substrate-type releaser (Figure 3.10) (For review see Fleckenstein et al., 2007). It binds to the transporter protein and is subsequently transported into the cytoplasma of the nerve terminals. Extracellular transmitter concentrations are elevated by a two-pronged mechanism: (1) the amphetamines promote efflux of transmitter by a process of transporter-mediated exchange and (2) they increase cytoplasmic levels of transmitter by disrupting storage of transmitters in vesicles. This latter action increases the pool of neurotransmitters available for release by transporter-mediated exchange (Kahlig and Galli, 2003; Rothman and Baumann, 2003; Geracitano et al., 2006). It is important to emphasize that a number of synthetic stimulants, including amphetamines are useful medication in the treatment of ADHD, narcolepsy and obesity. The same drug can thus be a therapeutic entity or an abused substance depending upon the context in which the drug is administrated. Methamphetamine for example is widely abused for its ability to increase wakefulness and physical activity and decrease appetite (Rothman and Baumann, 2003).
3.2.5.3. **Role of DAT in human disorders**

Parkinson’s disease (PD), ADHD and schizophrenia each have abnormal dopamine function in addition to many other disabling features (Bannon, 2005). As mentioned before, ADHD is mainly treated with psychostimulants. These psychostimulants, for example methylphenidate (Rilatine®) exhibit their function by inhibiting the reuptake of dopamine. Several genetic findings indicated that specific alleles of the DAT gene seemed to be associated with ADHD (Cook et al., 1995; Gill et al., 1997). The results of different studies on the up- or downregulation of DAT in ADHD are inconsistent. Higher DAT density in the striatum have been reported (Krause et al., 2000; Cheon et al., 2003) as well as DAT decrements (Volkow et al., 2007; Hesse et al., 2009) and unchanged DAT density (van Dyck et al., 2002).

Idiopathic PD is a progressive neurodegenerative disorder which manifests itself by bradykinesia in combination with rigidity, tremor and postural instability (Gelb et al., 1999). PD affects approximately 0.2 % of the population and the prevalence increases with age. To date, PD remains an incurable disease. The available treatments are able to offer only symptomatic relief for patients. The drugs used to treat PD either boost the levels of dopamine in the brain or mimic the effects of dopamine. L-DOPA is the key compound in the treatment of PD, acting as a precursor of dopamine (for review see Schapira, 2007; Singh et al., 2007). The disease is neuropathologically characterized by the presence of Lewy bodies and by degeneration of dopamine-containing neurons in the ventral mesencephalon with loss of their nerve terminals in the basal ganglia structures, especially in the striatum (Stoof et al., 1999; Singh et al., 2007).

PD diagnosis is based on clinical symptoms and the presence of Lewy bodies (Gelb et al., 1999). The clinical symptoms however are manifested when already 50 – 80 % of the nigrostriatal neurons are lost. Clinical diagnosis fails to identify individuals before such a significant loss of dopamine neurons is reached. Lewy bodies also occur in patients suffering from other diseases like Alzheimer disease.
and ataxia telangiectasia. Taken together, clinical diagnostic criteria are not always sufficient to make a confident, early diagnosis of PD. PD is also characterized by loss of dopamine neurons. Since DAT is exclusively localized on dopamine synthesizing neurons, it is a good marker for the integrity of these neurons. Over the last decade, radiotracers suitable for DAT imaging have been proposed as possible diagnostic tools and for monitoring the treatment of patients with PD (Figure 3.11). The high sensitivity and specificity of SPECT and PET (semi)quantitative images makes DAT imaging, at present, the best biomarker for evaluating dopamine neuron loss, which is responsible for most of the motor symptoms in PD patients (Stoof et al., 1999; Poewe and Scherfler, 2003; Shih et al., 2006).

![Figure 3.11 SPECT axial images in healthy control (right) and Parkinson’s disease patient (left) (Seibyl et al., 1998)](image)

Subjects were injected with 333 MBq (9 mCi) $^{[123]}$FP-CIT. Tracer uptake showed a marked reduction in Parkinson’s disease patient with greater abnormality in putamen.

3.2.5.4. Imaging of DAT

Several radioligands of different chemical classes have been developed for the visualization of DAT (for review see Guilloteau and Chalon, 2005; Volkow et al., 1996; Elsinga et al., 2006). A limitation of many of these radioligands is their lack
of selectivity towards DAT. They mostly have also high affinity for one of the
other monoamine transporters.

![Figure 3.12 Structure of cocaine (A), $[^{123}\text{I}]\beta$-CIT (B), $[^{11}\text{C}]\beta$-CFT (C) and $[^{123}\text{I}]\text{FP}$-CIT (D)]

The first DAT radioligand developed for PET was $[^{11}\text{C}]$nomifensine. Although it
has favourable kinetics, $[^{11}\text{C}]$nomifensine is unsuitable as a tracer for DAT due to
its high affinity binding at the NET (Aquilonius et al., 1987). The radiolabelling of
cocaine with $[^{11}\text{C}]$ initiated development of many promising labelled cocaine
derivatives (Figure 3.12). $[^{11}\text{C}]$cocaine itself is not suitable due to high binding to
SERT and NET in addition to low specific-to-nonspecific binding ratio and its
very fast kinetics (Fowler et al., 1989; Volkow et al., 1996). The cocaine analogue
$[^{123}\text{I}]\beta$-CIT also known as $[^{123}\text{I}]$RTI-55 has high affinity for DAT and a high
specific-to-nonspecific binding. The major drawbacks of $[^{123}\text{I}]\beta$-CIT are its low
selectivity towards DAT and rather slow kinetics. Striatal activity increases for 15
to 20 hours after bolus injection of the tracer. Consequently, SPECT
measurements with $[^{123}\text{I}]\beta$-CIT in the human brain usually requires a delay of 24
hours between injection and imaging (Boja et al., 1992; Brucke et al., 1993;
Laruelle et al., 1994). Consequently, PET measurements with $[^{11}\text{C}]$RTI-55 must
be conducted far from equilibrium (Farde et al., 1994). $[^{11}\text{C}]\beta$-CFT better known
as $[^{11}\text{C}]$WIN 35,428, also does not achieve a maximum value of striatal binding
within the time constraints of PET experiments (Wong et al., 1993). Because of
the high affinity of $[^{11}\text{C}]\beta$-CFT, Laakso et al. (1998) recommended an $[^{18}\text{F}]$ labelled
analogue, $[^{18}\text{F}]\beta$-CFT, enabling prolonged PET-scanning since striatal binding
peaked at 225 min p.i. (Laakso et al., 1998). However, from a practical point of view, such a long scanning protocol is not desirable for clinical studies. Therefore, numerous compounds have been investigated to improve selectivity and obtain accurate kinetics. Among those, $^{[1]}$CPE2I (Halldin et al., 2003; Shetty et al., 2007), $^{[18]}$FECNT (Goodman et al., 2000; Deterding et al., 2001; Davis et al., 2003) and $^{[123]}$IFP-CIT (Booij et al., 1997 and 1998) showed favourable brain kinetics although their selectivity towards DAT is still not optimal. $^{[123]}$IFP-CIT is since 2000 commercially available in Europe by the name DatSCAN™ and is used for diagnosis of PD (Vlaar et al., 2008; Booij and Kemp, 2008).

Furthermore, useful $^{[99m}\text{Tc}]$ labelled tropane analogues have been described such as $^{[99m}\text{Tc}]$TRODAT-1 (Kung et al., 1996; Hwang et al., 2002) and $^{[99m}\text{Tc}]$TropaBAT (Cleyhens et al., 2005; Kieffer et al., 2006).

Although most radioligands for DAT imaging are tropane derivatives ligands, GBR 13119 has also proven to be a good lead compound. Several derivatives have been prepared and displayed good in vitro properties (Kimura et al., 2003; Boos et al., 2006; Rothman et al., 2008). Radiolabelling of these derivatives could result in new improved radiotracers for DAT.

### 3.3. Monoamine oxidase

#### 3.3.1. GENERAL INTRODUCTION

The enzyme monoamine oxidase (MAO) was discovered 80 years ago in beef liver as tyramine oxidase (Hare, 1928). Almost 10 years later, it was established that epinephrine, norepinephrine and dopamine were also substrates for this enzyme and it was renamed monoamine oxidase. MAO (EC 1.4.3.4.) is a flavin-containing (Kearney et al., 1971) mitochondrial membrane-bound protein (Schnaitman et al., 1967) which catalyzes the oxidative degradation of biogenic and xenobiotic amines to their corresponding aldehydes by the production of hydrogen peroxide and ammonia (Dostert et al., 1989; Tipton et al., 2004). MAO
(For review see Weyler et al., 1990) exists as two isoforms in many tissues of humans and other mammals, termed MAO-A and MAO-B. The two isoforms are distinguished by their substrate preference and by selective inhibitors, as well as by their physical properties (Housley et al., 1976; Schoepp and Azzaro, 1981). In general, it has been suggested that in the CNS intraneural MAO protect neurons from exogenous amines, terminate the actions of amine neurotransmitters, and regulate the contents of intracellular amine stores (Youdim et al., 2006).

3.3.2. EXPRESSION AND STRUCTURE

MAO-A and MAO-B (Figure 3.13) are different gene products with molecular weights of about 59.7 and 58.8 kDa respectively and a 70 % degree of homology in their amino acid sequence is present. Both genes are located on the X chromosome (Xp11.23), each comprising 15 exons with identical intron - extron organization (Lan et al., 1989; Bach et al., 1988; Shih, 1991).

![Figure 3.13](image)

**Figure 3.13** Crystal structures of human MAO-A (A) and human MAO-B (B)

(Edmondson et al., 2007)

The flavin binding domain is labelled in blue, red denotes the substrate binding domain and green denotes the membrane binding domain
The X-ray crystal structure of human MAO-B was first reported by Binda et al. (2002). The subsequent successes in the crystallization and structural elucidation of human MAO-A has provided insights into the structure and mechanism of both enzymes, allowing a detailed comparison of the active sites of both enzymes (De Colibus et al., 2005). Both proteins are predominantly located in the outer membrane of mitochondria, to which they are anchored by the C-terminal domain (Rebrin et al., 2001).

MAO is present in most mammalian tissues but the two isoforms occur with different ratios in different organs of different species (Shih et al., 1999; Inoue et al., 1999). In humans, MAO-B predominates in the brain, heart, kidneys and spleen, while MAO-A is most abundant in the lungs and duodenum. The highest levels of MAO activity were observed in liver and the spleen displayed the lowest MAO activity among the tissues investigated (Rodríguez et al., 2001; Saura et al., 1992; Saura et al., 1996a). There are regional differences in MAO activity in the brain. In the human brain, the basal ganglia and hypothalamus show the highest levels of activity, whereas low levels of activity are observed in the cerebellum and neocortex (Youdim et al., 2006). MAO-A is predominantly found in the locus coeruleus and the highest concentration of MAO-B is found in the raphne nuclei. (Jahng et al., 1997; Saura et al., 1996b; Willoughby et al., 1988). While the human brain profoundly express MAO-B, rat brain has higher concentrations of MAO-A.

3.3.3. SUBSTRATES AND INHIBITORS

The two isoforms are distinguished by their substrate preference and by different selective inhibitors. As shown in Table 3.1, MAO-A catalyses the oxidation of serotonin, epinephrine and norepinephrine preferentially, whereas MAO-B is active towards benzylamine and 2-phenethylamine. Dopamine, tryptamine and tyramine are oxidized by both isoforms in most species. Irrespective of tissue-
and species-based differences in substrate specificity, the two isoenzymes are best distinguished based on pharmacological criteria: MAO-A is selectively inhibited by low doses clorgyline, whereas MAO-B is blocked by low doses of L-deprenyl. Clorgyline as well as L-deprenyl form a covalent bond with the enzyme, indicating they are both irreversible inhibitors (Doster et al., 1989; Youdim et al., 2006). L-deprenyl with the combination of L-DOPA has been widely used in the treatment of PD (Birkmayer, 1983).

Table 3.1 Structures of MAO substrates/inhibitors

<table>
<thead>
<tr>
<th>Substrates</th>
<th>Inhibitors</th>
</tr>
</thead>
<tbody>
<tr>
<td>serotonin</td>
<td>Clorgyline</td>
</tr>
<tr>
<td>norepinephrine</td>
<td></td>
</tr>
<tr>
<td>phenylethylamine</td>
<td>L-deprenyl</td>
</tr>
<tr>
<td>benzyamine</td>
<td></td>
</tr>
<tr>
<td>dopamine</td>
<td>iproniazid</td>
</tr>
<tr>
<td>tyramine</td>
<td>phenelzine</td>
</tr>
</tbody>
</table>

Since the two isoforms of MAO share 70% sequence identity, they show similar susceptibility to some inhibitors such as iproniazid, phenelzine and tranylcypromine (Riederer et al., 2004). Iproniazid, a drug used to treat tuberculosis (Ornstein, 1958), was found to produce mood elevation in patients and was subsequently discovered to be a MAO inhibitor useful in the treatment of depression. An undesirable and sometimes lethal side effect of MAO non-selective inhibitors was the so-called “cheese reaction”. This refers to the
hypertensive crisis in individuals who were taking non selective irreversible MAO inhibitors together with food that contain large quantities tyramine. Tyramine is normally broken down by MAO in the digestive organs. However when MAO is inhibited, tyramine levels are elevated causing dangerous surges in blood pressure (Crane, 1956; Anderson et al., 1993).

3.3.4. PHYSIOLOGICAL ROLE IN HEALTH AND DISEASE

MAO regulates concentrations of important neurotransmitters in the brain, as well as protects the body by oxidizing xenobiotics and dietary amines in peripheral tissues which could act as false neurotransmitters. MAO is involved in a wide range of neurological diseases, psychiatric disorders and behavioural traits (Shih and Thompson, 1999; Kebir et al., 2009, Bortolato et al., 2008; Meyer et al., 2006).

MAO-A knock-out mice have elevated brain levels of serotonin, causing a distinct behavioural syndrome, including enhanced aggression. This observation in MAO-A knock-out mice is in accordance with the abnormal aggression reported in males from a Dutch family with a complete MAO-A deficiency due to a point deletion in the gene encoding MAO-A (Brunner et al., 1993). Recent studies showed that the low MAO-A genotype was associated with antisocial behaviour and high self-reported trait aggression with children exposure to maltreatment. Alia-Klein et al. (2008) reported that a 15 % reduction in brain MAO-A activity is associated with elevated trait aggression.

PD is related with an elevated MAO-B activity in the substantia nigra, causing an increased oxidation of dopamine and subsequently higher levels of toxic H$_2$O$_2$. This leads to the degradation of dopamine-synthesizing neurons (Shih et al., 1999).
MAO-B converts 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (MPTP) to the toxic metabolite 1-methyl-4-phenylpyridinium (MPP⁺) which selectively destroys nigrostriatal neurons. The neurodegeneration induced by MPTP is similar to the neuronal damage in PD and is prevented by the MAO-B inhibitor L-deprenyl. Thus, MAO-B is also involved in the pathogenesis of MPTP-induced Parkinsonism (Shih et al., 1999).

Several lines of evidence suggest a link between cigarette smoke and MAO inhibition. Cigarette smokers have reduced levels of MAO-A and B (Fowler et al., 1996; Berlin et al., 1995). Likewise, the activities of MAO-A and MAO-B are decreased in animals exposed to cigarette smoke. The mechanism underlying this reduced MAO activity has not yet been elucidated. Although nicotine is the main pharmacologically active compound in tobacco, it is not the cause of the reduced MAO activity. Characterization of the compounds in tobacco smoke that inhibit MAO activity is still in progress (Lewis et al., 2007).

MAO may also be involved in alcoholism because lower levels of MAO-B activity are present in alcoholics. Furthermore, MAO-A mutations may underlie the susceptibility of individuals to alcoholism (shih et al., 1999).

3.3.5. IMAGING OF MAO

Given the pharmacological role of MAO and their importance in psychiatric and neurological diseases as well as in addiction, PET and SPECT are valuable tools for the non-invasive \textit{in vivo} study of these enzymes. Studies in humans are of special value because species variability in MAO subtype distribution limits the relevance of animal measurements. Only a few compounds have been proposed as MAO-radiotracers. The first developed radiotracers for MAO were the selective irreversible MAO inhibitors clorgyline and L-deprenyl labelled with $^{11}\text{C}$ Since both radiotracers are covalently bound to MAO-A or MAO-B, they visualize MAO by the suicide inactivator approach (MacGregor et al., 1985;
Fowler et al., 1987; Arnett et al., 1987; Lammertsma et al., 1991). The drawback of $[^{11}C]$clorgyline is that it displays an unexplained species difference. In contrast to results in humans clorgyline was not retained in baboon brain (Fowler et al., 2001). A number of different classes of selective, reversible inhibitors of MAO-A and MAO-B have been proposed as MAO-radiotracers. Derivatives of the harmine alkaloids have been labelled with $^{11}$C and evaluated in the monkey brain for the assessment for MAO-A. $[^{11}C]$harmine (Figure 3.14), $[^{11}C]$methylharmine, $[^{11}C]$harmaline and $[^{11}C]$brofarmin were compared and only $[^{11}C]$harmine and $[^{11}C]$methylharmine had kinetic patterns in monkey brain that are compatible with a binding to MAO-A. $[^{11}C]$harmine however is extremely metabolized in plasma making absolute quantification difficult (Bergstrom et al., 1997a and 1997b). $[^{11}C]$befloxatone (Figure 3.14) shows good characteristics for imaging brain MAO-A but it is synthesized via a cyclization reaction with $[^{11}C]$phosgene which is toxic and rather rare available (Dolle et al., 2003; Bottlaender et l., 2003).

![Figure 3.14](image.png)

**Figure 3.14** Structure of radiotracers for MAO-A and MAO-B

Examples of MAO-B tracers are $[^{11}C]$SL25.1188 (Bramoullé et al., 2007), $[^{125}I]$2-IBPO (Figure 3.14) (Hirata et al., 2002) and $[^{123}I]$-Ro-43-0463 (Figure 3.14) (Beer et al., 1995). For review on MAO imaging see Fowler et al. (2002; 2005).
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Scope and Aims
SCOPE AND AIMS

SCOPE

Psychiatric disorders are highly prevalent and have important personal, social and economic impacts. An estimated 26.2% of Americans aged 18 and older suffer from a diagnosable mental disorder in a given year. The most common mental disorders in adults in the United States are major depression and anxiety disorders, both of which affect up to 10% of the adult population each year (Voshol et al., 2003). Psychiatrists face many problems during the assessment and differential diagnosis for individuals with mental disorders. Simplify the diagnosis from a better understanding of the neurobiological basis of brain disorders would increase the diagnostic validity, reliability and precision (Barnhill, 2008). Medical imaging technique can map structural and functional changes in the brain and thus are unique tools for clinical researchers to elucidate and understand the pathophysiology of neuropsychiatric disorders.

SPECT and PET are non-invasive imaging techniques in which radiotracers are used to study biochemical and physiological functions in the living brain. In vivo brain mapping with PET or SPECT can be of great importance in drug development as well as in the effective diagnosis, treatment and management of neurological and psychiatric disorders and substance abuse. Therefore, the development of new and more specific and selective radiotracers is of great importance in neuroimaging (Gee, 2003).

Monoamine transporters and enzymes that cause degradation of the monoamines (for example MAO) are responsible for the homeostasis of neurotransmitter pools at the nerve endings and control the duration and intensity of neurotransmitter action. The transporters and enzymes are main actors of the
neuronal communication, being therefore involved in the physiology and diseases of the CNS. Distribution, density, and activity of these transporters and enzymes in the brain can be visualized by using specific radioligands and SPECT and PET imaging. Further studies of the molecular mechanisms of the various transmitter systems can improve our understanding of complex brain functions and can provide more insight into the causes and consequences of neurological and psychiatric disease interaction (Wong and Brasic, 2001; Guilloteau and Chalon, 2005).

A prerequisite of efficient drug treatment of CNS disorders is that sufficient amounts of the drug enter the brain. Active transport by P-gp has a major impact on drug resistance to psychotropic drugs, affects the pharmacokinetics of many drugs and can be inhibited by the administration of modulators or competitive substrates (Linnet and Ejsing, 2008). Moreover, changes or abnormalities in P-gp expression and function are involved in the etiology and pathogenesis of several neurological diseases (Rapposelli et al., 2009). PET and SPECT can be applied to evaluate the efficacy of candidate P-gp-modulators in vivo and to investigate the effect of P-gp on the brain uptake of new psychotropic drugs. In addition, visualization of P-gp in the normal brain and during various pathologic conditions could be of great value to elucidate the relationship between P-gp function/expression and neuronal and neuropsychiatric disorders.

AIMS

As discussed above, an accurate and selective PET or SPECT tracer provides a useful clinical tool for the diagnosis and treatment of psychiatric and neurological disorders. Therefore, the aim of this thesis was the development of novel radiotracers for two distinct brain elements being the monoamine system and the P-gp transporter. The first objective was the design of radiotracers for, NET
(Chapter 5), MAO (Chapter 6) and DAT (Chapter 7) which are all responsible for neurotransmitter inactivation in the monoamine system. By the discovery that the radiotracer designed in Chapter 7 is modulated by P-gp, the focus of this thesis was redirected towards imaging of the P-gp transporter (Chapter 8 and 9).

Since no valuable SPECT radiotracer for visualization of the norepinephrine transporter is available, we will synthesize and subsequently label a reboxetine analogue with $^{123}$I. The radiotracer will be evaluated in vivo in a biodistribution study in mice to determine brain uptake (Chapter 5).

The objective of Chapter 6 is to label a suitable reversible inhibitor for mapping MAO-A in vivo with PET. We will select appropriate candidates from the literature. The chosen molecules will be radiolabelled with $^{11}$C and evaluated in vivo in a biodistribution study in mice. The selectivity of the radiotracers for MAO-A will be assessed in a blocking study in mice and imaging studies in rats. Stability of the tracers will be determined in vivo in mice.

In a following part, we will develop a SPECT tracer that is more selective towards DAT compared to the existing radiotracers for DAT imaging. FMIP was picked out a report by Boos et al. (2006) based on its nanomolar affinity for the dopamine transporter and good selectivity over the other monoamine transporters. FMIP and the precursor molecule for the $^{123}$I labelling will be synthesized. The potency of $[^{123}]$I-FMIP to visualize the dopamine transporter in vivo will be investigated in a biodistribution study in mice, a blocking study in mice and a regional brain distribution study in rats. Stability of the tracer will be assessed in vitro as well as in vivo. These studies are described in Chapter 7.

All reported radiotracers for the P-gp transporter are aimed to visualize P-gp function but not the expression of P-gp and they all have at least one limitation. Moreover, no iodinated SPECT tracer has been reported so far. In the last part of this thesis, we will label and evaluate a SPECT (Chapter 8) and a PET (Chapter 9) radiotracer for imaging P-gp function or expression.
The potential SPECT tracer, $[{^{123}}\text{I}]{-}\text{FMIP}$ will be evaluated \textit{in vivo} in a biodistribution study in wild-type and P-gp knock-out mice. The influence of CsA, a P-gp modulator, on the tissue distribution of the $^{123}$I labelled tracer in wild-type and P-gp knock-out mice will be determined. The metabolic profile will be evaluated in wild-type mice with and without CsA pretreatment as well as in P-gp knock-out mice. $^{[123]}$I-FMIP will be further evaluated in a µSPECT study. These studies are described in \textbf{Chapter 8}.

Additionally, we will label an \textit{in vitro} characterized substrate of the P-gp pump, with $^{11}$C and evaluate this tracer \textit{in vivo} in a biodistribution study in wild-type and P-gp knock-out mice. The influence of CsA and the unlabeled molecule on the biodistribution profile of the radiotracer will be explored. The stability of the tracer will be investigated \textit{in vivo} in wild-type mice with and without CsA pretreatment as well as in P-gp knock-out mice \textit{(Chapter 9)}.  

\textbf{References}


Chapter 4

Materials and Methods
Materials and Methods

4.1. General

All solvents and chemicals were purchased from Acros (Geel, Belgium) or Sigma-Aldrich (Bornem, Belgium) unless otherwise mentioned and were used without further purification. HPLC solvents were purchased from Chemlab NV (Belgium). Cyclosporin A (Sandimmune®) was obtained from Novartis Pharma (250 mg/5 mL, Vilvoorde, Belgium).

No carrier added (n.c.a.) $[^{123}]$I sodium iodide (in 0.05 M NaOH) was purchased from GE Healthcare (Cygne, The Netherlands).

Unless otherwise mentioned, the HPLC system used consisted of a Waters 515 HPLC pump, a Waters 2487 UV detector (Waters, Milford, USA), a Ludlum model 2200 scaler ratemeter equipped with a Geiger Müller tube (Ludlum Measurements Inc., Sweetwater, USA), and a Shimadzu C-RSA chromatopac data analyser. Absorption units full scale were set at 0.0001 and wavelength was set at 254 nm, unless otherwise mentioned. The columns, mobile phases and flow rates used are indicated in the chapters.

Radioactivity was counted with an automated gamma-ray spectrometer equipped with five 1x1 inch NaI(Tl) crystals (Cobra Autogamma, Packard Canberra) or with a Capintec dose calibrator (CRC-15R, Ramsey, USA).
4.2. Animals

All animal studies were conducted following the principles of laboratory animal care and the Belgian Law on the protection of animals. The performed experiments were approved by the local Ethics Committee of Ghent University. All wild type mice (FVB and NMRI) and rats (Sprague-Dawley) were purchased from Bioservices or Charles River. The mdr1a (-/-) mice were obtained from Taconic (Hudson, USA).

The mdr1a (-/-) mouse strain was developed in the laboratory of Dr. Alfred Schinkel from the Netherlands Cancer Institute. Taconic maintained the colony. The mdr1a (-/-) mouse strain was healthy and fertile and did not display clear physiological abnormalities or a decreased life span. Mice homozygous for a disruption of the mdr1a gene have completely lost all detectable P-gp in brain capillaries. Also P-gp density in gut epithelium is dramatically decreased. They displayed an increase in mdr1b RNA in liver and kidney, probably to compensate for the loss of excretory capacity caused by the mdr1a disruption (Schinkel et al., 1994; 1997). Since mdr1a (-/-) mice were made on a FVB background, the wild type mice used as control group were FVB mice.

4.3. Carbon-11 as radionuclide

4.3.1. GENERAL

Decay of $^{11}\text{C}$ to the stable nuclei $^{11}\text{B}$ occurs for the most part by positron emission (99.8 % by $\beta^+$ emission, 0.19 % by electron capture). The maximum kinetic energy of the positron is 0.96 MeV and the mean kinetic energy is 0.385 MeV. A theoretical specific activity of $3.4 \times 10^5$ GBq/µmol ($9.2 \times 10^3$ Ci/µmol) can be obtained for $^{11}\text{C}$. The short half-live of $^{11}\text{C}$ (20.4 min) demands a fast production of the precursor molecule as well as the radiotracer itself. The several
steps that must be completed to obtain a radiotracer labelled with $^{11}$C are depicted in Figure 4.1.

![Figure 4.1 Major steps in routine preparation of PET radiopharmaceuticals](image)

The development of a rapid labelling synthesis is often highly dependent on the availability of suitable labelled precursors. For $^{11}$C-chemistry, the most used primary precursors are $^{11}$CO$_2$ and $^{11}$CH$_4$. Regarding secondary precursors, [$^{11}$C]methyl triflate and [$^{11}$C]methyl iodide are widely used as alkylating agents for the introduction of $^{11}$C into organic molecules (Stöcklin and Pike, 1993). In this dissertation $^{11}$CH$_4$ is used as primary precursor for the synthesis of $^{11}$CH$_3$I, which is used as such.

4.3.2. PRODUCTION OF $^{11}$CH$_4$

$^{11}$CH$_4$ was produced in a Cyclone 18 twin cyclotron (IBA, Ghent, Belgium) via the $^{14}$N(p,$\alpha$)$^{11}$C reaction induced by irradiation of N$_2$ gas containing 5% H$_2$ with a proton beam (18 MeV, 14 µA) for 20 min.
4.3.3. SYNTHESIS OF $^{11}$CH$_3$I

$^{11}$CH$_4$ was transferred from the cyclotron target to a home made synthesis module housed in a hot cell. $^{11}$CH$_4$ was trapped on a loop filled with Porapak N (divinylbenzene/vinyl pyrolidone polymer) that was cooled in liquid argon. Once all $^{11}$CH$_4$ was released from the target, the loop was flushed with helium to remove N$_2$/H$_2$ and allowed to warm to room temperature. The $^{11}$CH$_4$ was swept off the loop with a helium flow and mixed with I$_2$ vapours at 50°C, after which the mixture was passed through an oven heated to 600°C to yield $^{11}$CH$_3$I. After the reaction, the remaining iodine and produced hydrogen iodide were trapped in ascarite, while $^{11}$CH$_3$I was collected on a Porapak N trap at room temperature. The unreacted $^{11}$CH$_4$ was further circulated until no more $^{11}$CH$_3$I was produced. $^{11}$CH$_3$I was released from the Porapak N trap by heating the trap to 120°C.

4.4. Iodine-123 as radionuclide

4.4.1. GENERAL

Iodine-123 decays by electron capture; mainly (83 %) emitting $\gamma$-rays with an energy of 159 keV, which makes it a very suitable isotope for diagnostic SPECT imaging. $^{123}$I has a theoretical maximum specific activity of 8.769 TBq/µmol (237 Ci/µmol).

4.4.2. NUCLEOPHILIC IODINATION

Several distinct mechanisms are possible for nucleophilic iodination depending on the substrate, the leaving group and the reaction conditions. The iodide anion serves as the nucleophile. One possible method is the copper-assisted halogen exchange. Given the relatively low reactivity of nucleophilic aromatic halogen substitution, a copper salt or metal is used as catalyst. For this reaction type, a
wide variety of reaction conditions can be employed. For a detailed review of possible reaction methods and mechanisms see Coenen et al. (2006).

4.4.3. ELECTROPHILIC IODINATION

Electrophilic iodination is a process in which formally a positively charged iodine (I$^+$) attacks a system with high electron density such as an aromatic ring. As a result a covalent carbon-iodine bond is formed with loss of a positively charged leaving group. The radioiodide can be oxidized \textit{in situ} using chloramine T (Figure 4.2). Under certain conditions, chloramine T can release hypochlorite, which oxidises iodide under formation of an iodonium ion. The reaction is terminated by adding the antioxidant sodium metabisulfite.

![Figure 4.2 Chloramine T](image)

4.5. Experimental procedures

4.5.1. SPECIFIC ACTIVITY

The specific activity of a tracer can be defined as the amount of radioactivity present per mole of product. Specific activity is usually expressed as Ci/$\mu$mol or GBq/$\mu$mol.

Tracer amount was determined by HPLC. Tracer activity was determined by Capintec readings. The mass of tracer was calculated by the use of a calibration curve of reference compound. In the case no detectable carrier UV-signal could
be obtained, the detection limit for the compound was used for the calculation of the minimum specific activity.

4.5.2. LOG D$_{7,4}$

The log D$_{7,4}$ value gives an indication about the BBB permeability. The log partition coefficient was measured according to the shake flask method (Wilson et al., 2001; Waterhouse, 2003). An aliquot (10 – 20 µL) of the tracer (185 - 370 kBq (5 - 10 µCi) for $^{123}$I tracers and 1.9 - 3.7 MBq (50 - 100 µCi) for $^{11}$C tracers) was added to a test tube containing 3 mL n-octanol and 3 mL phosphate buffered saline (PBS) (0.01 M, pH 7.4). The mixture was vigorously shaken by hand for 1 min, vortexed for 2 min and centrifuged for 3 min at 3000 g. 0.5 mL of both phases was taken and placed in separate vials, taking care to avoid cross contamination between the phases. The remaining aqueous phase was discarded and 2.5 mL fresh PBS (0.01 M, pH 7.4) was added to the test tube. The procedure was repeated three more times to give four vials of each phase for measuring radioactivity. The partition coefficient was calculated as [radioactivity in n-octanol (cpm)/radioactivity in phosphate buffer (cpm)].

4.5.3. METABOLITE STUDIES

Activity was injected through a tail vein and the mice were sacrificed at different time points post injection (p.i.). Blood and whole brain were isolated. Blood was collected into a vacutest tube containing 3.6 mg K$_3$EDTA and was centrifuged at 4000 g for 6 min to separate plasma. 200 µL plasma was mixed with 800 µL CH$_3$CN whereas the whole brain was mixed with 1.5 mL CH$_3$CN. Both samples were vortexed for 30 sec and centrifuged at 3000 g for 3 min. Pellet and supernatant were separated and counted for radioactivity. An aliquot (500 µL) of the supernatant obtained from the plasma and brain homogenates was subjected
to HPLC analysis. The HPLC eluate was collected in 0.5 min fractions and their radioactivity was measured.

To determine the recovery as well as the stability of the radiotracer during workup and analysis, control experiments \((n=3)\) were done using plasma and brain spiked with authentic radiotracer (2 MBq (54 µCi) or 37 kBq (1 µCi) for \(^{11}\text{C}\) and \(^{123}\text{I}\) respectively). Sample workup was done as described above. Results are expressed as percentages of the total activity ± standard deviation (SD).

### 4.6. References

Coenen HH, Mertens J and Maziere B. Radioiodination reactions for radiopharmaceuticals. Published by Springer in 2006.


Chapter 5

Synthesis and preliminary \textit{in vivo} evaluation of $[^{123}\text{I}](S,S)$-IPBM for mapping the norepinephrine transporter
Synthesis and preliminary \textit{in vivo} evaluation of $[^{123}\text{I}]-\langle S,S\rangle$-IPBM for mapping NET

5.1. Abstract

\textit{Aim}: Abnormalities in brain NET have been implicated in the pathophysiology of various neuropsychiatric diseases and neurodegenerative disorders. A selective radioligand for mapping NET could further probe the link between NET and these disorders. This study reports the development and preliminary evaluation of $(S,S)$-2-[$\alpha$-($2$-$[^{123}\text{I}]$-iodophenoxy)benzyl]morpholine ($[^{123}\text{I}]$-$(S,S)$-IPBM).

\textit{Methods}: Precursor and reference compounds were synthesized by a stereoselective nine-step synthetic procedure. Enantiomeric purity was investigated using NMR spectroscopy. $[^{123}\text{I}]$-$(S,S)$-IPBM was obtained by electrophilic iododestannylation followed by reduction. A biodistribution study was performed in male NMRI mice.

\textit{Results}: The precursor was prepared in an overall chemical yield of 8\% with an enantiomeric excess of $> 95\%$. Radiosynthesis afforded $[^{123}\text{I}]$-$(S,S)$-IPBM with a radiochemical purity of $> 98\%$ and a specific activity of $> 148$ GBq/\text{$\mu$mol}. Biodistribution studies demonstrated high brain uptake ($4.62 \pm 0.66 \%$ ID/g at 1 min p.i.) followed by efficient wash-out ($0.55 \pm 0.17 \%$ ID/g at 180 min p.i.).

\textit{Conclusion}: $[^{123}\text{I}]$-$(S,S)$-IPBM displayed an excellent brain-blood distribution. Since $[^{123}\text{I}]$-$(S,S)$-IPBM was reported by others at the moment we performed our biodistribution studies, we did not conduct any further evaluation. Regarding their results, the choice to develop $[^{123}\text{I}]$-$(S,S)$-IPBM as a radiotracer for NET was an excellent suggestion.
5.2. Introduction

The norepinephrine transporter (NET), which is located at the pre-synaptic terminal of noradrenergic neurons, belongs to the superfamily of the Na+/Cl-dependent neurotransmitter transporters (Masson et al., 1999). The principal physiological role of NET is to regulate the noradrenergic neurotransmission by re-uptake of norepinephrine into the presynaptic neuron. Abnormalities in brain NET have been implicated in the pathophysiology of various neuropsychiatric diseases and neurodegenerative disorders including mood disorders (Ressler and Nemeroff, 1999), ADHD (Biederman and Spencer, 1999), depression (Klimek et al., 1997) and Alzheimer’s disease (Tejani-Butt et al., 1993). A selective radioligand able to image and quantify NET density with PET or SPECT would provide more insight in the role of noradrenergic mechanisms in these disorders.

At the start of this thesis, no suitable radioligand for SPECT imaging had been designed so far, directing our focus to the development of a selective radioiodinated NET radioligand. Due to the low density and widespread distribution of NET-binding sites in the brain, the design of a suitable NET radioligand is very challenging.

Although nisoxetine is selective for NET in vitro, [11C]nisoxetine exhibits a very high level of non-specific binding in vivo (Haka et al., 1989). An iodinated analogue of nisoxetine was developed and it displayed superior in vitro properties compared to nisoxetine. Just as [11C]nisoxetine, (R)-[125I]2-iodonisoxetine displayed high non-specific binding in vivo resulting in a high background uptake (Kiyono et al., 2004; Kung et al., 2004). Reboxetine is a more potent and selective inhibitor of NET and is on the market as an antidepressant (Edronax®). The (S,S) enantiomer of reboxetine is approximately 24 times more potent than the (R,R) enantiomer (Benedetti et al., 1995). Replacement of the methoxy moiety of nisoxetine by iodine resulted in enhanced in vitro properties. Since reboxetine structurally resembles nisoxetine, it was suggested that the same effect would be observed when substituting the ethoxy group of reboxetine by iodine. This idea
prompted us to the development and preliminary evaluation of \([^{123}\text{I}](S,S)-2-[\alpha-(2-iodophenoxy)benzyl]morpholine ([^{123}\text{I}](S,S)-\text{IPBM})\) (Figure 5.1).

Figure 5.1 Chemical structures of Reboxetine and Nisoxetine analogues

5.3. Materials & Methods

5.3.1. ORGANIC SYNTHESIS

\(^1\text{H}\) NMR spectra were recorded on a Varian 300 MHz FT-NMR spectrometer (Laboratory for Medicinal chemistry, Ghent University, Belgium). Chemical shifts were recorded in ppm (\(\delta\)) relative to an internal tetramethylsilane (TMS) standard in either deuterated DMSO or CDCl\(_3\). \(J\) (Hz) assignments of \(^1\text{H}\) resonance coupling were done. Mass spectrometry was performed on a Waters Micromass ZMD mass spectrometer with an electrospray ionization (ESI) probe. Samples were dissolved in MeOH – H\(_2\)O – HCOOH (50 – 50 – 0.1) and recorded in the positive (MH\(^+\)) mode.

\((2S,3S)\)-phenylglycidol was purchased from Speedchemical Co. LTD (Shangai, China). All other chemicals were obtained from Acros (Geel, Belgium) or Sigma-Aldrich (Bornem, Belgium). Organic reactions were performed under nitrogen atmosphere using anhydrous solvents and were monitored by normal phase thin layer chromatography (TLC) by UV detection at 254 nm (TLC, Polygram SIL.
G/UV254, 200 µm, Machery-Nagel, Germany). Purification of organic compounds was achieved with column chromatography on silica gel (70-230 mesh, 60Å, Sigma-Aldrich, Belgium). Solvent systems are indicated in the text. For mixed solvent systems, ratios are given with respect to volumes.

5.3.1.1. Cold reference compound synthesis

(S,S)-IPBM or (2S,3S)-9a was synthesized based on the synthetic procedure outlined by Melloni et al. (1985). Since (R,R) and (S,S) enantiomers were synthesized in the same manner, only the preparation of the (S,S) enantiomers is described.

(2S,3R)/(2R,3S)-1,2-dihydroxy-3-(2-bromophenoxy)-3-phenylpropane (1a)

A mixture of 2-iodophenol (6.6 g, 30 mmol), methyltributylammonium chloride (0.6 mL) and 0.05 M NaOH (30 mL) was stirred at 70°C for 2 h. (2R,3R)-phenylglycidol (1.5 g, 10 mmol, dissolved in 50 mL H2O) was added drop-wise and the resulting mixture was heated for another 3 h. The reaction mixture was cooled to room temperature, added to ice-cold NaOH (1 M, 30 mL) and extracted with CH2Cl2 (3 x 50 mL). The organic layer was washed with 1 M NaOH (100 mL), water (100 mL) and brine (100 mL) and dried over Na2SO4. The solvent was removed under reduced pressure to give viscous oil. The crude product was purified by column chromatography (eluent: ethyl acetate/hexane 30/70) to yield 9.5 mmol of (2R,3S)-1a (95%).

1H NMR (DMSO): δ 3.70-3.55 (m, 2H, R-CH2-OH), 3.8 (m, 1H, R2-CH2-OH), 4.65 (t, 1H, J = 5.6, R-CH2-OH), 4.95 (d, 1H, J = 5.6, R2-CH2-OH), 5.32 (d, 1H, J = 6.2, Ar-O-CH-R), 7.74-6.58 (m, 9H, Ar-H). ESI-MS: calcd MW for C15H15O3I: 370, found 393 [M + Na+].
(2S,3R)/(2R,3S)-2-hydroxy-3-(2-iodophenoxy)-1-(tert-butyldimethylsilyloxy)-3-phenylpropane (2a)

tert-Butyldimethylsilyl chloride (1.6 g, 10.6 mmol) dissolved in 5 mL DMF was added drop-wise to an ice-cold solution of (2R,3S)-1a (3.5 g, 9.5 mmol) and imidazole (1.6 g, 23.8 mmol) in DMF (8 mL). After stirring for 80 min at 0°C, the reaction mixture was added to a separatory funnel containing 100 mL water and 100 mL ethyl acetate. After extraction, the organic layer was dried over Na₂SO₄ and evaporated to give a crude oil, which was used without further purification.

(2S,3R)/(2R,3S)-3-(2-iodophenoxy)-2-mesyloxy-1-(tert-butyldimethylsilyloxy)-3-phenylpropane (3a)

A mixture of crude (2R,3S)-2a (9.5 mmol), Et₃N (1.95 mL, 14 mmol) and ethyl acetate (15 mL) was stirred at 0°C. Methanesulfonyl chloride (0.882 mL, 11.4 mmol) was dissolved in ethyl acetate (5 mL) and added to the reaction mixture over 30 min. Afterwards, the mixture was stirred for an additional 2 h at 0°C. The organic layer was washed with water, dried over Na₂SO₄ and evaporated. The resulting crude oil, (2R,3S)-3a, was used without further purification.

(2S,3R)/(2R,3S)-3-(2-iodophenoxy)-2-mesyloxy-3-phenyl-1-propanol (4a)

A solution of crude (2R,3S)-3a (9.5 mmol), THF (30 mL) and 1 M tetrabutylammonium fluoride solution in THF (15 mL) was stirred for 30 min at room temperature. The reaction was quenched with water (5 mL). The layers were separated and the aqueous layer was extracted with CH₂Cl₂. The combined organic extract was washed with brine (2 x 100 mL), dried over Na₂SO₄, and the solvent removed under reduced pressure to afford a crude residue. The residue was purified with column chromatography (eluent: 30 % ethyl acetate/hexane) to yield 8.7 mmol (92 % over the three steps) (2R,3S)-4a.
\(^1\)H NMR (CDCl\(_3\)): \(\delta 2.7\) (s, 3H, S-CH\(_3\)), 4.02 (dd, 1H, J = 3.0, 12.6, R-CH\(_2\)-OH), 4.23 (dd, 1H, J = 5.4, 12.6, R-CH\(_2\)-OH), 4.88 (m, 1H, R\(_2\)-CH-OMs), 5.5 (d, 1H, J = 5.7, Ar-O-CH-R), 7.7 - 6.5 (m, 9H, Ar-H). ESI-MS: calcd MW for C\(_{16}\)H\(_{17}\)O\(_5\)SI: 448, found 449 [M + H\(^+\)].

\((2R,3R)/(2S,3S)-1,2\)-epoxy-3-(2-iodophenoxy)-3-phenylpropane (5a)

A solution of the mesylate \((2R,3\delta)-4a\) (3.9 g, 8.7 mmol), toluene (20 mL), 4 M NaOH (20 mL) and methyltributylammonium chloride (2.45 mL, 10 µmol) was stirred vigorously for 2 h at room temperature. The solution was diluted with water (50 mL) and the product was extracted into CH\(_2\)Cl\(_2\) (3 x 50 mL). The organic layer was dried over Na\(_2\)SO\(_4\), evaporated under reduced pressure followed by purification of the product using column chromatography to afford \((2S,3\delta)-5a\) (5 mmol, 57 %).

\(^1\)H NMR (CDCl\(_3\)): \(\delta 2.81\) (m, 2H, R-O-CH\(_2\)-CH-R), 3.48 (m, 1H, Ar-O-CH-CH-R), 4.95 (d, 1H, J = 6.0, Ar-O-CH-R), 7.8-6.6 (m, 9H, Ar-H). ESI-MS: calcd MW for C\(_{15}\)H\(_{13}\)O\(_2\)-I: 352, found 353 [M + H\(^+\)].

\((2R,3R)/(2S,3S)-1\)-amino-2-hydroxy-3-(2-iodophenoxy)-3-phenylpropane (6a)

A solution of \((2S,3\delta)-5a\) (1.76 g, 5 mmol) in MeOH (35 mL) and 30 % NH\(_4\)OH (20 mL) was stirred overnight. The solution was diluted with saturated NaHCO\(_3\) and extracted with CH\(_2\)Cl\(_2\). After filtering over Na\(_2\)SO\(_4\), CH\(_2\)Cl\(_2\) was removed under reduced pressure. Purification with column chromatography (5:95 MeOH:CH\(_2\)Cl\(_2\)) yielded \((2S,3\delta)-6a\) (3.6 mmol, 72 %).

\(^1\)H NMR (DMSO): \(\delta 2.38\) (dd, 1H, J = 8.1, 12.6, R-CH\(_2\)-NH\(_2\)), 2.58 (dd, 1H, J = 3.9, 12.9, R-CH\(_2\)-NH\(_2\)), 3.88 (m, 1H, R-CH-OH), 5.42 (d, 1H, J = 5.7, Ar-O-CH-R), 7.8 - 6.61 (m, 9H, Ar-H). ESI-MS: calcd MW for C\(_{15}\)H\(_{16}\)NO\(_2\)-I: 369, found 370 [M + H\(^+\)].
(2R,3R)/(2S,3S)-1-chloroacetylamino-2-hydroxy-3-(2-iodophenoxy)-3-phenylpropane (7a)

The amine (2S,3S)-6a (1.3 g, 3.6 mmol) was dissolved in CH₂Cl₂ (16 mL) and Et₃N (0.626 mL, 4.5 mmol). The solution was kept at -10°C and chloroacetyl chloride (0.318 mL, 4 mmol) dissolved in CH₂Cl₂ (7 mL) was added slowly followed by stirring for 1 h. The solution was quenched with water and subsequently extracted with ethyl acetate. The combined ethyl acetate portion was dried over Na₂SO₄, and the solvent was removed under reduced pressure to afford a crude oil. The crude product was purified by column chromatography (eluent 35:65 ethyl acetate:hexane) to give 2.9 mmol (81 %) of (2S,3S)-7a.

¹H NMR (DMSO): δ 2.9 - 3 (ddd, 1H, J = 5.4, 8.4, 13.2, R-NH-CH₂-R), 3.25 - 3.45 (ddd, 1H, J = 3.9, 6.0, 13.5, R-NH-CH₂-R), 3.95 (m, 1H, R-CH₂-OH), 4.03 (s, 2H, R-CH₂-Cl), 5.42 (d, 1H, J = 5.1, Ar-O-CH₂-R), 7.72-6.60 (m, 9H, Ar-H), 8.12 (t, 1H, R-NH-R). ESI-MS: calcd MW for C₁₇H₁₇NO₃ClI: 445, found 468 [M + Na⁺].

(2R,3R)/(2S,3S)-2-[α-(2-iodophenoxy)benzyl)morpholine-5-one (8a)

A solution of (2S,3S)-7a (1.3 g, 2.9 mmol) in t-butanol (4 mL) and CH₂Cl₂ (9 mL) was added drop-wise over 1 h to a solution of potassium t-butoxide (0.52 g, 4.6 mmol) in t-butanol (12 mL). The mixture was stirred for one more hour, neutralized with 10 % HCl and extracted with CH₂Cl₂. The organic layer was then dried over Na₂SO₄, and evaporated. The crude product was purified by column chromatography (eluent 50:50 ethyl acetate:hexane) to yield (2S,3S)-8a (2.3 mmol, 79 %).

¹H NMR (DMSO): δ 2.78 (dt, 1H, J = 3.9, 12.0, R-NH-CH₂-R), 3.25 (t, 1H, J = 11.7, R-NH-CH₂-R), 3.97 (d, 1H, J = 12.3, R-O-CH₂-R), 4.05 (d, 1H, J = 12.6, R-O-CH₂-R), 4.15 (ddd, 1H, J = 3.3, 6.0, 10.5, R-CH₂-CH₂-NH-R), 5.61 (d, 1H, J = 103
5.1, Ar-O-CH(R), 7.72 - 6.56 (m, 9H, Ar-H), 7.92 (d, 1H, R-NH-R). ESI-MS: calcd MW for C_{17}H_{16}NO_3I: 409, found 448 [M + K^+].

(2R,3R)/ (2S,3S)-2-[a-(2-iodophenoxy)benzyl]morpholine (9a)

A mixture of (2S,3S)-8a (0.94 g, 2.3 mmol) and BH₃ (12 mL of a 1 M solution in THF) in THF (30 mL) was stirred for 2 h at room temperature. The mixture was added to acetic acid (50 % in water, 20 mL) and THF was evaporated. Potassium carbonate was added until a pH of 9 was reached and the resulting solution was extracted with CH₂Cl₂. The combined CH₂Cl₂ fractions were dried over Na₂SO₄, concentrated under reduced pressure and then purified by column chromatography (eluent 15:85 ethyl acetate:hexane) to yield (2S,3S)-9a, also termed (S,S)-IPBM (0.7 mmol, 30 %) as a colourless oil.

¹H NMR (CDCl₃): δ 2.45 (m, 1H, R-O-CH₂-CH₂-R), 2.61 (m, 1H, R-O-CH₂-CH₂-R), 3.04 (m, 2H, R-O-CH₂-R), 3.58 (m, 1H, R-CH-CH₂-NH-R), 3.90 (ddd, 1H, J = 2.1, 5.1, 11.4, R-CH₂-CH₂-NH-R), 4.00 (dd, 1H, J = 3.6, 5.4, R-CH₂-CH₂-NH-R), 5.17 (d, 1H, J = 5.1, Ar-O-CH-H), 7.43-6.59 (m, 9H, Ar-H). ESI-MS: calcd MW for C_{17}H_{18}NO_2I: 395, found 396 [M + H^+].

5.3.1.2. Precursor synthesis

(2S,3S)-9b was synthesized in the same manner as (2S,3S)-9a, using 2-bromophenol as a starting material instead of 2-iodophenol.

(2S,3R)/(2R,3S)-1,2-dihydroxy-3-(2-bromophenoxy)-3-phenyl-propane (1b)

A mixture of 2-bromophenol (3.5 mL, 30 mmol), methyltributylammonium chloride (0.6 mL) and 0.05 M NaOH (30 mL) was stirred at 70°C for 2 h. (2R,3R)-phenylglycidol (1.5 g, 10 mmol dissolved in 50 mL H₂O) was added drop-wise and the resulting mixture was heated for another 3 h. The reaction
mixture was cooled to room temperature, added to ice-cold NaOH (1 M, 30 mL) and extracted with CH$_2$Cl$_2$ (3 x 50 mL). The organic layer was washed with 1 M NaOH (100 mL), water (100 mL) and brine (100 mL), dried over Na$_2$SO$_4$, and the solvent was removed under reduced pressure to afford a viscous oil. The crude product was purified by column chromatography (eluent: ethyl acetate/hexane 30/70) to give 9 mmol of (2R,3S)-1b (90 %).

$^1$H NMR (DMSO): $\delta$ 3.70-3.55 (m, 2H, R-CH$_2$-OH), 3.78 (m, 1H, R$_2$-CH$_2$-OH), 4.65 (t, 1H, $J$ = 5.6, R-CH$_2$-OH), 4.94 (d, 1H, $J$ = 5.6, R$_2$-CH$_2$-OH), 5.32 (d, 1H, $J$ = 6.2, Ar-O-CH-R), 7.56-6.8 (m, 9H, Ar-H). ESI-MS: calcd MW for C$_{15}$H$_{15}$O$_3$Br: 323, found 346 [M + Na$^+$].

**2S,3R)/(2R,3S)-2-hydroxy-3-(2-bromophenoxy)-1-(t-butyldimethylsilyloxy)-3-phenylpropane (2b)**

tert-Butyldimethylsilyl chloride (1.6 g, 10.6 mmol) dissolved in 5 mL DMF, was added drop-wise to an ice-cold solution of (2R,3S)-1b (2.9 g, 9 mmol) and imidazole (1.5 g, 22.1 mmol) in DMF (8 mL). After stirring for 80 min at 0°C, the reaction mixture was added to a separatory funnel containing 100 mL water and 100 mL ethyl acetate. After extraction, the organic layer was dried over Na$_2$SO$_4$ and evaporated to afford a crude oil, which was used without further purification.

**2S,3R)/(2R,3S)-3-(2-bromophenoxy)-2-mesyloxy-1-(t-butyldimethylsilyloxy)-3-phenylpropane (3b)**

A mixture of crude (2R,3S)-2b (9 mmol), Et$_3$N (1.9 mL, 13.7 mmol) and ethyl acetate (11 mL) was stirred at 0°C. Methanesulfonyl chloride (0.831 mL, 10.7 mmol) was dissolved in ethyl acetate (5 mL) and added to the reaction mixture over 30 min. Afterwards, the mixture was stirred for an additional 2 h at 0°C. The organic layer was washed with water, dried over Na$_2$SO$_4$ and evaporated. The resulting crude oil, (2R,3S)-3b, was used without further purification.
(2S,3R)/(2R,3S)-3-(2-bromophenoxy)-2-mesyloxy-3-phenyl-1-propanol (4b)

A solution of crude (2R,3S)-3b (9 mmol), THF (27 mL) and 1 M tetrabutylammonium fluoride solution in THF (14.7 mL) was stirred for 30 min at room temperature. The reaction was quenched with water (5 mL). The layers were separated and the aqueous layer was extracted with CH₂Cl₂. The combined organic extract was washed with brine (2 x 100 mL), dried over Na₂SO₄, and the solvent was removed under reduced pressure to offer a crude residue. The residue was purified with column chromatography (eluent: 30% ethyl acetate/hexane) to yield 8 mmol (89% over the three steps) (2R,3S)-4b.

¹H NMR (CDCl₃): δ 2.65 (s, 3H, S-CH₃), 4.02 (dd, 1H, J = 3.0, 12.6, R-CH₂-OH), 4.22 (dd, 1H, J = 5.4, 12.6, R-CH₂-OH), 4.88 (m, 1H, R₂-CH-OMs), 5.50 (d, 1H, J = 5.7, Ar-O-CH-R), 7.46 - 6.62 (m, 9H, Ar-H). ESI-MS: calcd MW for C₁₆H₁₇O₅SBr: 401, found 402 [M + H⁺].

(2R,3R)/(2S,3S)-1,2-epoxy-3-(2-bromophenoxy)-3-phenylpropane (5b)

A solution of the mesylate (2R,3S)-4b (3.2 g, 8 mmol), toluene (18.6 mL), 4 M NaOH (18.6 mL) and methyltributylammonium chloride (2.26 mL, 9 µmol) was stirred vigorously for 2 h at room temperature. The solution was diluted with water (50 mL) and the product was extracted into CH₂Cl₂ (3 x 50 mL). The organic layer was dried over Na₂SO₄, evaporated under reduced pressure followed by purification of the product using column chromatography to afford (2S,3S)-5b (5.5 mmol, 69%).

¹H NMR (CDCl₃): δ 2.81 (m, 2H, R-O-CH₂-CH-R), 3.48 (m, 1H, Ar-O-CH-CH-R), 4.95 (d, 1H, J = 6, Ar-O-CH-R), 7.46 - 6.62 (m, 9H, Ar-H). ESI-MS: calcd MW for C₁₅H₁₃O₃Br: 305, found 328 [M + Na⁺].
(2R,3R)/(2S,3S)-1-amino-2-hydroxy-3-(2-bromophenoxy)-3-phenylpropane (6b)

A solution of (2S,3S)-5b (1.7 g, 5.5 mmol) in MeOH (35 mL) and 30 % NH₄OH (24 mL) was stirred overnight. The solution was diluted with saturated NaHCO₃ and extracted with CH₂Cl₂. After filtering over Na₂SO₄, CH₂Cl₂ was removed under reduced pressure. Purification with column chromatography (5:95 MeOH:CH₂Cl₂) yielded (2S,3S)-6b (3.7 mmol, 67 %).

1H NMR (DMSO): δ 2.31 (dd, 1H, J = 8.1, 12.6, R-CH₂-NH₂), 2.61 (dd, 1H, J = 3.9, 12.9, R-CH₂-NH₂), 3.79 (m, 1H, R-CH⁻OH), 5.05 (bs, 2H, NH₂), 5.42 (d, 1H, J = 5.7, Ar-O-CH⁻R), 7.56 - 6.75 (m, 9H, Ar-H). ESI-MS: calcd MW for C₁₅H₁₆O₂NBr: 322, found 323 [M + H⁺].

(2R,3R)/(2S,3S)-1-chloroacetylamino-2-hydroxy-3-(2-bromophenoxy)-3-phenylpropane (7b)

The amine (2S,3S)-6b (1.2 g, 3.7 mmol) was dissolved in CH₂Cl₂ (16 mL) and Et₃N (0.626 mL, 4.5 mmol). The solution was kept at –10°C and chloroacetyl chloride (0.318 mL, 4 mmol) dissolved in CH₂Cl₂ (7 mL) was added slowly followed by stirring for 1 h. The solution was quenched with water and subsequently extracted with ethyl acetate. The combined ethyl acetate portion was dried over Na₂SO₄, and the solvent was removed under reduced pressure to afford a crude oil. The crude product was purified by column chromatography (eluent 35:65 ethyl acetate:hexane) to give 2.7 mmol (73 %) of (2S,3S)-7b.

1H NMR (DMSO): δ 2.87 - 2.94 (ddd, 1H, J = 5.4, 8.4, 13.2, R-NH-CH₂-R), 3.25 – 3.45 (ddd, 1H, J = 3.9, 6.0, 13.5, R-NH-CH₂-R), 3.95 (m, 1H, R-CH⁻OH), 4.03 (s, 2H, R-CH₂-Cl), 5.42 (d, 1H, J = 5.1, Ar-O-CH⁻R), 7.56 - 6.74 (m, 9H, Ar-H), 8.12 (t, 1H, R-NH⁻R). ESI-MS: calcd MW for C₁₇H₁₇O₃NClBr: 398, found 421 [M + Na⁺].
\((2R,3R)/(2S,3S)-2-[\alpha-(2\text{-bromophenoxy})\text{benzyl}]\text{morpholine-5-one (8b)}\)

A solution of \((2S,3S)-7b\) (1.1 g, 2.7 mmol) in \(t\)-butanol (3.5 mL) and \(\text{CH}_2\text{Cl}_2\) (8.6 mL) was added drop-wise over 1 h to a solution of potassium \(t\)-butoxide (482 mg, 4.3 mmol) in \(t\)-butanol (10.8 mL). The mixture was then stirred for one more hour, neutralized with 10 \% HCl and extracted with \(\text{CH}_2\text{Cl}_2\). The organic layer was then dried over \(\text{Na}_2\text{SO}_4\) and evaporated. The crude product was purified by column chromatography (elucent 50:50 ethyl acetate:hexane) to yield compound \((2S,3S)-8b\) (2.1 mmol, 78 \%).

\(^1\text{H NMR (DMSO):} \delta 2.78 \text{ (dt, 1H, } J = 3.9, 12.3, \text{ R-NH-CH}_2\text{-R}), 3.25 \text{ (t, 1H, } J = 11.7, \text{ R-NH-CH}_2\text{-R}), 3.97 \text{ (d, 1H, } J = 12.3, \text{ R-O-CH}_2\text{-R}), 4.05 \text{ (d, 1H, } J = 12.6, \text{ R-O-CH}_2\text{-R}), 4.15 \text{ (ddd, 1H, } J = 3.3, 6.0, 10.5, \text{ R-CH-CH}_2\text{-NH-R}), 5.61 \text{ (d, 1H, } J = 5.1, \text{ Ar-O-CH}_1\text{-R}), 7.54 - 6.74 \text{ (m, 9H, Ar-H)}, 7.92 \text{ (d, 1H, R-NH-R). ESI-MS: calcd MW for C}_{17}\text{H}_{16}\text{O}_3\text{NBr: 362, found 401 [M + K^+].}\

\((2R,3R)/(2S,3S)-2-[\alpha-(2\text{-bromophenoxy})\text{benzyl}]\text{morpholine (9b)}\)

A mixture of \((2S,3S)-8b\) (0.76 g, 2.1 mmol) and 1 M \(\text{BH}_3\) solution in \(\text{THF}\) (11 mL) in \(\text{THF}\) (30 mL) was stirred for 2 h at room temperature. The mixture was added to acetic acid (50 \% in water, 20 mL) and \(\text{THF}\) was evaporated. Potassium carbonate was added until pH of 9 was reached and the resulting solution was extracted with \(\text{CH}_2\text{Cl}_2\). The combined \(\text{CH}_2\text{Cl}_2\) fractions were dried over \(\text{Na}_2\text{SO}_4\), concentrated under reduced pressure and then purified by column chromatography (elucent 15:85 ethyl acetate:hexane) to give \((2S,3S)-9b\) (0.8 mmol, 38 \%) as a colourless oil.

\(^1\text{H NMR (CDCl}_3\):} \delta 2.52 \text{ (m, 1H, R-O-CH}_2\text{-CH}_2\text{-R}), 2.68 \text{ (m, 1H, R-O-CH}_2\text{-CH}_2\text{-R}), 3.14 \text{ (m, 2H, R-O-CH}_2\text{-R}), 3.68 \text{ (td, 1H, } J = 2.1, 12.6, \text{ R-CH-CH}_2\text{-NH-R}), 3.90 \text{ (ddd, 1H, } J = 2.1, 5.1, 11.4, \text{ R-CH-CH}_2\text{-NH-R}), 4.08 \text{ (dd, 1H, } J = 3.6, 5.4, \text{ R-CH-CH}_2\text{-NH-R}), 5.25 \text{ (d, 1H, } J = 5.1, \text{ Ar-O-CH}_1\text{-R}), 7.52 - 6.68 \text{ (m, 9H, Ar-H). ESI-MS: calcd MW for C}_{17}\text{H}_{18}\text{O}_2\text{NBr: 348, found 349 [M + H^+].}
(2R,3R)/(2S,3S)-2-[α-(2-trimethylstannaneoxy)benzyl]morpholine-5-one (10)

0.06 mmol (2S,3S)-8b (23 mg), hexamethyldistannane (37 µL, 0.18 mmol), and a catalytic amount of tetrakis(triphenylphosphine)palladium were dissolved in 5 mL toluene. The mixture was shielded from light and refluxed overnight. The reaction mixture was filtered and the solvent was evaporated under reduced pressure. Purification of the crude product with preparative TLC (eluent 90:10 ethyl acetate:hexane) afforded (2S,3S)-10 (0.021 mmol, 35 %) as a yellow oil.

\(^1\)H NMR (DMSO): δ 0.27 (s, 9H, 3*Sn -CH\(_3\)) 2.78 (m, 1H, R-NH-CH\(_2\)-R), 3.25 (m, 1H, R-NH-CH\(_2\)-R), 4.18-3.98 (m, 3H, R-CH\(_2\)-O-CH\(_2\)-R), 5.61 (d, 1H, J = 5.4, Ar-O-CH-R), 7.49 - 6.85 (m, 9H, Ar-H). ESI-MS: calcld MW for C\(_{20}\)H\(_{25}\)O\(_3\)NSn: 445, found 446 [M + H\(^+\)].

5.3.2. ENANTIOMERIC PURITY

The enantiomeric purity of the precursor was evaluated using a Bruker DRX500 300 Mhz NMR spectrometer (Department of Organic Chemistry, Ghent University, Belgium). Chemical shifts were recorded in ppm (δ) relative to an internal TMS standard in CDCl\(_3\). To control enantiomeric purity, 1 equivalent chiral shift reagents, europium tris[3-(heptafluoropropylhydroxymethylene)-(−)-camphorate] (Eu(hfc)\(_3\)) was added to the NMR sample.

5.3.3. RADIOCHEMISTRY

\([^{123}\text{I}]-(S,S)-\text{IPBM}\) was obtained in two steps. First, an electrophilic iododestannylation on the trimethylstannyln precursor (2S,3S)-10 was accomplished. In the following step, \([^{123}\text{I}]-(2S,3S)-8a\) was reduced to yield \([^{123}\text{I}]-(S,S)-\text{IPBM}\).
The precursor (2\(\delta\),3\(\delta\))-10 (200 \(\mu\)g, 0.45 \(\mu\)mol) was dissolved in absolute ethanol (50 \(\mu\)L). Chloramine-T (1.0 \(\mu\)mol, 15 \(\mu\)L of a 20 mg/ml aqueous solution), n.c.a. \[^{123}\text{I}\]NaI (dissolved in 0.05 M NaOH, 5 – 10 \(\mu\)L, 37 - 185 MBq), and glacial acetic acid (5 \(\mu\)L) were added. The radiolabelling proceeded for 10 min at room temperature. The reaction was quenched by the addition of sodium metabisulfite (1.6 \(\mu\)mol, 15 \(\mu\)L of a 20 mg/ml aqueous solution). After the solution was evaporated under nitrogen stream, 100 \(\mu\)L THF and 50 \(\mu\)L BH\(_3\) (1 M solution in THF) were added to the ice-cold reaction vessel. The mixture was allowed to react during 40 min at room temperature. HPLC mobile phase was added (100 \(\mu\)L CH\(_3\)CN:H\(_2\)O:HCOOH 55:45:0.1) and the mixture was injected onto a RP C\(_{18}\) HPLC column (Alltima, 250 mm * 4.6 mm, 5 \(\mu\)m) for purification at a flow rate of 1 mL/min. The fraction corresponding to \[^{123}\text{I}\]-(\(\delta\),\(\delta\))-IPBM (\(T_r\) = 21 min) was collected, diluted with sterile water and concentrated on an activated C\(_{18}\) Sep-pak cartridge (Alltech Maxi-Clean Prevail C\(_{18}\)). \[^{123}\text{I}\]-(\(\delta\),\(\delta\))-IPBM was eluted from the Sep-pak column with 1 mL EtOH. Finally the EtOH was diluted with physiological saline to obtain an injectable solution (< 10 % (v:v) EtOH).

5.3.4. QUALITY CONTROL

The radioanalytical data were obtained by injecting 100 \(\mu\)L test solution on an analytical RP-HPLC (Alltima C\(_{18}\), 250 mm x 4.6 mm, 5 \(\mu\)m) using 55:45:0.1 (v:v) - CH\(_3\)CN:H\(_2\)O:HCOOH as mobile phase at a flow rate of 1 mL/min. Radiochemical purity and identity was determined by co-injection of an aliquot of \[^{123}\text{I}\]-(\(\delta\),\(\delta\))-IPBM with authentic cold reference product.

A calibration curve between 10 x 10\(^{-3}\) \(\mu\)M and 0.1 x 10\(^{-3}\) \(\mu\)M and subsequently a more detailed calibration curve between 0.6 x 10\(^{-3}\) \(\mu\)M and 0.1 x 10\(^{-3}\) \(\mu\)M was determined. Log \(D_{7,4}\) was determined according to the method described in Chapter 4.
5.3.5. BIODISTRIBUTION STUDY

Male NMRI mice of 5 - 7 weeks old, weighing 22 - 26 g were injected in a tail vein with 200 µL 8:92 (v:v) - EtOH:physiological saline containing approximately 185 kBq (5 µCi) $[^{123}\text{I}]-\text{SS}$-IPBM. The mice were awake during the injection. At various time points p.i. mice ($n=3$ for each time point) were sacrificed under isoflurane anaesthesia and dissected. Blood, urine and organs were removed, weighed and counted for radioactivity in a gamma counter. To remove adhering blood, all organs were rinsed with water prior to weighing and counting. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. Results are decay corrected and expressed as a percentage of the injected dose per gram of tissue (% ID/g) ± SD.
5.4. Results & Discussion

5.4.1. ORGANIC SYNTHESIS

Figure 5.2 Synthesis of halogenated reboxetine analogues

a $R_1=I$; b $R_1=Br$ Reagents: (i) 2-halogenated phenol, aq. NaOH; (ii) t-butyldimethylsilyl chloride, DMF, imidazole; (iii) methanesulfonyl chloride, Et$_3$N, ethyl acetate; (iv) tetrabutylammonium chloride, THF; (v) aq. NaOH, toluene; (vi) 30% NH$_4$OH, MeOH; (vii) chloroacetylchloride, Et$_3$N, CH$_2$Cl$_2$; (viii) potassium t-butoxide, t-butanol; (ix) BH$_3$, THF

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The same procedure by which we were able to synthesize \((S,S)\)-IPBM, was also applied to synthesize \((R,R)\)-IPBM, \((2S,3S)\)-9b and \((2R,3R)\)-9b (Figure 5.2).

The key stereogenic centers of \((S,S)\)-IPBM were created by regioselective ring opening with 2-iodophenol of the enantiomerically pure starting compound, \((2R,3R)\)-phenylglycidol. The resulting diol, \((2R,3S)\)-1a was isolated in a 95 % yield. The primary hydroxyl group of \((2R,3S)\)-1a was selectively protected with a trimethylsilyl group to give \((2R,3S)\)-2a. Compound \((2R,3S)\)-4a (yield of 92 %) was prepared by reaction of the secondary hydroxyl group of 2a with methanesulfonyl chloride, followed by removal of the trimethylsilyl group with tetrabutylammonium fluoride. Treatment of \((2R,3S)\)-4a with NaOH in toluene afforded the epoxide \((2S,3S)\)-5a in 57 % yield. This reaction occurred via an SN2 mechanism resulting in inversion of configuration at the chiral C2 carbon. Consequently the configuration changed from \((2R,3S)\) to \((2S,3S)\). The reaction of \((2S,3S)\)-5a with NH₄OH in MeOH yielded the amino alcohol \((2S,3S)\)-6a (72 %).

Compound \((2S,3S)\)-6a was then transformed into the final morpholine in three steps. Treatment of \((2S,3S)\)-6a with chloroacetyl chloride to give compound \((2S,3S)\)-7a (81 % yield) was followed by cyclization with potassium t-butyloxide. The resulting morpholinone \((2S,3S)\)-8a (79 % yield) was then reduced to give \((2S,3S)\)-9a in a 30 % yield by the use of BH₃. Several reducing agents were tested but most of them tended to dehalogenate the phenyl group as well. \((2S,3S)\)-9a was synthesized in an overall chemical yield of 7 % whereas \((2S,3S)\)-9b was obtained with a 8 % overall chemical yield. The low general chemical yields are a result of the low yield in the final step. Excluding the last step the overall chemical yields were 23 % and 21 % for \((2S,3S)\)-9a and \((2S,3S)\)-9b, respectively.

### 5.4.2. ENANTIOMERIC PURITY

The optical rotation of both \((2S,3S)\)-9b and \((2R,3R)\)-9b was determined: \((2S,3S)\)-9b \(\\alpha_D = -65.6^\circ\ \\ (\varepsilon = 1.25, \text{MeOH})\) and \((2R,3R)\)-9b \(\\alpha_D = +72.8^\circ\ \\ (\varepsilon = 0.95, \text{MeOH})\). The enantiomeric purity was assessed by NMR analysis with and
without the addition of chiral shift reagent. Addition of Eu(hfc)$_3$ to the samples resulted in a shift of 0.2 ppm of the signal at 5.25. This indicated that the samples have an enantiomeric excess of more then 95%.

5.4.3. RADIOCHEMISTRY

Since radiosynthesis accomplished by an iodine-bromine exchange reaction is often difficult to purify, we choose to produce $[^{123}\text{I}]-\langle S,S\rangle$-IPBM by electrophilic substitution. Unfortunately we were not able to replace the bromine of $\langle 2S,3S\rangle$-$9b$ by a tributylstannyl group or trimethylstannyl group. Alternatively, $[^{123}\text{I}]-\langle S,S\rangle$-IPBM was synthesized in two steps starting from $\langle 2S,3S\rangle$-$10$. The tributylstannyl precursor $\langle 2S,3S\rangle$-$10$ was synthesized in a 35 % yield. Radioiodination of $\langle 2S,3S\rangle$-$10$, yielded $[^{123}\text{I}]-\langle 2S,3S\rangle$-$8a$ which was immediately reduced to give $[^{123}\text{I}]-\langle S,S\rangle$-IPBM. The radiochemical yield was approximately 10 %.

**Figure 5.3** Radiosynthesis of $[^{123}\text{I}]-\langle S,S\rangle$-IPBM

- a EtOH, chloramine-T, glacial acetic acid, n.c.a. Na$^{123}$I
- b THF, BH$_3$ (1 M in THF)

5.4.4. QUALITY CONTROL AND LOG D$_{7.4}$

Co-injection of the obtained radiotracer and cold reference compound illustrated similar retention times for $[^{123}\text{I}]-\langle S,S\rangle$-IPBM and $\langle S,S\rangle$-IPBM, confirming the identity of the radiotracer. Radiochemical purity was > 98 %. Since no UV-signal was observed for the amount $[^{123}\text{I}]-\langle S,S\rangle$-IPBM synthesized, the detection limit was applied for calculation of the specific activity. Using the described
radioanalytical method, the detection limit for $[^{123}\text{I}](S,S)$-IPBM was $0.25 \times 10^{-3}$ µM. Specific activity appeared to be at least 148 GBq/µmol (4 Ci/µmol).

An ideal log $D_{7.4}$ value for brain radiotracers is between 1.5 and 3.5 (Waterhouse, 2003). The determined log octanol/PBS partition coefficient was found to be 1.9 ± 0.05 %, which is suitable for brain penetration.

5.4.5. BIODISTRIBUTION STUDY

Results of the biodistribution study are shown in Table 5.1. $[^{123}\text{I}](S,S)$-IPBM displayed an excellent brain uptake ($4.62 \pm 0.66$ % ID/g at 1 min p.i.) followed by a good wash-out ($0.55 \pm 0.17$ % ID/g at 180 min p.i.) At each time point, brain activity remained higher than radioactivity uptake in blood (Figure 5.4).

![Figure 5.4 Blood-brain distribution of $[^{123}\text{I}](S,S)$-IPBM in NMRI mice](image)

Values are expressed as % ID/g ± SD ($n=3$)

Other organs with high tracer uptake were heart ($12.65 \pm 2.43$ % ID/g at 1 min p.i.) and lungs ($69.21 \pm 8.02$ % ID/g at 1 min p.i.). Radioactivity uptake in liver increased until 20 min p.i. and then declined. High uptake was seen in small intestines ($10.53 \pm 3.84$ % ID/g at 180 min p.i.) and large intestines ($14.90 \pm 5.53$ % ID/g at 180 min p.i.), suggesting biliary clearance of $[^{123}\text{I}](S,S)$-IPBM. High kidney uptake ($10.91 \pm 1.07$ % ID/g at 5 min p.i.) and urine (data not shown) radioactivity uptake, show that urinary clearance of $[^{123}\text{I}](S,S)$-IPBM also occurred.
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<td>2.70 ± 0.86</td>
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<td>10.81 ± 4.23</td>
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<td>9.86 ± 3.17</td>
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<td>0.66 ± 0.24</td>
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Values are expressed as % ID/g ± SD (n=3)
5.5. Conclusion

As an effort to develop a potent SPECT imaging agent for brain NET, an iodinated reboxetine derivate, $[^{123}I]-(S,S)$-IPBM, was synthesized. Both the precursor and cold reference compound were prepared stereoselectively by a nine-step synthetic procedure. NMR analysis with Eu(hfc)$_3$ as chiral shift reagent showed an enantiomeric excess of 95% using the described stereoselective procedure. $[^{123}I]-(S,S)$-IPBM was obtained by radioiodination of $(2S,3S)$-10, followed by reduction with a radiochemical purity of > 98% and a specific activity of at least 148 GBq/µmol (4 Ci/µmol). In vivo evaluation showed a rapid and marked accumulation in the brain. The radioactivity in blood was cleared rapidly, and the brain to blood ratio, an essential factor for brain imaging, was high.

Unfortunately, at the time we performed our biodistribution study, a report about the synthesis and evaluation of the same compound, $[^{123}/^{125}I]-(S,S)$-IPBM was published (Kanegawa et al., 2006). Only a few months later, an article concerning an in vivo evaluation of $[^{123}I]-(S,S)$-IPBM in primates was published (Tamagnan et al., 2007). Since $[^{125}I]-(S,S)$-IPBM was described by others, we performed no further attempts to increase the radiochemical yield and did not conduct additional in vivo studies.

Kanegawa et al. radiosynthesized $[^{125}I]-(S,S)$-IPBM by bromine-iodine exchange. They reported a yield of 65% but they gave no information about the obtained specific activity and chemical purity. They performed a biodistribution study in Sprague-Dawley rats using $[^{125}I]-(S,S)$-IPBM. The accumulation of radioactivity was greater in NET-rich regions, such as the thalamus and cortex, than in the striatum, a NET-poor region (Tejani-Butt, 1992). The ratio of radioactivity in other brain regions to that in the striatum was highest at 180 min p.i. Ex vivo autoradiographic analyses demonstrated the highest level of radioactivity in the locus coeruleus and anteroventricular thalamic nucleus, which are known to be
rich in NET. The NET-selective agent nisoxetine reduced the accumulation of radioactivity in the NET-rich regions to that of the striatum whereas fluoxetine, a selective agent for the serotonin transporter, and GBR12909, a DAT-selective agent did not affect the accumulation of $[^{125}\text{I}]-\text{(S,S)-IPBM}$. Additionally, a SPECT study in a marmoset with $[^{123}\text{I}]-\text{(S,S)-IPBM}$ exhibited a regional localization consistent with the known densities of NET and $[^{123}\text{I}]-\text{(S,S)-IPBM}$ accumulation could be displaced by treatment with nisoxetine (Kanegawa et al., 2005).

Tamagnan et al. applied the electrophilic substitution method to yield $[^{123}\text{I}]-\text{(S,S)-IPBM}$ but no information concerning their radiochemical yield and specific activity was added. They performed a dynamic SPECT imaging study in an adult female baboon. Regional brain tracer uptake is consistent with the distribution of NET in the baboon brain, with the highest uptake in locus coeruleus and thalamus, and lowest uptake in cerebellum and striatum. To assess the pharmacological specificity, reboxetine was injected which resulted in a reduction of radioactivity in all brain regions with the most pronounced reduction in NET-rich regions. In contrast, displacement with citalopram or methylphenidate did not show any displacement of $[^{123}\text{I}]-\text{(S,S)-IPBM}$ (Tamagnan et al., 2007).

The lack of data in their study makes it unfeasible to compare the different synthetic and radiosynthetic procedures whereas the in vivo data can not be compared due to differences in the experimental design.

Regarding the results of Tamagnan et al. (2007) and Kanegawa et al. (2006), we can state that the choice to develop $[^{123}\text{I}]-\text{(S,S)-IPBM}$ as radiotracer for NET was an excellent suggestion.

5.6. References


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Chapter 6

Radiosynthesis and in vivo evaluation of $[^{11}C]$-labelled pyrrole-2-carboxamide derivatives for MAO-A imaging

De Bruyne S.1, La Regina G.2, Staelens S.3, Wyffels L.1, Deleye S.3, Silvestri R.2, De Vos F.1

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1 Laboratory for Radiopharmacy, Ghent University, Harelbekestraat 72, 9000 Ghent, Belgium
2 Dipartimento di Chimica e Tecnologie del Farmaco, Sapienza University of Rome, P.le Aldo Moro 5, 00185 Roma - Italy
3 IBITECH-Medisip, Ghent University-IBBT, De Pintelaan 185, 9000 Ghent, Belgium
Chapter 6

Radiosynthesis and \textit{in vivo} evaluation of $[^{11}\text{C}]$-labelled pyrrole-2-carboxamide derivatives for MAO-A imaging

6.1. Abstract

\textit{Aim:} The search for new PET ligands for MAO-A with optimal properties is justified by the lack of an ideal ligand and the observation that fluctuations in MAO-A functionality are associated with human diseases. This study reports the radiolabelling of $[^{11}\text{C}]$-labelled $1\text{H}$-pyrrole-2-carboxamide derivatives, RS 2315 and RS 2360, and the characterization of their \textit{in vivo} properties.

\textit{Methods:} The radiolabelling of $[^{11}\text{C}]$-RS 2315 and $[^{11}\text{C}]$-RS 2360 was accomplished by methylation of the amide precursors with $^{11}\text{CH}_3\text{I}$. Biodistribution, blocking and metabolite studies of both tracers were performed in NMRI mice. Finally, a PET study in Sprague-Dawley rats was performed for $[^{11}\text{C}]$-RS 2360.

\textit{Results:} Both tracers were obtained in a radiochemical yield of approximately 30% with radiochemical purity of $>98\%$. Biodistribution studies showed high brain uptake followed by rapid brain clearance for both radiotracers. In the brain, $[^{11}\text{C}]$-RS 2360 was more stable than $[^{11}\text{C}]$-RS 2315. Blocking studies in mice could not demonstrate specificity of $[^{11}\text{C}]$-RS 2315 towards MAO-A or B. The blocking and imaging study with $[^{11}\text{C}]$-RS 2360 on the other hand indicated specific binding at MAO-A at the earliest time points.

\textit{Conclusion:} These results indicate that $[^{11}\text{C}]$-RS 2315 is not suitable for mapping MAO-A \textit{in vivo} and that further research is necessary to investigate the potential of $[^{11}\text{C}]$-RS 2360 in MAO-A imaging.
6.2. *Introduction*

Because of the ability of MAO to catabolise neurotransmitters, MAO is involved in several psychiatric and neurological disorders (Meyer et al., 2006; Heafield and Williams, 1992) as well as in behaviour (Shih and Thompson, 1999; Alia-Klein et al., 2008; Brunner et al., 1993) and tobacco addiction (Fowler et al., 1996; Berlin et al., 1995). A very efficient non-invasive method to study enzymes *in vivo* is visualization with PET. There are only a few PET tracers for MAO-A designed and they all have their own drawbacks. The first developed radiotracer, $[^{11}\text{C}]$clorgyline, displayed an unexplained species difference (Fowler et al., 2001; Bergström et al., 1997). In contrast to results in humans, clorgyline was not retained in baboon brain. Another MAO-A tracer, $[^{11}\text{C}]$befloxatone is synthesized with $[^{11}\text{C}]$phosgene which is toxic and is rather rare available (Dolle et al., 2003). The drawback of $[^{11}\text{C}]$harmine is its extensive metabolism in plasma with only 10% intact product at 10 min p.i. (Bergström et al., 1997).

The search for new ligands with optimal properties is justified by the lack of an ideal ligand and the observation that fluctuations in MAO-A functionality are associated with human diseases and tobacco addiction.

A series of new pyrrole derivatives have been synthesized and evaluated for their MAO-A and -B inhibitory activity and selectivity (La Regina et al., 2007). Out of this new class of MAO inhibitors we selected the most potent inhibitors for MAO-A: N-(phenethyl)-N-methyl-1H-pyrrole-2-carboxamide (RS 2315) and (R)-N-(α-cyclohexylethyl)-N-methyl-1H-pyrrole-2-carboxamide (RS 2360) (Figure 6.1). Their $K_i$ values are 7 nM and 1.7 nM for MAO-A and 12 nM and 30 nM for MAO-B, for RS 2315 and RS 2360, respectively (La Regina et al., 2007).
The present study reports the radiolabelling and purification of $^{11}$C labelled RS 2315 and RS 2360. Their partition coefficient is determined. Specific activity and radiochemical purity are reported. [$^{11}$C]-RS 2315 and [$^{11}$C]-RS 2360 are both evaluated in vivo. First, a biodistribution study in NMRI mice is performed to assess their ability to cross the blood-brain barrier. A blocking study is conducted to investigate their in vivo selectivity and specificity. Possible metabolism of [$^{11}$C]-RS 2315 and [$^{11}$C]-RS 2360 is verified by analyzing mouse blood and brain samples on HPLC. Finally, a PET study in Sprague-Dawley rats is performed for the most promising radiotracer.

6.3. Materials & Methods

6.3.1. GENERAL

The starting compounds N-(phenethyl)-1H-pyrrole-2-carboxamide (RS 2115) and (R)-N-(α-cyclohexylethyl)-1H-pyrrole-2-carboxamide (RS 2226) as well as the cold reference compounds RS 2315 and RS 2360 for this study were kindly provided by Dipartimento di Chimica e Tecnologie del Farmaco, Sapienza University of Rome, Italy (La Regina et al., 2007).
6.3.2. RADIOCHEMISTRY

The alkylating reagent $[^{11}\text{C}]$methyl iodide was prepared from $[^{11}\text{C}]$methane by gas-phase iodination. The production of both $^{11}\text{CH}_4$ and $^{11}\text{CH}_3\text{I}$ is described in Chapter 4.

6.3.2.1. $[^{11}\text{C}]$-RS 2315

A solution of 3 µmol precursor RS 2115 in DMSO/DMF (189 µL/60 µL) and 1 µL tetrabutylammonium hydroxide (TBAH) was added to a reaction vessel and the mixture was cooled in an ice bath. A stream of helium containing the alkylating agent $^{11}\text{CH}_3\text{I}$ was bubbled through the reaction mixture until maximum of $^{11}\text{C}$ activity was trapped. The reaction mixture was heated in an oil bath at 65°C for 10 min and subsequently diluted with 200 µL HPLC eluent and purified with semipreparative C$_{18}$ HPLC (Econosphere, 10 µm, 10 mm x 250 mm; Grace Davison Discovery Sciences, Lokeren, Belgium) using a smartline UV detector 2500 (Knauer, Berlin, Germany) set at 254 nm. Radiodetection occurred by a solar-blind P.I.N. photodiode. Elution was carried out at 6 mL/min flow rate with 45 % (v/v) CH$_3$CN in 0.02 M sodium acetate buffer (pH 4.5) as mobile phase. The fraction containing $[^{11}\text{C}]$-RS 2315 was collected into a vessel with 40 mL sterile water and loaded on a C$_{18}$ Sep-pak (Alltech Maxi-clean SPE Prevail C$_{18}$, previously activated with 1 mL EtOH and 5 mL sterile water). After the cartridge was washed with 5 mL sterile water, the desired product, $[^{11}\text{C}]$-RS 2315, was eluted with 1 mL EtOH. For biodistribution and blocking studies the EtOH fraction was diluted with 10 mL physiological saline. For metabolite analysis, EtOH was evaporated to dryness and the residue was redissolved in an adequate amount of EtOH/physiological saline (8/92 - v/v).
6.3.2.2. $[^{11}C]$-RS 2360

The same procedure as described for $[^{11}C]$-RS 2315, with minor modifications was applied to synthesize $[^{11}C]$-RS 2360.

$[^{11}C]$-RS 2360 was prepared by methylation with $^{11}$CH$_3$I of the normethyl derivative RS 2226 (3 µmol) in DMF/DMSO (60 µL/188 µL) for 7 min at 70°C using 1.5 µL TBAH. Purification was accomplished using CH$_3$CN/H$_2$O/HCOOH (50/50/0.1 – v/v/v) as mobile phase at a flow rate of 6 mL/min. The collected HPLC fraction containing $[^{11}C]$-RS 2360 (T; 8.5 min) was diluted with 40 mL 0.01 M PBS before loading onto a Sep-pak column (Alltech Maxi-clean SPE Prevail C$_{18}$, previously activated with 1 mL EtOH and 5 mL sterile water). After the cartridge was washed with 5 mL sterile water, the desired product, $[^{11}C]$-RS 2360, was eluted with 1 mL EtOH. For biodistribution and blocking studies the EtOH fraction was diluted with 10 mL physiological saline. For metabolite and imaging studies, EtOH was evaporated to dryness and the residue was redissolved in an adequate amount of EtOH/physiological saline (8/92 - v/v).

6.3.3. IN VITRO CHARACTERIZATION

Quality control consisted of the determination of radiochemical purity and specific activity, calculated by analytical HPLC assay using a Gracesmart C$_{18}$ column (5 µm, 4.6 mm x 250 mm; Grace Davison Discovery Sciences, Lokeren, Belgium) at a flow rate of 1 mL/min. The eluents were the same as described for the purification.

A calibration curve of unlabelled reference compound (0.02 µM – 1 µM) was made and controlled for its accuracy and reproducibility. Specific activities were decay corrected back to the end of purification.
Co-injection on analytical HPLC of the final end product and cold reference compound was performed to confirm the identity of the obtained radiotracer. Log \( D_{7.4} \) was determined according to the method described in Chapter 4.

6.3.4. BIODISTRIBUTION STUDIES

The biodistribution of \([^{11}C]\)-RS 2315 and \([^{11}C]\)-RS 2360 was studied in male NMRI mice (approximately 25 g and 6 weeks old). Awake mice \((n=3\) at each time point) were injected in a tail vein with approximately 200 \( \mu \)L containing 7.5 – 11 MBq (0.2 – 0.3 mCi) \([^{11}C]\)-RS 2315 or \([^{11}C]\)-RS 2360. At 1, 10, 30 and 60 min p.i. mice were euthanized and dissected. Blood, urine and organs were weighed and counted for radioactivity. All organs were rinsed with water prior to weighing and counting. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. Results are decay-corrected and expressed as % ID/g ± SD.

6.3.5. BLOCKING STUDIES

Blocking studies were carried out with preinjection of 100 \( \mu \)L clorgyline hydrochloride (MAO-A inhibitor) or \( R^-(-) \)-deprenyl hydrochloride (MAO-B inhibitor) i.v. both in a dose of 10 mg/kg (Arnett et al., 1987; Fowler et al., 2001; Hirata et al., 2002; Jensen et al., 2008). 9 ± 1 MBq (243 ± 27 µCi) \([^{11}C]\) tracer (100 \( \mu \)L) was injected 30 min later via a tail vein. The mice \((n=3\) at each time point) were awake during the injections. The mice were sacrificed and dissected at 1, 10 and 30 min after \([^{11}C]\) tracer injection. Blood, urine and organs were weighed and counted for radioactivity. All organs were rinsed with water prior to weighing and counting. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. Results are decay-corrected and expressed % ID/g ± SD. Statistical analysis was performed using one-sided, unpaired student’s \( t \)-test. Only p-values < 0.05 are considered significant.
6.3.6. METABOLITE ANALYSIS

The in vivo metabolic stability of $[^{11}C]$-RS 2315 and $[^{11}C]$-RS 2360 in plasma and brain was studied in male NMRI mice. 22 – 37 MBq (0.59 - 1 mCi) of $[^{11}C]$-RS 2315 or $[^{11}C]$-RS 2360 dissolved in 200 µL was injected through a tail vein and the mice ($n=3$ for each time point) were sacrificed at 1, 10 or 30 min p.i. Sample workup was done as described in Chapter 4. HPLC analysis was performed using the same conditions as used for purification (see 6.3.2.).

6.3.7. IMAGING STUDY

Additional in vivo tests with $[^{11}C]$-RS 2360 were performed using microPET imaging technology. Awake Sprague-Dawley rats ($n=4$ for each treatment group) were injected with physiological saline, clorgyline hydrochloride (10 mg/kg) or (R)-(−)-deprenyl hydrochloride (10 mg/kg) 30 min prior to their microPET scan. The latter acquisitions are performed using the Gamma Medica Ideas labPET 8, a state-of-the-art microPET device existing of $2 \times 2 \times 10$ mm$^3$ LYSO/LGSO scintillators in a 8-pixel, quad-APD detector module arrangement. This system is capable of delivering 1 mm spatial resolution in rodents at a sensitivity of 4 % thereby covering a field-of-view of 10 cm transaxially by 8 cm axially.

All animals were injected with 35 – 40 MBq (0.95 - 1.08 mCi) $[^{11}C]$-RS 2360 on the camera bed at the start of a dynamic acquisition. Frames of 4 x 0.5 min, 3 x 1 min, and 1 x 5 min were accordingly sequentially recorded. The resulting data were reconstructed using 30 iterations of the Maximum Likelihood Expectation Maximization algorithm in 160 x 160 x 63 images of 0.5 mm x 0.5 mm x 1.175 mm voxel size. An a posteriori three-dimensional Gaussian filter of $2 \times 2 \times 2$ mm was applied to all frames. Statistical analysis was performed using one-sided, unpaired student’s $t$-test. Only p-values < 0.05 are considered significant. Images were analysed with PMOD whereby volumes of interest (VOIs) were drawn on the brain region (Figure 6.2) and the background region (Figure 6.3) of each
animal. Since the selection of the background region is critical, we delineated the background VOI on the last frame of 5 min acquisition. In this way, noise is eliminated and a robust reference value is obtained to normalize brain uptake for injected activity in all other frames on an individual animal basis. We selected the background region so that no specific muscle activity was present.

Figure 6.2 Example VOI for the brain region

Figure 6.3 Example VOI for the background region
6.4. Results & Discussion

6.4.1. RADIOSYNTHESIS

The synthesis of radioligands \([^{11}C]\)-RS 2315 and \([^{11}C]\)-RS 2360 is shown in Figure 6.4. Their respective amide precursors were labelled with \(^{11}CH_3I\) prepared from \(^{11}CH_4\), in the presence of TBAH as a base through \(N\)\-[\(^{11}C\)methyl]ation and isolated by semipreparative HPLC.

![Figure 6.4 Radiosynthesis of \([^{11}C]\)-RS 2315 and \([^{11}C]\)-RS 2360](image-url)
6.4.1.1. $^{11}$C-RS 2315

A typical UV- and radio-chromatogram for a $^{11}$C-RS 2315 synthesis purification run is shown in Figure 6.5.

![Figure 6.5 UV (blue) and radio-chromatogram (pink) of a typical $^{11}$C-RS 2315 purification](image)

$^{11}$C-RS 2315 elutes with a retention time of 10 min. Extraction efficiency of the Sep-pak column was calculated to be $82 \pm 8 \%$ ($n=6$). Based on the amount $^{11}$CH$_3$I added to the reaction vial, the radiochemical yield was $28 \pm 4 \%$ ($n=6$).

The total synthesis, from the end of $^{11}$CH$_3$I delivery to reaction vessel to delivery for *in vivo* studies was completed in 35 min.

6.4.1.2. $^{11}$C-RS 2360

The overall synthesis, purification (Figure 6.6) and formulation time to obtain $^{11}$C-RS 2360 was 30 min. In a typical experiment, target tracer $^{11}$C-RS 2360 was provided in a radiochemical yield of $30 \pm 6 \%$ ($n=6$), decay-corrected to start of
the reaction, based on the amount $^{11}$CH$_3$I added. Almost all activity was released from the Sep-pak column (93 ± 4 % ($n=6$)).

**Figure 6.6** UV (blue) and radio-chromatogram (pink) of a typical synthesis purification of $[^{11}\text{C}]$-RS 2360

6.4.2. **IN VITRO CHARACTERIZATION**

6.4.2.1. **Quality control, specific activity and stability**

The identity of both tracers was confirmed by co-elution with authentic reference compound after co-injection on HPLC. Calculation of specific activity resulted in a range from 25 – 92 GBq/µmol (0.68 – 2.49 Ci/µmol) for $[^{11}\text{C}]$-RS 2315 ($n=6$) and 41 – 106 GBq/µmol (1.11 – 2.87 Ci/µmol) for $[^{11}\text{C}]$-RS 2360 ($n=6$). Radiochemical purity of the tracer recovered at the end of the experiment was > 98 % for both radiotracers. $[^{11}\text{C}]$-RS 2315 and $[^{11}\text{C}]$-RS 2360 remained stable during the time span of the experiments.

6.4.2.2. **Log D$_{7.4}$**

We determined log D$_{7.4}$ as an indicator for lipophilicity and blood-brain-permeability. Octanol – buffer partition coefficient measurements gave a log D$_{7.4}$
of $1.65 \pm 0.19$ for $[^{11}\text{C}]-\text{RS 2315}$, slightly higher than the log $D_{7.4}$ of $[^{11}\text{C}]-\text{RS 2360}$ ($1.48 \pm 0.04$). The higher log $D_{7.4}$ value of $[^{11}\text{C}]-\text{RS 2315}$ is in accordance with what we can predict from the replacement of cyclohexane by a benzene ring. Both values are suitable for brain penetration (Waterhouse, 2003).

### 6.4.3. BIODISTRIBUTION STUDIES

Following i.v. injection of $[^{11}\text{C}]-\text{RS 2315}$ into NMRI mice, the time course of radioactivity was determined in several tissues (Figure 6.7). High initial uptake in heart, lungs, pancreas and kidneys ($5.52 \pm 0.41 \% \text{ID/g}$, $5.96 \pm 1.11 \% \text{ID/g}$, $5.19 \pm 1.63 \% \text{ID/g}$ and $6.81 \pm 3.23 \% \text{ID/g}$, respectively at 1 min p.i.) was observed but except for the kidneys ($8.34 \pm 1.09 \% \text{ID/g}$ at 60 min p.i.), the studied organs did not show any retention of $[^{11}\text{C}]-\text{RS 2315}$. In the liver, the activity peaked at $9.09 \pm 0.97 \% \text{ID/g}$ at 10 min p.i. and decreased over time. The activity in intestines had the highest increase between 10 min p.i. ($4.36 \pm 1.68 \% \text{ID/g}$) and 30 min p.i. ($10.62 \pm 2.81 \% \text{ID/g}$), indicating hepatobiliary clearance. Urinary clearance was also observed (data not shown).

![Figure 6.7 Tissue distribution of $[^{11}\text{C}]-\text{RS 2315}$ in male NMRI mice](image)

Values are expressed as $\% \text{ID/g} \pm \text{SD (n=3)}$. 

134
The blood-brain distribution of both $[^{11}\text{C}]-\text{RS} 2315$ and $[^{11}\text{C}]-\text{RS} 2360$ is shown in Figure 6.8. $[^{11}\text{C}]-\text{RS} 2315$ entered the brain quickly and was rapidly cleared (from $4.75 \pm 1.62 \% \text{ID/g}$ at 1 min p.i. to $0.24 \pm 0.07 \% \text{ID/g}$ at 60 min p.i.). $[^{11}\text{C}]-\text{RS} 2360$ displayed a rapid and high brain uptake of $7.08 \pm 0.95 \% \text{ID/g}$ at 1 min p.i., indicating a good penetration of the radiotracer into the brain. This high brain uptake was followed by an efficient wash-out ($0.51 \pm 0.06 \% \text{ID/g}$ at 30 min p.i.).

**Figure 6.8** Blood-brain distribution of $[^{11}\text{C}]-\text{RS} 2315$ (A) and $[^{11}\text{C}]-\text{RS} 2360$ (B) in male NMRI mice

Values are expressed as $\% \text{ID/g} \pm \text{SD (n=3)}$
Figure 6.9 summarizes the tissue time-course distribution of $[^{11}C]$-RS 2360 in male NMRI mice. The lungs, heart and pancreas showed high initial uptake (respectively, 23.62 ± 4.22 % ID/g, 11.51 ± 0.93 % ID/g and 3.93 ± 1.78 % ID/g at 1 min p.i.) followed by a fast wash-out (6.01 ± 2.28 % ID/g, 1.75 ± 0.16 % ID/g and 1.66 ± 0.37 % ID/g at 30 min p.i.). As for $[^{11}C]$-RS 2315, the uptake in the liver was also increased at 10 min after injection (7.45 ± 0.35 % ID/g) after which it decreased (4.24 ± 0.99 % ID/g at 60 min p.i.). Clearance of radioactivity occurred by both the hepatobiliary and urinary pathway (data not shown).

![Figure 6.9 Tissue distribution of $[^{11}C]$-RS 2360 in male NMRI mice](image)

Values are expressed as % ID/g ± SD ($n=3$)

6.4.4. BLOCKING STUDIES

*In vivo* selectivity and specificity of both radiotracers was examined by pre-injection of clorgyline hydrochloride (MAO-A inhibitor) and $R$-(-)-deprenyl hydrochloride (MAO-B inhibitor). Uptake of radioactivity in brain (Figure 6.10) and peripheral organs was measured at 1, 10 and 30 min after injection of the $^{11}C$ tracer.
[11C]-RS 2315 brain uptake could not be decreased by administrating clorgyline or R-(-)-deprenyl. Surprisingly, a significantly higher brain uptake is observed at 30 min p.i. both after MAO-A and MAO-B inhibition. The effect on the brain/blood ratio however is not significant. A raise in brain uptake also occurred at 1 min p.i. but since the blood activity increased as well, the brain/blood ratio was not affected. Peripherally, an increased liver uptake is observed at 1 min p.i. both after clorgyline (from 3.63 ± 0.56 % ID/g to 7.15 ± 3.02 % ID/g) and after R-(-)-deprenyl (from 3.63 ± 0.56 % ID/g to 7.81 ± 0.73 % ID/g) pretreatment. At 10 and 30 min p.i., a raise in intestinal activity (from 4.36 ± 1.68 % ID/g to 7.84 ± 3.21 % ID/g after clorgyline pretreatment and to 5.74 ± 0.73 % ID/g after R-(-)-deprenyl pretreatment at 10 min p.i.) is seen, suggesting an enhanced hepatobiliary clearance after administration of clorgyline and R-(-)-deprenyl. This peripheral redistribution after pretreatment with clorgyline and R-(-)-deprenyl could be the reason of the observed higher brain uptake. Another possible hypothesis for the higher brain uptake is that clorgyline or R-(-)-deprenyl administration caused a shift in metabolism pattern.

Figure 6.10 Brain uptake of [11C]-RS 2315 (A) and [11C]-RS 2360 (B) in control mice and in mice pretreated with clorgyline or (R)-(-)-deprenyl
Values are expressed as % ID/g ± SD (n=3), * p < 0.05, student’s t-test

At 1 min p.i., pretreatment with clorgyline resulted in a significant decrease in brain uptake of [11C]-RS 2360 (p = 0.02). (R)-(-)-deprenyl administration also
lowered brain uptake but this decrease was not significant. This effect is in accordance with what we would expect from the in vitro properties (Ki = 1.7 nM for MAO-A and Ki = 30 nM for MAO-B). At 10 and 30 min p.i however, no effect of clorgyline or R-(-)-deprenyl pre-administration could be observed. In the peripheral organs, no clear effect of blocking MAO-A or MAO-B could be distinguished (data not shown).

6.4.5. METABOLITE ANALYSIS

Control experiments with spiked plasma and brain revealed extraction efficiencies of 96 ± 1 % for plasma and 93 % for brain samples for [11C]-RS 2315 and 93 ± 6 % for plasma and 85 ± 6 % for brain samples for [11C]-RS 2360, respectively. Plasma and brain obtained from mice at 1, 10 and 30 min p.i. were analyzed by RP-HPLC to investigate the metabolism pattern of [11C]-RS 2315 and [11C]-RS 2360 (Table 6.1).

<table>
<thead>
<tr>
<th>Table 6.1</th>
<th>Metabolic profile of [11C]-RS 2315 and [11C]-RS 2360 in NMRI mice</th>
<th>Retention time on RP-HPLC</th>
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</thead>
<tbody>
<tr>
<td>Tissue</td>
<td>Time</td>
<td>2.5 min</td>
</tr>
<tr>
<td>Plasma [11C]-RS 2315</td>
<td>1 min</td>
<td>&gt; 96 %</td>
</tr>
<tr>
<td></td>
<td>10 min</td>
<td>55 ± 5 %</td>
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<tr>
<td></td>
<td>30 min</td>
<td>83 ± 1 %</td>
</tr>
<tr>
<td>Brain [11C]-RS 2315</td>
<td>1 min</td>
<td>&gt; 99 %</td>
</tr>
<tr>
<td></td>
<td>10 min</td>
<td>10 ± 1 %</td>
</tr>
<tr>
<td></td>
<td>30 min</td>
<td>28 ± 5 %</td>
</tr>
<tr>
<td>Plasma [11C]-RS 2360</td>
<td>1 min</td>
<td>&gt; 99 %</td>
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<tr>
<td></td>
<td>10 min</td>
<td>64 ± 10 %</td>
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<tr>
<td></td>
<td>30 min</td>
<td>75 ± 5 %</td>
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<tr>
<td>Brain [11C]-RS 2360</td>
<td>1 min</td>
<td>&gt; 99 %</td>
</tr>
<tr>
<td></td>
<td>10 min</td>
<td>10 ± 3 %</td>
</tr>
<tr>
<td></td>
<td>30 min</td>
<td>27 ± 4 %</td>
</tr>
</tbody>
</table>

Values are expressed as percent of total radioactivity ± SD (n=3)
RP-HPLC analysis of mouse plasma showed that $[^{11}\text{C}]-\text{RS 2315}$ (Figure 6.11) was rapidly metabolized with only $21 \pm 2\%$ parent compound remaining at 10 min p.i. All detected metabolites were more polar than the original radiotracer. The percentage of radioactivity in mouse brain extracts derived from unmetabolized $[^{11}\text{C}]-\text{RS 2315}$ was $>99\%$ at 1 min p.i., $62 \pm 3\%$ at 10 min p.i. and $53 \pm 7\%$ at 30 min p.i. respectively.

**Figure 6.11** Metabolite chromatogram of $[^{11}\text{C}]-\text{RS 2315}$ at 10 min (A) and 30 min (B) p.i.

Values are the mean of three experiments and are expressed as percent of total activity.

The relative percentage of intact $[^{11}\text{C}]-\text{RS 2360}$ (Figure 6.12) in plasma as a function of time after injection was $29 \pm 10\%$ at 10 min p.i and $21 \pm 5\%$ at 30 min p.i. HPLC analysis of the brain samples showed that $81 \pm 4\%$ and $66 \pm 4\%$ of the radioactivity existed of unchanged $[^{11}\text{C}]-\text{RS 2360}$ at 10 and 30 min p.i. respectively. At 1 min p.i., no degradation products were found in plasma neither in brain.
At all time points examined, the extent of metabolism was higher for $[^{11}C]$-RS 2315 than for $[^{11}C]$-RS 2360. It seems quite likely that the hydrophilic degradation fragments with the retention time of 2.5 min were methanol, formaldehyde or formic acid; which were formed after demethylation of the radiotracer. The metabolite at 4.5 min could be the result of the breaking of the amide bond. In the case of $[^{11}C]$-RS 2360, the metabolite could also be caused by hydroxylation on the phenyl group.

6.4.6. PET SCANS

The results shown in Figure 6.13 illustrate that for $[^{11}C]$-RS 2360 an overall significant inhibition by clorgyline of 30% can be concluded when compared to
injection of physiological saline ($p = 0.006$). An inhibition of 16% by $R$-(-)-deprenyl is noticeable, albeit not significant ($p = 0.07$). These observations indicated that $[^{11}C]$-RS 2360 is more selective towards MAO-A than to MAO-B which is in accordance with the *in vitro* determined $K_i$ values. When we investigate the influence of clorgyline pretreatment at each time frame separately, a significant inhibition is observed at the first 5 time frames but not at the latter three time frames. $R$-(-)-deprenyl administration caused no significant inhibition of brain uptake at any of the separate time frames. These observations are in accordance with those of the blocking study. The impossibility to show specificity towards MAO-A at the latter time points could be due to the extensive metabolism of $[^{11}C]$-RS 2360.

![Figure 6.13 Results for the PET imaging experiments](image.png)

Values are the mean of four experiments

### 6.5. Conclusion

The radiosynthesis of both radiotracers was achieved by nucleophilic substitution of the desmethyl precursor with $^{11}$CH$_3$I in the presence of TBAH. After HPLC
purification, the radiochemical yields were 28 ± 4 % and 30 ± 6 % for [11C]-RS 2315 and [11C]-RS 2360, respectively and radiochemical purity appeared > 98 % for both radiotracers. The authenticity of the tracers was determined by co- elution with the non-radioactive reference compound. Specific activity ranged from 25 – 92 GBq/µmol (0.68 – 2.49 Ci/µmol) for [11C]-RS 2315 and 41 – 106 GBq/µmol (1.11 – 2.87 Ci/µmol) for [11C]-RS 2360. For the duration of the experiments, [11C]-RS 2315 as well as [11C]-RS 2360 remained stable. The determined log D₇.₄ of 1.65 ± 0.19 for [11C]-RS 2315 was slightly higher than the log D₇.₄ of [11C]-RS 2360 (1.48 ± 0.04) as expected when comparing the chemical structures. Both values are suitable for brain penetration. 

Upon intravenous administration, high initial levels of activity were observed in mouse brain indicating an excellent passage through the BBB of both [11C]-RS 2315 and [11C]-RS 2360. The brain activity diminished very quickly and at 10 min p.i. for [11C]-RS 2315 and 30 min p.i. for [11C]-RS 2360 brain activity did no longer exceeded blood activity. Metabolism studies revealed that at 1 min p.i. almost no degradation occurred neither in plasma or brain. At 10 and 30 min p.i., [11C]-RS 2315 and [11C]-RS 2360 were extensively metabolized in plasma and remained more stable in brain. At all time points examined, the extent of metabolism was greater for [11C]-RS 2315 than for [11C]-RS 2360. The blocking study failed to proof specificity of [11C]-RS 2315 at all time points. [11C]-RS 2360 showed specificity towards MAO-A at 1 min p.i. At 10 and 30 min p.i however, no effect of clorgyline pretreatment could be observed. The absence of selectivity at the later time points might be explained by the appearance of metabolites in the brain. Administration of R-(−)-deprenyl had no significant effect on the brain uptake of [11C]-RS 2360. In the imaging study with [11C]-RS 2360, administration of R-(−)-deprenyl caused a decreased brain uptake although this effect is not significant. Clorgyline pretreatment on the other hand, showed an overall significant reduced uptake of [11C]-RS 2360 indicating specific binding at MAO-A. These observations indicate that [11C]-RS 2360 is more selective towards
MAO-A than to MAO-B which is in accordance with the in vitro determined \( K_i \) values.

Based on these results, we can conclude that \([^{11}C]-RS\) 2315 is not suitable for visualization of MAO-A in vivo. \([^{11}C]-RS\) 2360 on the other hand might have potential for mapping MAO-A when PET scan is performed directly after injection of the tracer. Further studies are necessary to evaluate the potential role of \([^{11}C]-RS\) 2360 in MAO-A imaging in humans. It is possible that the metabolism pattern in humans is different from that obtained in rodents. Therefore it is useful to compare the metabolism pattern of \([^{11}C]-RS\) 2360 in whole rodent blood spiked with \([^{11}C]-RS\) 2360 with the metabolism in whole human blood spiked with \([^{11}C]-RS\) 2360 to have an initial notion about the difference in metabolism in humans and rodents. A slower metabolism in humans could result in improved selectivity at later time points.

### 6.6. References


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Chapter 7

Synthesis, radiosynthesis and *in vivo* evaluation of $[^{123}\text{I}]-\text{FMIP}$ for imaging the dopamine transporter

De Bruyne S.\textsuperscript{a}, Boos T.L.\textsuperscript{b}, wyffels L.\textsuperscript{a}, Goeman J.L.\textsuperscript{c}, Rice K.C.\textsuperscript{b}, De Vos F.\textsuperscript{a}


\textsuperscript{a} Laboratory for Radiopharmacy, Ghent University, Harelbekestraat 72, 9000 Ghent, Belgium

\textsuperscript{b} Chemical Biology Research Branch, National Institute on Drug Abuse and National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Bethesda, MD, USA

\textsuperscript{c} Department of Organic Chemistry, Ghent University, Krijgslaan 281 S4, 9000 Ghent, Belgium
Chapter 7

Synthesis, radiosynthesis and in vivo evaluation of $^{[123]I}$-FMIP for imaging the dopamine transporter

7.1. Abstract

Aim: 4-(2-(Bis(4-fluorophenyl)methoxy)ethyl)-1-(4-iodobenzyl)piperidine (FMIP) has nanomolar affinity for DAT and better selectivity over the other monoamine transporters compared to the already existing ligands for DAT imaging with SPECT. The aim of this study was to synthesize and evaluate the usefulness of $^{[123]I}$-FMIP as an in vivo tracer for DAT.

Methods: $^{[123]I}$-FMIP was synthesized by electrophilic destannylation. Biodistribution, blocking and metabolite studies of $^{[123]I}$-FMIP were performed in male NMRI mice whereas a more detailed brain dissection was done in male Sprague-Dawley rats.

Results: The tributylstannyl precursor was synthesized with an overall yield of approximately 25%. The mean radiochemical yield of $^{[123]I}$-FMIP was 40 ± 10% and after purification, the radiochemical purity appeared to be > 98%. The specific activity of the compound was at least 667 GBq/μmol. Biodistribution studies showed brain uptake of 0.96 ± 0.53 % ID/g at 0.5 min p.i. and 0.26 ± 0.02 % ID/g at 180 min p.i. High blood activity was observed at all time points. Blocking studies indicated no selectivity of $^{[123]I}$-FMIP towards DAT. A metabolite study demonstrated that in brain, over 80% was present as intact $^{[123]I}$-FMIP at 60 min p.i. In rats, regional brain distribution of $^{[123]I}$-FMIP was not in agreement with DAT localization demonstrating lack of selectivity towards DAT.

Conclusion: These results indicate that $^{[123]I}$-FMIP is not suitable for mapping DAT in vivo.
7.2. Introduction

It has been demonstrated that DAT neuroimaging is useful in PD diagnosis, providing information on the integrity of the dopaminergic neurotransmission system in vivo (Poewe and Sherfler, 2003; Dhawan and Eidelberg, 2001; Shih et al., 2006). Because of the crucial role of DAT in the etiology of PD as well as other neurological disorders and addiction, several DAT ligands have been developed for in vivo SPECT imaging (Volkow et al., 1996; Elsinga et al., 2006). These ligands all share the same problem of being not selective towards SERT. The commercially available [123I]-FP-CIT (DaTSCAN, GE Healthcare, Little Chalfont, UK) has a $K_i$ value of 3.5 nM for DAT, 0.11 nM for SERT and 63 nM for NET, indicating lack of selectivity for DAT (Neumeyer et al., 1991; 1996; Scheffel et al., 1997). Other drawbacks of [123I]FP-CIT are the lack of good in vivo kinetics and the formation of 4 labelled metabolites in plasma (Bergstrom et al., 1996; Emond et al., 1997).

Another investigated DAT radioligand, [123I]PE2I, has $K_i$ values of 17 nM, 500 nM and over 1000 nM, for DAT, SERT and NET respectively so a SERT/DAT selectivity of 29 was calculated. Another disadvantage of [123I]PE2I is in vivo deiodination of the iodo vinyl group (Guilloteau et al., 1997). These shortcomings indicate that there is still a need for selective radioligands for DAT.

A study by Boos et al. (2006) has concentrated on the development of novel analogues of 1-(2-(bis(4-fluorophenyl)methoxy)ethyl)-4-(3-phenylpropyl)piperazine (GBR 12909). GBR 12909 (Figure 7.1) is a high affinity, selective, long-lasting inhibitor of dopamine reuptake and a noncompetitive blocker of DAT in rats (van der Zee et al., 1980; Rothman et al., 1991). The newly developed analogues were pharmacologically evaluated to identify ligands with varying transporter affinity and selectivity.
For the compound investigated in this study, 4-(2-(bis(4-fluorophenyl)methoxy)ethyl)-1-(4-iodobenzyl)piperidine (FMIP), they reported \(K_i\) values of 1.9 nM for DAT, 205 nM for SERT and 4110 nM for NET. These values indicate that FMIP has good \textit{in vitro} selectivity over the other monoamine transporters (108 for SERT/DAT and 2163 for NET/DAT). Compared to \(^{123}\text{I}]\text{FP CIT} and \(^{123}\text{I}]\text{PE2I}, the \textit{in vitro} properties of FMIP are promising. We therefore evaluated the potential of \(^{123}\text{I}]\text{-FMIP as a suitable tracer for DAT \textit{in vivo}} (Figure 7.2).
In this Chapter we present the synthesis of the precursor and reference molecule. The radiosynthesis of $[^{123}\text{I}]$-FMIP, along with its purification, quality control, log $D_{7.4}$, stability and specific activity is reported. $[^{123}\text{I}]$-FMIP is evaluated in vivo in NMRI mice. Metabolic assays are performed on blood and brain of NMRI mice. The selectivity of $[^{123}\text{I}]$-FMIP towards DAT is investigated by a regional brain distribution in Sprague-Dawley rats and a blocking study in NMRI mice.

7.3. Materials & Methods

7.3.1. ORGANIC SYNTHESIS

The starting material, 4-(2-(bis(4-fluorophenyl)methoxy)ethyl)piperidine (1), was described and synthesized by Boos et al. (2006). All melting points (m.p.) were determined on a Thomas–Hoover melting point apparatus and are uncorrected. The $^1$H NMR spectra were recorded on a Varian XL-300 instrument with DMSO-$d_6$ as solvent, $\delta$ values were recorded in ppm (TMS as internal standard), $J$ (Hz) assignments of $^1$H resonance coupling were done. Electron ionization (EI) mass spectra were obtained using a VG-Micro Mass 7070F mass spectrometer. TLC was performed on 250 mm Analtech GHLF silica gel plates. Visualization was accomplished under UV at 254 nm. Elemental analyses were performed by Atlantic Microlabs, Inc. (Norcross, GA).

7.3.1.1. \(4-(2-(\text{Bis}(4\text{-fluorophenyl})\text{methoxy})\text{ethyl})\text{piperidin-1-yl})(4\text{-hydroxyphenyl})\text{methanone (2)}\)

A solution of 4-hydroxybenzoic acid (2.0 g, 14.5 mmol) and N-hydroxybenzotriazole (1.9 g, 13.3 mmol) in CH$_2$Cl$_2$ (200 mL) was stirred for 15 min, prior to the addition of 4-(2-(bis(4-fluorophenyl)methoxy)ethyl)piperidine (1) (4.0 g, 12.1 mmol) and 1-ethyl-3-(3'-dimethylaminopropyl)carbodiimide hydrochloride (5.1 g, 26.6 mmol). The solution was stirred for 96 h after which the
solvent was removed under reduced pressure. The semi-solid was dissolved in ethyl acetate (250 mL) and the organic layer was washed with 1 M HCl (250 mL), 10 % potassium carbonate (250 mL), and brine (250 mL). The organic layer was dried over anhydrous Na$_2$SO$_4$ and the solvent was removed under reduced pressure. TLC analysis (9:1 (v:v) – CHCl$_3$:MeOH) identified a small amount of unreacted starting material not removed in the acid washing. Flash chromatography provided two compounds that co-migrated in the 9:1 (v:v) – CHCl$_3$:MeOH solvent system. Both compounds were dried under high vacuum and underwent alane reduction without further purification.

7.3.1.2. 4-((4-(2-(Bis(4-fluorophenyl)methoxy)ethyl)piperidin-1-yl)methyl)phenol (3)

To a flame dried flask, lithium aluminiumhydride (1.3 g, 33 mmol) was added and cooled to 0°C under argon. THF (10 mL) was added drop-wise while stirring. Upon the completion of the addition of THF, sulphuric acid (1.1 g, 17 mmol) in THF (10 mL) was added drop-wise. The solution was stirred at 0°C for 45 min. To the ice-cold solution was added 2 (3.0 g, 6.6 mmol) in THF (10 mL). The solution was stirred for an additional 15 min at 0°C, then allowed to warm to room temperature and stirred for 2 h. 10 % NaOH (200 mL) and ethyl acetate (75 mL) were added to the solution. The layers were separated and the aqueous layer was further extracted with ethyl acetate (2 x 75 mL). The organic extracts were combined and washed with H$_2$O (200 mL) and brine (200 mL). The organic layer was dried over anhydrous Na$_2$SO$_4$ and the solvent was removed under reduced pressure to yield 3 as a solid. TLC analysis identified a small quantity of starting material. The solid was dissolved in ether and 1.1 equivalent of oxalic acid was added. 2.6 g (5.9 mmol) of 3 as the oxalate salt was obtained. The yield of the reaction was 89 %.

$^1$H NMR (DMSO-d$_6$, 300 MHz): δ 6.7 - 7.4 (m, 12H, ar); 5.5 (s, 1H, CH-O); 3.8 (bs, 2H, CH$_2$NH); 3.0-3.4 (m, 4H); 2.5-2.9 (m, 3H); 1.3-1.7 (m, 6H). HRMS (El) calcd for C$_{27}$H$_{30}$F$_2$NO$_2$ $m/z$ 438.2245; found 438.2243. Anal. calcd for
C_{27}H_{29}F_{2}NO_{2} 0.5 C_{6}H_{2}O: C, 69.69; H, 6.27; N, 2.90. Found: C, 69.17; H, 6.21; N, 2.88. m.p. 198-199.5°C. R_{f} = 0.53 (9:1-CHCl_{3}:MeOH).

7.3.1.3. **4-((4-(4-(2-(Bis(4-fluorophenyl)methoxy)ethyl)piperidin-1-yl)methyl)phenyltrifluoromethanesulfonate (4)**

N-Phenyltrifluromethanesulfonimide (1.4 g, 3.8 mmol), 3 (1.3 g, 3.0 mmol) and N,N-diisopropylethylamine (1.0 mL, 6.0 mmol) were combined in CH_{2}Cl_{2} (20 mL) and stirred under argon, overnight. To the solution was added H_{2}O (50 mL) and CH_{2}Cl_{2} (50 mL). The organic layer was separated and subsequently washed with a 10 % NaHCO_{3} solution, H_{2}O (50 mL) and brine (50 mL). The organic layer was dried over anhydrous Na_{2}SO_{4} and the solvent was removed under reduced pressure. After chromatography on silica gel using 9:1 (v:v) - CHCl_{3}:MeOH as solvent system, 4 was obtained as a clear oil 1.5 g (2.6 mmol). The yield of the reaction was 87 %.

1H NMR (DMSO-d_{6}, 300 MHz): δ 7.0 - 7.4 (m, 12H, ar); 5.5 (s, 1H, CH-O); 4.0 (s, 2H, CH_{2}NH); 3.2-3.4 (m, 4H); 3.1(m, 2H); 1.2-1.7(m, 7H). HRMS (EI) calcd for C_{28}H_{29}F_{2}NO_{4}S m/z, 570.1737; found 570.1738. Anal. calcd for C_{28}H_{28}F_{2}NO_{4}S2H_{2}O: C, 55.53; H, 5.32; N, 2.31. Found: C, 55.71; H, 5.27; N, 2.31.

7.3.1.4. **4-(2-(Bis(4-fluorophenyl)methoxy)ethyl)-1-(4-(tributylstannyl)benzyl)piperidine (5)**

1.1 g (1.9 mmol) of 4 was dissolved in anhydrous dioxane (15 mL) and to the solution was added bis(tributyltin) (1.5 g, 2.5 mmol). Under argon, lithium chloride (0.2 g, 5.7 mmol), tetrakis(triphenylphosphine)palladium (0.7 g, 0.06 mmol) and a catalytic amount of 2,6-di(tert)-butyl-4-methylphenol were added. The solution was heated to reflux and stirred overnight. The reaction was quenched upon the addition of ethyl acetate (50 mL) and a 10 % aqueous NaOH solution (50 mL). The organic layer was filtered through a pad of celite. The filtrate was washed with H_{2}O (50 mL) and brine (50 mL). The organic layer was dried over anhydrous
Na₂SO₄. Chromatography with 7:3 (v:v) - hexane:ethyl acetate as solvent system provided 0.46 g (0.6 mmol) of 5 as a chromatographically pure, clear oil. The reaction yield was 68 %.

¹H NMR (DMSO-d₆, 300 MHz): δ 7.1 - 7.4 (m, 12H, ar); 5.5 (s, 1H, CH-O); 3.3-3.4 (m, 8H); 0.8-1.5 (m, 30H). HRMS (EI) calcd for C₃₉H₅₆F₂NOSn m/z, 712.3352; found 710.3344. Anal. calcd for C₃₉H₅₅F₂NOSn·0.5 H₂O: C, 65.09; H, 7.84; N, 1.95. Found: C, 64.83; H, 7.81; N, 1.95.

7.3.1.5. 4-(2-(Bis(4-fluorophenyl)methoxy)ethyl)-1-(4-iodobenzyl)piperidine (FMIP)

To a solution of 1 (0.5 g, 1.4 mmol) and potassium carbonate (0.6 g, 4.2 mmol) in DMF (15 mL) was added a catalytic amount of NaI and 4-iodobenzyl bromide (0.5 g, 1.5 mmol). The solution was stirred overnight. TLC analysis identified no remaining starting material and the solution was poured into H₂O (200 mL) and extracted with ethyl acetate (3 x 100 mL). The combined extracts were washed with H₂O (2 x 200 mL) and brine (200 mL). The organic layer was dried over anhydrous Na₂SO₄ and the solvent was removed under reduced pressure. The resulting oil was dissolved in EtOH (50 mL) and 1.1 equivalent of oxalic acid in EtOH was added. Upon cooling, crystals were formed and an additional recrystallization provided 0.4 g (0.7 mmol) of a FMIP oxalate as white solid. The reaction proceeded with a yield of 50 %.

¹H NMR (DMSO-d₆, 300 MHz): δ 7.1 - 7.8 (m, 12H, ar); 5.5 (s, 1H, CH-O); 4.0 (bs, 2H, CH₂NH); 3.1-3.5 (m, 4H); 2.5-2.7 (m, 3H); 1.2-1.8 (m, 6H). HRMS (ESI) calcd for C₂₇H₂₈IF₂NO·C₂H₂O₄ m/z, 548.1262; found 548.1264. Anal. calcd for C₂₇H₂₈IF₂NO·C₂H₂O₄: C, 54.64; H, 4.74; N, 2.20. Found: C, 54.37; H, 4.95; N, 2.18. m.p. 157-158 °C.
7.3.2. RADIOCHEMISTRY

\[^{123}I\]-4-(2-(Bis(4-fluorophenyl)methoxy)ethyl)-1-(4-iodobenzyl)piperidine (\[^{123}I\]-FMIP) was prepared by electrophilic radioiododestannylation of 5. Briefly, EtOH (50 µL), glacial acetic acid (8 µL), chloramine-T (1.0 µmol, 300 µg in 15 µL deionized H₂O) and n.c.a. \[^{123}I\]NaI (37 MBq in 10 µL 0.05 M NaOH) were added to a reaction vial containing 5 (200 µg, 0.281 mmol). The mixture was allowed to react for 10 min at ambient temperature. The reaction was quenched by adding sodium metabisulfite (1.6 µmol, 300 µg in 15 µL deionized H₂O). Purification was performed by HPLC on a Apollo C₁₈ column (250 mm x 4.6 mm, 5 µm) using 90:10:0.1 (v:v) - MeOH:H₂O:NH₄OH as solvent system at a flow rate of 1 mL/min. \[^{123}I\]-FMIP eluted with a retention time of 24-25 min. The collected fraction was diluted with sterile water and concentrated on an activated C₁₈ Sep-pak cartridge (Alltech Maxi-Clean Prevail C₁₈). \[^{123}I\]-FMIP was eluted from the Sep-pak with 1 ml EtOH. Finally the EtOH was diluted with isotonic saline to obtain an injectable solution (< 10 % (v:v) EtOH).

7.3.3. IN VITRO CHARACTERIZATION

The radioanalytical data were obtained by injection of 100 µL test solution on a RP analytical HPLC (Alltim C₁₈, 250 mm x 4.6 mm, 5 µm) using 91:9:0.1 (v:v) - MeOH:H₂O:NH₄OH as mobile phase at a flow rate of 1 mL/min. \[^{123}I\]-FMIP was maintained in 0.01 M PBS (pH 7.4) and in the injection solution, at room temperature. After 24 h, \[^{123}I\]-FMIP was analyzed by HPLC.

For calculating specific activity, a calibration curve between 10 x 10⁻³ µM and 0.1 x 10⁻³ µM and subsequently a more detailed calibration curve between 0.5 x 10⁻³ µM
and $0.1 \times 10^{-3} \mu M$ was obtained. Log $D_{7.4}$ was determined according to the method described in Chapter 4.

### 7.3.4. BIODISTRIBUTION STUDY

Male NMRI mice of 4 - 6 weeks old, weighing 22 - 30 g were injected in a tail vein with 200 $\mu$L 8:92 (v:v) - EtOH:physiological saline containing approximately 185 kBq (5 $\mu$Ci) of $[^{123}I]$-FMIP. The mice were awake during the injection. At various time points p.i. mice ($n=3$ for each time point) were sacrificed under isoflurane anaesthesia and dissected. Blood, urine and organs were removed, weighed and counted for radioactivity in a gamma counter. To remove adhering blood, all organs were rinsed with water prior to weighing and counting. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. Results are decay corrected and expressed as % ID/g ± SD.

### 7.3.5. REGIONAL BRAIN DISTRIBUTION STUDY

Male rats (250 - 300 g, Sprague-Dawley) were injected in a tail vein with 7.4 MBq (200 $\mu$Ci) of $[^{123}I]$-FMIP dissolved in 300 $\mu$L 8:92 (v:v) – EtOH:physiological saline. The rats were awake during the injection. At 10, 30, 60, 180 or 360 min, animals ($n=3$ for each time point) were sacrificed by i.v. injection of T61. Blood was taken and the brain was removed and dissected. Blood samples and the different brain parts were weighed and counted for radioactivity with a gamma counter. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. Results are decay corrected and are expressed as % ID/g ± SD.
7.3.6. BLOCKING STUDY

To determine the specific tissue uptake of the labelled compound, blocking studies were performed in male NMRI mice of 4 - 6 weeks old, weighing approximately 25 g. Prior to tracer injection, mice received a tail vein injection of 150 µl (95:5 – physiological saline:EtOH) containing a selective ligand (5 mg/kg) for respectively the DAT (GBR 12909), SERT (citalopram) or NET (reboxetine mesylate). The control group received a tail vein injection of 150 µl (95:5 – physiological saline:EtOH) without ligand. After 20 min, the mice were injected with approximately 185 kBq (5 µCi) of \([123I]\)-FMIP dissolved in 100 µl EtOH:physiological saline solution (8:92). The mice were awake during the injections. The animals \((n=3 \text{ for each time point})\) were sacrificed at 2, 5, 60 or 180 min p.i. All tissues were treated as previously described. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. The concentration of radioactivity in tissues is decay-corrected and expressed as % ID/g ± SD. Statistical analysis was performed using one-sided, unpaired student’s \(t\)-test. Only p-values < 0.05 are considered significant.

7.3.7. PLASMA BINDING

Plasma protein binding was determined according to literature procedures (Gandelman et al., 1994; Fowler et al., 2007). In brief, a known amount of radiotracer (37 kBq (1 µCi)) was added to 500 µL mouse plasma and the mixture was incubated for 10 min at room temperature. Three aliquots (30 µL) of spiked plasma were counted for radioactivity. The remaining plasma was transferred onto a Centrifree device with a nominal molecular weight limit of 30 kDa (Amicon inc, Millipore) and centrifuged for 15 min at 4000 g. The top part of the Centrifree tube was discarded, and 3 aliquots (30 µL) of the solution remaining in the bottom cup (unbound fraction) were counted for radioactivity. The plasma protein binding
was determined by calculating the free fraction as the ratio of the counts of filtered aliquot to the counts of non-centrifuged aliquot.

7.3.8. **METABOLITE ANALYSIS**

200 µL 92:8 (v:v) - Isotonic saline:EtOH containing 1.85 - 3.7 MBq (50 – 100 µCi) [¹²³I]-FMIP was injected in a tail vein of awake male NMRI mice (5 - 7 weeks old, weighing 25 - 30 g). At 10 or 60 min p.i., the mice (n=3 for each time point) were sacrificed and blood and brain were taken and treated as described in Chapter 4. HPLC analysis was performed using a RP C₁₈ HPLC column (Econosphere C₁₈ 250 mm x 10 mm, 10 µm) attached to a precolumn (Alltima C₁₈ 33 mm x 7 mm, 10 µm) with 91:9:0.1 (v:v) methanol:H₂O:NH₄OH as solvent system at a flow rate of 6 mL/min.

7.3.9. **BLOOD-BRAIN BARRIER TRANSPORT INHIBITION STUDY**

To investigate if the low brain uptake of [¹²³I]-FMIP is due to P-gp interference, a biodistribution study with pretreatment of the mice with CsA was performed. A 50 mg/kg dose and a 30 min time period between CsA and tracer injection has been reported to inhibit the efflux action of P-gp pumps in rodent brain (Ishiwata et al., 2007). Male NMRI mice with a body mass of approximately 25 g (n=3 for each time point) were i.v. injected with either 50 mg/kg CsA (test group) or the same volume of physiological saline (control group). After 30 min, [¹²³I]-FMIP (185 kBq (5 µCi), 150 µL) was injected via a tail vein. The mice were awake during the injections. The mice were sacrificed and dissected at 2, 60 or 180 min p.i. of [¹²³I]-FMIP. Blood and organs were weighed and counted for radioactivity. To remove adhering blood, all organs were rinsed with water prior to weighing and counting. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. Results are decay-corrected and expressed as %
ID/g ± SD. Statistical analysis was performed using one-sided, unpaired student’s t-test. Only p-values < 0.05 are considered significant.

7.3.10. REGIONAL BRAIN DISTRIBUTION AFTER CSA PRETREATMENT

Male rats (250 - 300 g, Sprague-Dawley) were injected in a tail vein with 7.4 MBq (200 µCi) of [123I]-FMIP dissolved in 300 µL 8:92 (v:v) – EtOH:physiological saline. 30 min prior to tracer injection, a solution of 50 mg/kg CsA (test group) or physiological saline (control group) was administered intravenously. At 30, 60, 180 and 360 min after [123I]-FMIP injection, animals (n=3 for each time point) were sacrificed by intravenous injection of T61. Blood was taken and the brain was removed and dissected. Blood samples and the different brain parts were weighed and counted for radioactivity with a gamma counter. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. Radioactivity is decay corrected and results are expressed as % ID/g ± SD. Statistical analyses were performed using the one-side unpaired student’s t test. A p-value < 0.05 is interpreted as statistically significant.

7.4. Results & Discussion

7.4.1. ORGANIC SYNTHESIS

As mentioned in Chapter 4, iodination can be accomplished by electrophilic as well as nucleophilic substitution. Several attempts to produce [123I]-FMIP by nucleophilic substitution failed due to the inefficient radiochemical yield. In order to radiosynthesize [123I]-FMIP by electrophilic substitution, the synthesis of the tributylstannyl precursor was necessary.
7.4.1.1.  Precursor synthesis

The precursor molecule was synthesized in four steps as is depicted in Figure 7.3. The starting material 1 was prepared by Boos et al. (2006).

Figure 7.3 Synthesis of the tributylstanny precursor 5

Reagents: (a) 4-hydroxybenzoic acid, N-hydroxybenzotriazole, 1-ethyl-3-(3'-dimethylaminopropyl)carbodiimide, CH₂Cl₂; (b) lithium aluminium hydride, sulphuric acid, THF; (c) N-phenyl trifluoromethanesulphonimide, N,N-diisopropylethylamine, CH₂Cl₂; (d) bis(tributyltin), tetrakis(triphenylphosphine)palladium, lithium chloride, dioxane

The most direct route to the tributylstannyl precursor is generally a palladium catalyzed stannylation using hexabutyldistannane and tetrakis(triphenylphosphine)-palladium where a bromine-atom is replaced by a tributylstannyl group. Several attempts to synthesize 5 by this route were unsuccessful, requiring another route. It was found that the triflate analogue was a suitable substrate for the Stille coupling. In this way, the tributylstannyl precursor 5 was synthesized starting from 1 through the triflate intermediate in an overall yield of 25%. First, the secondary cyclic amine 1 was coupled with 4-hydroxybenzoic acid, resulting in 2 which was used without further purification. Reduction of 2 yielded the tertiary amine 3
The hydroxyl function of 3 was converted into the triflate (87%), making it a better leaving group. Finally, the precursor molecule was obtained by replacing the triflate by tributylstannyl using bis(tributylstannane) (68%).

7.4.1.2. Synthesis of FMIP

Nucleophilic substitution of 1 yielded the cold iodinated product FMIP in a yield of 50% (Figure 7.4). FMIP is required as reference compound in HPLC analysis.

![Figure 7.4 Synthesis of 4-(2-(bis(4-fluorophenyl)methoxy)ethyl)-1-(4-iodobenzyl)piperidine](image)

7.4.2. RADIOSYNTHESIS

\[^{123}\text{I}\text{-FMIP}\] was obtained in a radiochemical yield of 40 ± 10% by electrophilic iododestannylation of the tributylstannyl precursor 5 (Figure 7.5).

![Figure 7.5 Radiosynthesis of \[^{123}\text{I}\text{-FMIP}\](image)
7.4.3. IN VITRO CHARACTERIZATION

The radiolabelled compound $[^{123}I]$-FMIP was co-injected with the cold compound. Similar retention times were observed for $[^{123}I]$-FMIP and FMIP, confirming the identity of the synthesized product (Figure 7.6). The average radiochemical purity of $[^{123}I]$-FMIP was found to be $> 98 \%$. After 24 h, the radiochemical purity of $[^{123}I]$-FMIP remained higher than 95 % both in PBS buffer and in the injection solution.

![HPLC chromatogram of $[^{123}I]$-FMIP and FMIP co-injection](image)

**Figure 7.6** HPLC chromatogram of $[^{123}I]$-FMIP and FMIP co-injection

The upper part of the figure shows the UV-chromatogram, the radiochromatogram is shown in the lower part.

Since no UV-signal was observed for the amount of $[^{123}I]$-FMIP synthesized, the detection limit was used for calculation of the specific activity. Using the described
The radioanalytical method, the detection limit for $[^{123}\text{I}]$-FMIP was $1.5 \times 10^{-6}$ M. Specific activity appeared to be at least 667 GBq/µmol (18 Ci/µmol).

An ideal log $D_{7.4}$ value for brain radiotracers is between 1.5 and 3.5 (Waterhouse, 2003). The determined log octanol/PBS partition coefficient was found to be 1.42 ± 0.12, which is suitable for brain penetration.

### 7.4.4. BIODISTRIBUTION STUDY

Results of the biodistribution study are shown in Table 7.1. Radioactivity concentrations for $[^{123}\text{I}]$-FMIP in blood and brain of NMRI mice are shown in Figure 7.7. Uptake of the tracer in mouse brain was demonstrated with a maximum value of $0.96 \pm 0.53$ % ID/g in brain at 0.5 min p.i. The tracer was rapidly cleared out of the blood. At all time points, blood activity remained higher than brain activity.

![Figure 7.7 Blood-brain distribution of $[^{123}\text{I}]$-FMIP in male NMRI mice](image)

Values are expressed as % ID/g ± SD ($n=3$)

Other organs with high tracer uptake were heart ($11.14 \pm 3.79$ % ID/g at 0.5 min p.i.) and lungs ($43.27 \pm 15.46$ % ID/g at 0.5 min p.i.). The heart and lungs are the
first organs that are passed by the blood flow after intravenous injection of the radiotracer in the blood. The radioactivity uptake in these organs is therefore probably a reflection of the blood pool radioactivity. Since radioactivity uptake in stomach is low (1.33 ± 0.55 % ID/g at 0.5 min p.i.) and does not change between the various time points (1.06 ± 0.08 % ID/g at 180 min p.i.), [123I]-FMIP is probably not sensitive to dehalogenation \textit{in vivo}.

High uptake was seen in liver (11.43 ± 4.53 % ID/g at 20 min p.i.), kidneys (4.91 ± 2.14 %ID/g at 0.5 min p.i.) and urine (data not shown) and uptake in the intestines was low, suggesting mainly urinary and no biliary clearance of [123I]-FMIP during the investigated timeframe.
Table 7.1 Tissue uptake of radioactivity in male NMRI mice at various time points following i.v. administration $[^{123}\text{I}]-\text{FMIP}$

<table>
<thead>
<tr>
<th>Time (min)</th>
<th>0.5</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>5</th>
<th>10</th>
<th>20</th>
<th>40</th>
<th>60</th>
<th>120</th>
<th>180</th>
<th>300</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood</td>
<td>11.14 ± 2.28</td>
<td>8.95 ± 3.97</td>
<td>3.02 ± 0.96</td>
<td>1.73 ± 0.65</td>
<td>1.01 ± 0.35</td>
<td>0.99 ± 0.45</td>
<td>0.67 ± 0.24</td>
<td>0.50 ± 0.11</td>
<td>0.30 ± 0.11</td>
<td>0.31 ± 0.01</td>
<td>0.37 ± 0.02</td>
<td>0.22 ± 0.05</td>
</tr>
<tr>
<td>Brain</td>
<td>0.96 ± 0.53</td>
<td>0.41 ± 0.11</td>
<td>0.26 ± 0.08</td>
<td>0.21 ± 0.07</td>
<td>0.14 ± 0.02</td>
<td>0.23 ± 0.07</td>
<td>0.22 ± 0.07</td>
<td>0.21 ± 0.04</td>
<td>0.13 ± 0.04</td>
<td>0.20 ± 0.06</td>
<td>0.26 ± 0.02</td>
<td>0.16 ± 0.06</td>
</tr>
<tr>
<td>Heart</td>
<td>11.14 ± 3.79</td>
<td>5.48 ± 1.29</td>
<td>4.91 ± 0.59</td>
<td>4.54 ± 2.12</td>
<td>3.20 ± 1.22</td>
<td>5.01 ± 1.36</td>
<td>4.24 ± 1.01</td>
<td>2.35 ± 0.72</td>
<td>1.15 ± 0.36</td>
<td>0.96 ± 0.23</td>
<td>1.06 ± 0.14</td>
<td>0.71 ± 0.23</td>
</tr>
<tr>
<td>Lungs</td>
<td>43.27 ± 15.46</td>
<td>20.03 ± 1.3</td>
<td>14.32 ± 1.54</td>
<td>17.51 ± 8.73</td>
<td>11.80 ± 3.42</td>
<td>13.37 ± 6.75</td>
<td>9.12 ± 7.17</td>
<td>5.70 ± 1.44</td>
<td>3.87 ± 1.35</td>
<td>3.66 ± 1.13</td>
<td>3.73 ± 0.51</td>
<td>2.23 ± 1.03</td>
</tr>
<tr>
<td>Stomach</td>
<td>1.33 ± 0.55</td>
<td>0.81 ± 0.17</td>
<td>0.83 ± 0.25</td>
<td>1.11 ± 0.47</td>
<td>0.50 ± 0.12</td>
<td>0.94 ± 0.29</td>
<td>0.85 ± 0.02</td>
<td>1.65 ± 1.15</td>
<td>0.61 ± 0.28</td>
<td>0.67 ± 0.27</td>
<td>1.06 ± 0.08</td>
<td>0.88 ± 0.52</td>
</tr>
<tr>
<td>Spleen</td>
<td>3.23 ± 1.45</td>
<td>2.42 ± 0.56</td>
<td>3.85 ± 1.78</td>
<td>6.34 ± 3.87</td>
<td>4.23 ± 1.43</td>
<td>6.61 ± 0.69</td>
<td>5.99 ± 1.36</td>
<td>3.84 ± 1.66</td>
<td>1.85 ± 0.82</td>
<td>2.08 ± 0.5</td>
<td>2.46 ± 0.84</td>
<td>1.77 ± 0.74</td>
</tr>
<tr>
<td>Liver</td>
<td>4.91 ± 2.97</td>
<td>3.53 ± 0.86</td>
<td>5.04 ± 1.06</td>
<td>5.17 ± 2.04</td>
<td>3.99 ± 1.17</td>
<td>9.03 ± 1.8</td>
<td>11.43 ± 4.53</td>
<td>10.09 ± 2.76</td>
<td>8.10 ± 4.27</td>
<td>10.30 ± 3.02</td>
<td>14.20 ± 4.35</td>
<td>8.70 ± 4.28</td>
</tr>
<tr>
<td>Kidneys</td>
<td>4.91 ± 2.14</td>
<td>3.67 ± 0.85</td>
<td>3.61 ± 1.05</td>
<td>3.97 ± 1.91</td>
<td>2.76 ± 0.87</td>
<td>4.65 ± 0.3</td>
<td>4.46 ± 1.04</td>
<td>3.55 ± 1.11</td>
<td>2.53 ± 1.35</td>
<td>2.88 ± 0.79</td>
<td>3.00 ± 0.86</td>
<td>2.09 ± 0.86</td>
</tr>
<tr>
<td>Small intestine</td>
<td>0.68 ± 0.28</td>
<td>0.49 ± 0.06</td>
<td>0.53 ± 0.2</td>
<td>0.65 ± 0.21</td>
<td>0.35 ± 0.06</td>
<td>0.74 ± 0.12</td>
<td>0.71 ± 0.21</td>
<td>0.69 ± 0.03</td>
<td>0.48 ± 0.24</td>
<td>0.80 ± 0.15</td>
<td>1.20 ± 0.13</td>
<td>0.91 ± 0.49</td>
</tr>
<tr>
<td>Large intestine</td>
<td>0.37 ± 0.16</td>
<td>0.25 ± 0.03</td>
<td>0.24 ± 0.07</td>
<td>0.29 ± 0.12</td>
<td>0.16 ± 0.05</td>
<td>0.38 ± 0.11</td>
<td>0.28 ± 0.11</td>
<td>0.31 ± 0.06</td>
<td>0.20 ± 0.09</td>
<td>0.36 ± 0.11</td>
<td>0.63 ± 0.22</td>
<td>0.69 ± 0.28</td>
</tr>
<tr>
<td>Bladder</td>
<td>1.25 ± 0.65</td>
<td>0.73 ± 0.08</td>
<td>0.64 ± 0.1</td>
<td>0.68 ± 0.28</td>
<td>0.63 ± 0.28</td>
<td>0.82 ± 0.15</td>
<td>0.85 ± 0.04</td>
<td>1.01 ± 0.32</td>
<td>0.95 ± 0.34</td>
<td>1.34 ± 0.73</td>
<td>1.64 ± 0.54</td>
<td>0.93 ± 0.15</td>
</tr>
<tr>
<td>Pancreas</td>
<td>1.54 ± 0.55</td>
<td>1.05 ± 0.25</td>
<td>1.08 ± 0.21</td>
<td>1.45 ± 0.96</td>
<td>0.1 ± 0.98</td>
<td>1.54 ± 0.18</td>
<td>1.5 ± 0.33</td>
<td>1.19 ± 0.73</td>
<td>1.05 ± 0.42</td>
<td>1.68 ± 0.28</td>
<td>2.4 ± 0.34</td>
<td>2.54 ± 1.14</td>
</tr>
<tr>
<td>Muscle</td>
<td>0.91 ± 0.28</td>
<td>0.57 ± 0.13</td>
<td>0.75 ± 0.09</td>
<td>0.84 ± 0.15</td>
<td>0.66 ± 0.19</td>
<td>1.30 ± 0.58</td>
<td>0.88 ± 0.07</td>
<td>0.88 ± 0.21</td>
<td>0.61 ± 0.26</td>
<td>0.65 ± 0.17</td>
<td>0.75 ± 0.03</td>
<td>0.38 ± 0.11</td>
</tr>
<tr>
<td>Fat</td>
<td>0.93 ± 0.15</td>
<td>0.85 ± 0.62</td>
<td>0.85 ± 0.34</td>
<td>4.27 ± 5.57</td>
<td>0.72 ± 0.43</td>
<td>0.81 ± 0.38</td>
<td>0.76 ± 0.27</td>
<td>1.12 ± 0.77</td>
<td>1.10 ± 0.56</td>
<td>1.25 ± 0.11</td>
<td>2.03 ± 0.34</td>
<td>0.93 ± 0.51</td>
</tr>
</tbody>
</table>

Values are expressed as % ID/g of tissue ± SD ($n=3$)
7.4.5. REGIONAL BRAIN DISTRIBUTION STUDY

The uptake of radioactivity in various rat brain regions as a function of time following intravenous administration of [123I]-FMIP is shown in Table 7.2.

Table 7.2 Tissue uptake of radioactivity in different brain regions in rats at various time points following i.v. administration of [123I]-FMIP

<table>
<thead>
<tr>
<th>Region</th>
<th>Time (min) 10</th>
<th>Time (min) 30</th>
<th>Time (min) 60</th>
<th>Time (min) 180</th>
<th>Time (min) 360</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood</td>
<td>0.086 ± 0.060</td>
<td>0.089 ± 0.097</td>
<td>0.123 ± 0.084</td>
<td>0.116 ± 0.049</td>
<td>0.087 ± 0.094</td>
</tr>
<tr>
<td>Striatum</td>
<td>0.022 ± 0.016</td>
<td>0.013 ± 0.012</td>
<td>0.036 ± 0.031</td>
<td>0.053 ± 0.038</td>
<td>0.016 ± 0.012</td>
</tr>
<tr>
<td>Cerebellum</td>
<td>0.013 ± 0.007</td>
<td>0.024 ± 0.019</td>
<td>0.042 ± 0.051</td>
<td>0.029 ± 0.025</td>
<td>0.026 ± 0.012</td>
</tr>
<tr>
<td>Frontal cortex</td>
<td>0.013 ± 0.008</td>
<td>0.009 ± 0.011</td>
<td>0.036 ± 0.041</td>
<td>0.027 ± 0.035</td>
<td>0.015 ± 0.011</td>
</tr>
<tr>
<td>Occipital cortex</td>
<td>0.018 ± 0.009</td>
<td>0.027 ± 0.033</td>
<td>0.043 ± 0.063</td>
<td>0.015 ± 0.007</td>
<td>0.018 ± 0.016</td>
</tr>
<tr>
<td>Temporal cortex</td>
<td>0.015 ± 0.008</td>
<td>0.010 ± 0.013</td>
<td>0.017 ± 0.013</td>
<td>0.019 ± 0.012</td>
<td>0.021 ± 0.025</td>
</tr>
<tr>
<td>Parietal cortex</td>
<td>0.015 ± 0.010</td>
<td>0.019 ± 0.024</td>
<td>0.037 ± 0.039</td>
<td>0.026 ± 0.028</td>
<td>0.010 ± 0.007</td>
</tr>
<tr>
<td>Hippocampus</td>
<td>0.015 ± 0.008</td>
<td>0.077 ± 0.065</td>
<td>0.007 ± 0.008</td>
<td>0.049 ± 0.058</td>
<td>0.027 ± 0.018</td>
</tr>
<tr>
<td>Hypothalamus</td>
<td>0.014 ± 0.006</td>
<td>0.023 ± 0.026</td>
<td>0.030 ± 0.020</td>
<td>0.027 ± 0.013</td>
<td>0.010 ± 0.011</td>
</tr>
<tr>
<td>Thalamus</td>
<td>0.003 ± 0.003</td>
<td>0.015 ± 0.013</td>
<td>0.016 ± 0.021</td>
<td>0.026 ± 0.006</td>
<td>0.013 ± 0.012</td>
</tr>
<tr>
<td>Pons &amp; medulla</td>
<td>0.022 ± 0.011</td>
<td>0.023 ± 0.019</td>
<td>0.064 ± 0.050</td>
<td>0.073 ± 0.055</td>
<td>0.038 ± 0.032</td>
</tr>
<tr>
<td>Total brain</td>
<td>0.017 ± 0.010</td>
<td>0.020 ± 0.010</td>
<td>0.042 ± 0.035</td>
<td>0.052 ± 0.036</td>
<td>0.032 ± 0.026</td>
</tr>
</tbody>
</table>

Values are expressed as % ID/g of tissue ± SD (n=3)

In the brain, DAT is predominantly localized in the striatum. The cerebellum seems to receive negligible dopaminergic innervation (Kaufman et al., 1991; Ciliax et al., 1995). The regional distribution of [123I]-FMIP in the rat brain was almost homogenous, which is not consistent with this current knowledge of DAT localization. The uptake in the striatum was not higher compared to the uptake in the other brain regions. No difference in radioactivity uptake was observed between the striatum (0.053 ± 0.038 % ID/g at 180 min p.i.) and the reference region (cerebellum (0.029 ± 0.025 % ID/g at 180 min p.i.)) suggesting that no specific binding of [123I]-FMIP to DAT is accomplished.
7.4.6. BLOCKING STUDY

The inability to show specific binding in the striatum could be due to the overall low brain uptake. This leads to high relative standard errors that could possibly influence the outcome of the study. DAT is not only present in the brain but is also found in several peripheral organs. Therefore, the specificity for DAT peripherally should also be investigated. For these reasons a blocking study with selective ligands for the monoamine transporters was performed in mice.

Results of the blocking study on the blood and brain uptake of $[^{123}\text{I}]-\text{FMIP}$ are shown in Table 7.3. No differences in radioactivity uptake are observed between the four treatment regimens at none of the selected time points.

**Table 7.3** Tissue uptake of radioactivity of $[^{123}\text{I}]-\text{FMIP}$ after injection of physiological saline (control), GBR 12909 (A), citalopram (B) or reboxetine mesylate (C)

<table>
<thead>
<tr>
<th>Time (min)</th>
<th>2</th>
<th>5</th>
<th>60</th>
<th>180</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control group</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blood</td>
<td>1.35 ± 0.42</td>
<td>0.77 ± 0.32</td>
<td>0.28 ± 0.20</td>
<td>0.54 ± 0.37</td>
</tr>
<tr>
<td>Brain</td>
<td>0.11 ± 0.04</td>
<td>0.11 ± 0.05</td>
<td>0.08 ± 0.04</td>
<td>0.13 ± 0.08</td>
</tr>
<tr>
<td>Test group A</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blood</td>
<td>1.30 ± 0.63</td>
<td>0.45 ± 0.03</td>
<td>0.40 ± 0.23</td>
<td>0.21 ± 0.03</td>
</tr>
<tr>
<td>Brain</td>
<td>0.13 ± 0.03</td>
<td>0.07 ± 0.03</td>
<td>0.11 ± 0.02</td>
<td>0.11 ± 0.04</td>
</tr>
<tr>
<td>Test group B</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blood</td>
<td>0.90 ± 0.31</td>
<td>0.44 ± 0.20</td>
<td>0.10 ± 0.04</td>
<td>0.12 ± 0.04</td>
</tr>
<tr>
<td>Brain</td>
<td>0.13 ± 0.07</td>
<td>0.16 ± 0.05</td>
<td>0.09 ± 0.03</td>
<td>0.15 ± 0.09</td>
</tr>
<tr>
<td>Test group C</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blood</td>
<td>1.55 ± 1.00</td>
<td>0.63 ± 0.37</td>
<td>0.17 ± 0.08</td>
<td>0.11 ± 0.04</td>
</tr>
<tr>
<td>Brain</td>
<td>0.22 ± 0.14</td>
<td>0.12 ± 0.05</td>
<td>0.11 ± 0.05</td>
<td>0.09 ± 0.05</td>
</tr>
</tbody>
</table>

Values are expressed as % ID/g of tissue ± SD (n=3)

Outside the central nervous system, localization of DAT is found in the gastrointestinal tract, stomach, pancreas (Mezey et al., 1999) and kidneys (Lee,
1993). Therefore uptake of [123I]-FMIP in peripheral organs was also measured (data not shown) and no influence of pretreatment with GBR 12909, citalopram or reboxetine mesylate could be demonstrated. These results suggest that no specific binding of [123I]-FMIP to DAT is accomplished.

7.4.7. PLASMA PROTEIN BINDING AND METABOLITE ANALYSIS

Determination of plasma protein binding revealed that 96 ± 2% of [123I]-FMIP was bound to plasma proteins. Control experiments with spiked plasma and brain revealed an extraction efficiency of 76 ± 4% for plasma and 82 ± 7% for brain samples. These extraction efficiencies indicate that the binding of [123I]-FMIP to plasma proteins is reversible. HPLC analysis of the spiked samples showed that all extracted radioactivity complies with [123I]-FMIP, so no degradation of [123I]-FMIP occurred during the extraction procedure.

Metabolite analysis of plasma demonstrated that at 10 min p.i. 70 ± 4% and at 60 min p.i. 55 ± 5% of intact [123I]-FMIP is remaining (Figure 7.8). [123I]-FMIP eluted at 18.5 min. Degradation products in plasma were iodide-123 (17 ± 11% at 10 min p.i. and 37 ± 2% at 60 min p.i.) and a lipophilic compound with a retention time of 15.5 min that eluted just before the parent compound (12 ± 7% at 10 min p.i. and 8 ± 6% at 60 min p.i.). This compound will probably have a structure close to the parent compound and is most likely caused by a hydroxylation on a phenyl group or defluorination of the phenyl ring.

In the brain, percentages of intact [123I]-FMIP were 82 ± 11% at 10 min p.i. and 83 ± 7% at 60 min p.i. (Figure 7.8). The detected metabolites were iodide-123 (9 ± 3% at 10 min p.i. and 13 ± 3% at 60 min p.i.) and another hydrophilic degradation product with a retention time of 5 min (10 ± 8% at 10 min p.i. and 4 ± 5% at 60 min p.i.). This metabolite is possibly the result of N-dealkylation.
Figure 7.8 Metabolite analysis at 10 min p.i. (above) and 60 min p.i. (below) of brain and plasma samples from mice.

Values are the mean of three experiments and are expressed as percent of total activity.

These values indicate that the tracer shows a relative good in vivo metabolic profile. Radioactivity in brain was mainly (> 80 %) present as intact $[^{123}\text{I}]-\text{FMIP}$ at the two time points. Besides the presence of free iodide, only 1 metabolite was found in plasma and another, more hydrophilic one in brain.
7.4.8. BLOOD-BRAIN BARRIER TRANSPORT INHIBITION STUDY

P-gp is an efflux pump for a wide range of xenobiotics at the BBB. Hence, P-gp can be a severe obstacle for the accumulation of drugs into the brain. The efflux action of P-gp pumps can be reduced by so-called modulators of which CsA is an example.

Table 7.4 Blood-brain distribution of $[^{123}\text{I}]$-FMIP

<table>
<thead>
<tr>
<th></th>
<th>Control group\textsuperscript{a}</th>
<th>Test group\textsuperscript{b}</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2 min</td>
<td>60 min</td>
</tr>
<tr>
<td>Blood</td>
<td>1.35 ± 0.42</td>
<td>0.28 ± 0.20</td>
</tr>
<tr>
<td>Brain</td>
<td>0.11 ± 0.04</td>
<td>0.08 ± 0.04</td>
</tr>
<tr>
<td>Brain/Blood</td>
<td>0.08 ± 0.01</td>
<td>0.35 ± 0.16</td>
</tr>
</tbody>
</table>

\textsuperscript{a} pretreatment with physiological saline  
\textsuperscript{b} pretreatment with CsA  
Values are expressed as \% ID/g ± SD (n=3). Values in bold: $p < 0.05$ (Student’s $t$ test, one-sided, compared with control)

Pretreatment of mice with CsA indicated a significantly higher brain uptake compared to the control group ($p = 0.02$ at all time points). Blood values were not affected by CsA pretreatment ($p = 0.09$ at 2 min p.i.; $p = 0.32$ at 1 h p.i.; $p = 0.45$ at 3 h p.i.). CsA treatment increased both the brain uptake (4.2 – 5.1 – 5.2 fold) and subsequently the brain-to-blood ratio. These findings are a possible explanation for the low brain accumulation of $[^{123}\text{I}]$-FMIP. Further research to validate the usefulness of $[^{123}\text{I}]$-FMIP as a SPECT tracer for P-gp pumps \textit{in vivo} is reported in Chapter 8.

7.4.9. REGIONAL BRAIN DISTRIBUTION AFTER CSA PRETREATMENT

We wanted to investigate if CsA also raises brain radioactivity in rats and if this increased brain uptake is homogenous or limited to DAT rich regions. If the
increased brain radioactivity is homogenous, it will be pointed out that $[^{123}\text{I}]-\text{FMIP}$ is not selective towards DAT in vivo.

CsA administration resulted in a significantly higher brain uptake at 30 min ($p = 0.036$), 180 min ($p = 0.003$) and 360 min ($p = 0.014$) p.i. compared to control group. At 60 min p.i. an increase in brain uptake was also observed although this increase was not significant. Blood activity was not affected by pretreatment with CsA. Unfortunately, the increased brain radioactivity was homogenous and not restricted to DAT rich regions (Figure 7.9). Radioactivity uptake increased in both striatum and cerebellum. These findings direct us to conclude that the non-ability to prove DAT selectivity in brain was not due to the low brain uptake of $[^{123}\text{I}]-\text{FMIP}$ but due to its lack of selectivity towards DAT in brain.

![Figure 7.9](image)

**Figure 7.9** Tissue uptake of $[^{123}\text{I}]-\text{FMIP}$ with CsA or physiological saline pretreatment

Values are expressed as % ID/g ±SD ($n=3$)

### 7.5. Conclusion

The preparation and purification of the precursor molecule, as well as the reference compound were accomplished with sufficient yields and without any significant problems. The radiosynthesis of $[^{123}\text{I}]-\text{FMIP}$ was achieved by electrophilic destannylation. Using a one-pot synthetic procedure, $[^{123}\text{I}]-\text{FMIP}$ was
prepared in a 40 ± 10 % yield and with good specific activity. After purification, the radiochemical purity appeared to be higher than 98 %. The authenticity of the tracer was determined by co-elution with the nonradioactive reference compound. In vitro, [123I]-FMIP remained stable for at least 24 h. The determined log D₇.₄ was 1.42 ± 0.12 %, which is suitable for brain penetration.

Upon intravenous administration, low levels of activity were observed in mouse brain indicating low blood-brain penetration of [123I]-FMIP. At none of the selected time points, radioactivity concentration in the brain exceeded blood activity. A possible reason for the low brain uptake of [123I]-FMIP is the contribution of P-gp pumps or other multidrug resistance protein transporters in the brain distribution of [123I]-FMIP. A significant increase in brain uptake (4.2 – 5.2 fold) of [123I]-FMIP was observed after CsA administration compared to the control group indicating [123I]-FMIP is transported by the P-gp pumps out of the brain. The effect of P-gp modulation on the biodistribution of [123I]-FMIP will be further explored and reported in Chapter 8. In rat brain, the regional distribution of DAT was not reflected in the radioactivity distribution. A blocking study also failed to proof selectivity of [123I]-FMIP towards DAT. Even more, [123I]-FMIP did not display selectivity towards one of the monoamine transporters.

Although FMIP is selective for DAT in vitro, it did not display the expected selective distribution in vivo in brain neither peripheral. A possible reason can be the selectivity of FMIP towards other receptors. In vitro, FMIP was only tested for its affinity to the monoamine transporters. Sigma receptors are a class of receptors distributed uniformly in the brain (Bouchard P and Quirion R, 1997). This distribution is in accordance with the observed homogenous brain uptake. A blocking study with selective inhibitors for this class of receptors should be performed to proof this assumption. Based on these results, one can conclude that [123I]-FMIP is not suitable as radioligand for in vivo SPECT visualization of DAT.
7.6. References


Bouchard P and Quirion R. [H]1,3-Di(2-tosyl)guanidine and [H](+)-pentazocine binding sites in the rat brain: autoradiographic visualization of the putative sigma 1 and sigma 2 receptor subtypes. Neuroscience 1997; 76:467–77.


Chapter 8

*In vivo* evaluation of $[^{123}\text{I}]-\text{FMIP}$ for imaging the P-glycoprotein transporter

De Bruyne S.\textsuperscript{1}, wyffels L.\textsuperscript{1}, Boos T.L.\textsuperscript{2}, Staelens S.\textsuperscript{3}, Deleye S.\textsuperscript{3}, Rice K.C.\textsuperscript{2}, De Vos F.\textsuperscript{1}

Nuclear Medicine and Biology, submitted

\textsuperscript{1} Laboratory for Radiopharmacy, Ghent University, Harelbekestraat 72, 9000 Ghent, Belgium
\textsuperscript{2} Chemical Biology Research Branch, National Institute on Drug Abuse and National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Bethesda, MD, USA
\textsuperscript{3} IBITECH-Medisip, Ghent University-IBBT, De Pintelaan 185, 9000 Ghent, Belgium
Chapter 8

\textit{In vivo} evaluation of \textsuperscript{[123I]}-FMIP for imaging the P-glycoprotein transporter

8.1. Abstract

\textit{Aim:} P-gp is an energy-dependent drug efflux transporter that contributes to the efflux of a wide range of xenobiotics at the BBB playing a role in drug-resistance or therapy failure. In this study, we evaluated \textsuperscript{[123I]}-FMIP as a novel SPECT tracer for imaging of P-gp at the brain \textit{in vivo}.

\textit{Methods:} The tissue distribution and brain uptake as well as the metabolic profile of \textsuperscript{[123I]}-FMIP in wild-type and mdr1a (-/-) mice after pretreatment with physiological saline or CsA (50 mg/kg) was investigated. The influence of increasing doses CsA on brain uptake of \textsuperscript{[123I]}-FMIP was explored. \textmu SPECT images of mice brain were obtained for different treatment strategies.

\textit{Results:} Modulation of P-gp with CsA as well as mdr1a gene depletion results in a significant increase in cerebral uptake of \textsuperscript{[123I]}-FMIP with only a minor effect on blood activity. \textsuperscript{[123I]}-FMIP is quite stable \textit{in vivo} with > 80 % intact \textsuperscript{[123I]}-FMIP in brain at 60 min p.i. in the different treatment regiments. A dose-dependent sigmoidal increase in brain uptake of \textsuperscript{[123I]}-FMIP with increasing doses of CsA was observed. \textit{In vivo} ROI-based SPECT measurements correlated well with the observations of the biodistribution studies.

\textit{Conclusion:} These findings indicate that \textsuperscript{[123I]}-FMIP is an effective SPECT tracer for imaging P-gp at the BBB.
8.2. Introduction

P-gp is an energy-dependent drug efflux transporter that contributes to the efflux of a wide range of xenobiotics at the BBB. Hence, P-gp can play a major role in drug-resistance or therapy failure (Schinkel et al., 1996; Linnet and Ejsing, 2008). Apart from its role in the central nervous system, P-gp is overexpressed in tumors and therefore implicated in the resistance to chemotherapeutics and in the pathogenesis of cancer (Gottesman and Pastan, 1993; Gottesman et al., 2002). Imaging of P-gp function and expression with PET or SPECT could be of great importance in drug development and medicine. Non-invasive monitoring of P-gp could be applied to elucidate the role of P-gp in several human diseases and to evaluate the efficacy of new P-gp modulators. Several PET tracers have already been evaluated for P-gp modulation among which $[^{11}C]$verapamil (Hendrikse et al., 1998; Lee et al., 2006) and $[^{11}C]$N-desmethyl-loperamide (Lazarova et al., 2008). The only reported SPECT radioligands for P-gp are $[^{99m}Tc]$sestamibi (Kostakoglu et al., 1997; Ballinger et al., 1995) and $[^{99m}Tc]$tetrofosmin (Ballinger et al., 1996). However, $[^{99m}Tc]$sestamibi and $[^{99m}Tc]$tetrofosmin are not only substrates for P-gp but are also involved in efflux mediated by multidrug resistance-associated protein and are not suitable for P-gp imaging in the brain (Hendrikse et al., 1997; Barbarics et al., 1998; Ballinger et al., 1996). To date, no iodinated SPECT ligands for P-gp functionality imaging have been published.

This study describes the in vivo evaluation of $[^{123}I]$-FMIP, a possible P-gp tracer. $[^{123}I]$-FMIP was originally designed as a tracer for the dopamine transporter but did not display the anticipated in vivo behaviour. Brain uptake was only minor which lead to the hypothesis that $[^{123}I]$-FMIP might be a substrate for the P-gp transporter (Chapter 7). Therefore we investigated the influence of P-gp blocking with CsA as well as the influence of gene depletion on the biodistribution and brain penetration of $[^{123}I]$-FMIP. A dose-response study is performed to assess the impact of increasing CsA dose on the brain uptake of $[^{123}I]$-FMIP. The influence of CsA pretreatment and mdr1a gene depletion on the metabolism of
[123I]-FMIP is investigated. Finally, a multipinhole µSPECT study of the brain uptake of [123I]-FMIP is performed using the Milabs U-SPECT-II in wild-type mice (with and without CsA administration) and in P-gp knock-out mice (mdr1a (-/-) mice).

8.3. Materials & Methods

8.3.1. BIODISTRIBUTION STUDIES IN MICE

The biodistribution of [123I]-FMIP was studied in male wild-type (=FVB) mice and mdr1a (-/-) mice of 5 – 7 weeks weighing 20 – 25 g. Wild-type mice and mdr1a (-/-) mice were divided into two groups. One group received an injection of CsA in a 50 mg/kg dose. The second group received the same volume physiological saline as control. After 30 min, approximately 185 kBq (5 µCi) [123I]-FMIP was injected intravenously and mice (n=3 for each group and each time point) were sacrificed at 1, 10, 30, 60 or 180 min after [123I]-FMIP injection. Organs and tissues were removed and weighed. To remove adhering blood, all organs were rinsed with water prior to weighing and counting. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. The radioactivity was measured using an automated gamma-counter. Radioactivity concentrations were decay-corrected and results are expressed as % ID/g ± SD. Statistical analysis was performed using a one-sided, unpaired student’s t-test. Only p values < 0.05 are considered significant.

8.3.2. DOSE ESCALATION STUDY

Adult male NMRI mice weighing 22 – 28 g were injected in a tail vein with increasing amounts of CsA. The dosages used were 10, 20, 25, 30, 40, 50 and 60 mg/kg. Due to the toxicity of CsA, higher doses CsA are not recommended. Side effects that can occur are nephrotoxicity, pancreatitis, liver toxicity,
gastrointestinal tract dysfunctions and edema. These undesired effects of CsA were not problematic since CsA was administrated just before the radiotracer and the animals were terminated afterwards.

$[^{123}\text{I}]-\text{FMIP}$ (185 kBq (5 µCi)) was administrated intravenously 30 min after CsA injection. The mice were awake during the injections. The mice ($n=3$ for each dosage) were sacrificed at 40 min p.i. of $[^{123}\text{I}]-\text{FMIP}$. Three control animals receiving physiological saline were subjected to the same protocol. Blood and organs were removed, weighed and counted for radioactivity in an automated gamma counter. All organs were rinsed with water prior to weighing and counting. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. Decay-corrected results are expressed as % ID/g ± SD.

Using Graphpad, a dose-response curve was fitted by a sigmoidal curve that is described by the four parameter logistic equation:

$$y = y_0 + (y_{\text{max}} - y_0) / (1 + 10^{(\log EC_{50} - x)^n})$$

$y$ is the response, $x$ is the logarithm of concentration, $EC_{50}$ the half-maximum effect dose and $n$ the Hill coefficient.

8.3.3. METABOLITE ANALYSIS

The metabolic pattern of $[^{123}\text{I}]-\text{FMIP}$ and the influence of CsA pretreatment, as well as the influence of depletion of the mdr1a gene were investigated. Male FVB (wild-type) or mdr1a (-/-) mice (approximately 6 weeks old and 25 g) were injected with CsA (50 mg/kg) or physiological saline 30 min prior to the administration of 1.85 – 3.7 MBq (50 – 100 µCi) $[^{123}\text{I}]-\text{FMIP}$. The mice were awake during the injections. At 10 min ($n=3$) and 60 min ($n=3$) p.i., the mice were sacrificed and blood and brain were removed and processed as described in Chapter 4. HPLC analysis was performed on a RP C$_{18}$ HPLC column (Alltima C$_{18}$ 250 mm × 10 mm, 10 µm) using 91:9:0.1 (v:v) MeOH:H$_2$O:NH$_4$OH as solvent system at a flow rate of 6 mL/min.
8.3.4. U-SPECT SCAN

Mice were divided into three groups (n=3 for each group). The first group, test group A, was injected with 50 mg/kg CsA 30 min before tracer injection, whereas the control group and test group B received physiological saline instead of CsA. In test group A and the control group, wild-type (FVB) mice were used. Test group B on the other hand, consisted of mdr1a (-/-) mice.

Dynamic scanning in 12 frames of 5 minutes was performed at 30 min p.i. of [123I]-FMIP using the Milabs U-SPECT-II (Milabs, Utrecht, The Netherlands). This µSPECT scanner is equipped with collimators consisting of a tungsten cylinder with 5 rings of 15 pinhole apertures of 0.6 mm diameter. All pinholes focused on a single volume in the center of the tube. For imaging mice brain, the animal bed was translated in 3 dimensions using an XYZ stage into 12 different bed positions. This aforementioned combination enabled a multiple-position acquisition and dynamic imaging at a time scale of a few minutes. Mice were injected with 11.1 MBq (0.3 mCi) [123I]-FMIP and anesthetized throughout the µSPECT scan by inhalation of 1.5 % isoflurane. The 20 % photopeak was centered at 159 keV and a double 10 % energy window correction at 135 keV and 190 keV was applied. The data were reconstructed on 0.375 voxels by 3 iterations of 16 OSEM subsets. The images were postfiltered by a Gaussian postfilter of 1.125 mm and color scales were normalized. A cylindrical brain ROI of 25 mm³ (4 mm diameter and 2 mm height) was drawn on the brain for further analysis. Statistical analysis was performed using a one-sided, unpaired student’s t-test. Only p-values < 0.05 are considered significant.
8.4. Results & Discussion

8.4.1. RADIOCHEMISTRY

\(^{[123I]}\)-FMIP was prepared in a 40 ± 10 % radiochemical yield, as previously described (Figure 8.1). The specific activity was > 667 GBq/µmol (18 Ci/µmol) and radiochemical purity appeared to be higher than 98 % (see Chapter 7). \(^{[123I]}\)-FMIP was formulated in an 8:92 (v:v) - EtOH:physiological saline solution for \textit{in vivo} studies.

\[ \text{Figure 8.1 Radiosynthesis of }^{[123I]}\text{-FMIP} \]

8.4.2. BIODISTRIBUTION STUDIES

Figure 8.2 shows the tissue distribution of radioactivity uptake after intravenous injection of 185 kBq (5 µCi) \(^{[123I]}\)-FMIP in wild-type and mdr1a knock-out mice with physiological saline or CsA pre-administration.
Figure 8.2 Tissue distribution of [123I]-FMIP in wild-type and mdr1a knock-out mice with saline or CsA pre-administration

Values are mean of three experiments, \(^A\) pretreatment with saline in wild-type mice, \(^B\) pretreatment with CsA in wild-type mice, \(^C\) pretreatment with saline in mdr1a (-/-) mice, \(^D\) pretreatment with CsA in mdr1a (-/-) mice * \(P < 0.05\) (student’s \(t\) test) compared to group A ** \(P < 0.05\) (student’s \(t\) test) compared to group C

8.4.2.1. Biodistribution study in wild-type mice

The brain uptake was low at each time point investigated (0.67 ± 0.15 % ID/g at 1 min p.i. and 0.41 ± 0.24 % ID/g at 60 min p.i.). Although [123I]-FMIP was rapidly cleared out of the blood, blood activity remained higher than brain activity at all time points (Figure 8.2). At 60 min p.i., the highest tracer uptake was observed in the liver with 36.38 ± 18.12 % ID/g (Figure 8.2). Other peripheral organs with high tracer uptake at 60 min p.i. were lungs (9.74 ± 6.01 % ID/g), kidneys (7.23 ± 2.46 % ID/g) and spleen (7.34 ± 4.90 % ID/g).
8.4.2.2. **Influence of CsA pretreatment**

Modulation of P-gp with 50 mg/kg CsA resulted in significant changes in cerebral uptake of $[^{123}]$-FMIP at each time point investigated (Figure 8.3).

![Figure 8.3](image)

**Figure 8.3** Brain distribution of $[^{123}]$-FMIP in wild-type mice with saline and CsA pretreatment.

Values are expressed as % ID/g ± SD (n=3); p-values are calculated using the one-sided student’s t test.

Brain uptake raised 2.6 – 5.1 fold compared to mice without CsA pretreatment. At 10 min p.i. the highest raise was observed (5.09 ± 1.48). Since CsA pretreatment had no effect on blood activity, the brain/blood ratio was also significantly increased. At 60 and 180 min p.i. a slight decrease in intestinal uptake was observed after CsA pretreatment. This is possibly due to a slower excretion caused by P-gp modulation. Furthermore, no significant differences could be observed at any of the selected time points in the peripheral organs (Figure 8.2).

8.4.2.3. **Influence of gene depletion**

The influence of genetic disruption of P-gp in mice on brain radioactivity uptake is shown in Figure 8.4.
In *vivo* evaluation of $^{[123]}$I-FMIP for P-gp imaging – Chapter 8

Figure 8.4 Brain distribution of $^{[123]}$I-FMIP in wild-type mice with saline and mdr1a (-/-) mice with saline pretreatment ($n=3$)

Values are expressed as % ID/g ± SD ($n=3$); p-values are calculated using the one-sided student's *t* test

In mdr1a (-/-) mice, $^{[123]}$I-FMIP content was increased in the brain at all selected time points. Brain uptake raised 2.9 – 5.0 fold compared to wild-type mice with the highest increase at 30 min p.i. (4.95 ± 0.81). In contrast, no significant differences in $^{[123]}$I-FMIP levels in plasma were measured between the two types of mice at the chosen time points. Consequently, brain/blood ratios were significant higher in mdr1a (-/-) mice (except at 180 min p.i.). Although liver, kidneys and intestines displayed a decreased radioactivity uptake in the mdr1a (-/-) mice, this decrease was not significant. None of the peripheral organs displayed significant changes at any of the selected time points except the pancreas at 60 min p.i. (Figure 8.2).

8.4.2.4. Influence of CsA pretreatment in mdr1a (-/-) mice

Pretreatment of mdr1a (-/-) mice with CsA had no additional significant effect on brain activity except at the earliest time point (Figure 8.5). At 1 min p.i., not only brain but also blood uptake was increased resulting in similar brain/blood ratio.
Heart and lung uptake was significantly increased, an effect that is probably caused by the increased blood pool activity and not P-gp mediated. At 60 and 180 min p.i. a significant increase in intestinal uptake was observed after CsA pretreatment. This effect could be P-gp mediated but could also be the result of a shift in excretion after CsA administration. In conclusion, it can be stated that CsA administration in mdr1a (-/-) mice did not cause significant changes in the brain uptake of [123I]-FMIP (Figure 8.5).

**Figure 8.5** Brain distribution of [123I]-FMIP in mdr1a (-/-) with saline and CsA pretreatment (n=3)

Values are expressed as % ID/g ± SD (n=3); p-values are calculated using the one-sided student’s *t* test

8.4.3. **DOSE ESCALATION STUDY**

The effect of increasing doses CsA on the brain uptake and blood concentration of [123I]-FMIP was investigated (Figure 8.6). The experiment showed a sigmoid relationship between the concentration of CsA administrated and the uptake of [123I]-FMIP in the brain. The EC₅₀ value was 24.48 ± 0.73 mg/kg. With a higher dose of CsA, a higher brain uptake was observed with stagnation from 30 mg/kg CsA. Between 30 mg/kg (0.61 ± 0.13 % ID/g) and 60 mg/kg (0.56 ± 0.23 % ID/g) CsA, there was no significant difference in brain uptake. The effect of CsA
administration on brain uptake was significant at each dosage used compared to the control group. Only a minor increase in blood activity was observed after administration of increasing doses of CsA. Blood uptake of radioactivity without CsA pretreatment was 0.29 ± 0.14 % ID/g and increased to 0.51 ± 0.06 % ID/g at the highest dose CsA used but the increase was not significant.

![Graph](image)

**Figure 8.6** Effect of various doses CsA on brain uptake and blood activity of [123I]-FMIP

Values are expressed as % ID/g ± SD (n=3)

8.4.4. METABOLITE ANALYSIS

Table 8.1 summarizes the metabolic profile of [123I]-FMIP. Metabolite analysis of plasma in wild-type mice demonstrated that at 10 min p.i. 70 ± 6 % and at 60 min p.i. 54 ± 8 % of intact [123I]-FMIP is remaining (Figure 8.7). Degradation products in plasma were 123I- (13 ± 1 % at 10 min p.i. and 39 ± 4 % at 60 min p.i.) and a lipophilic metabolite with a retention time of 9 min that elutes just before the parent compound (17 ± 7 % at 10 min p.i. and 8 ± 4 % at 60 min p.i.). This compound is believed to have a structure close to the parent compound and probably originates from a hydroxylation on a phenyl group or defluorination of a phenyl ring.
In brain, percentages of intact $[^{123}I]$-FMIP were 86 ± 2 % at 10 min p.i. and 85 ± 3 % at 60 min p.i. (Figure 8.7). The detected metabolites were iodide-123 (8 ± 2 % at 10 min p.i. and 12 ± 4 % at 60 min p.i.) and a hydrophilic degradation product with a retention time of 5.5 min (5 ± 1 % at 10 min p.i. and 4 ± 1 % at 60 min p.i.). This metabolite is possibly the result of N-dealkylation.

![Figure 8.7 Metabolite chromatogram of $[^{123}I]$-FMIP in FVB and mdr1a (-/-) mice after saline and CsA pretreatment at 10 min p.i. (A) and 60 min p.i. (B)](image)

Values are the mean of three experiments and are expressed as percent of total activity.

Pretreatment with CsA resulted in less degradation in the brain with 94 ± 3 % and 93 ± 5 % intact $[^{123}I]$-FMIP at 10 min and 60 min p.i., respectively. The formation of an extra metabolism product (2 ± 1 % at 10 min p.i. and 1 ± 1 % at 60 min p.i.) with the same retention time of that found in plasma was observed. In plasma, pretreatment with CsA caused an increase in metabolism of $[^{123}I]$-
FMIP at 10 min p.i. while at 60 min p.i. the fraction of \([^{123}I]-FMIP\) remained unchanged.

Depletion of the mdr1a gene had no effect on the fraction of radioactivity present as \([^{123}I]-FMIP\) in brain. Just as observed with CsA pretreatment, the same extra metabolism product was found (3 ± 3 % at 10 min p.i. and 2 ± 0 % at 60 min p.i.). In plasma, on the other hand, a high increase in the fraction of iodide-123 was observed. At 60 min p.i., \(^{123}I\) was the only extracted degradation product.

**Table 8.1** Metabolic profile of \([^{123}I]-FMIP\) at 10 min and 60 min p.i.

<table>
<thead>
<tr>
<th>Tissue</th>
<th>Time (min)</th>
<th>3 min (^{123}I)</th>
<th>5.5 min (^{123}I)</th>
<th>9 min (^{123}I)</th>
<th>11 min ([^{123}I]-FMIP)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control(^b) Brain</td>
<td>10</td>
<td>8 ± 2</td>
<td>5 ± 1</td>
<td>86 ± 2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>60</td>
<td>12 ± 4</td>
<td>4 ± 1</td>
<td>85 ± 3</td>
<td></td>
</tr>
<tr>
<td>Plasma</td>
<td>10</td>
<td>13 ± 1</td>
<td>17 ± 7</td>
<td>70 ± 6</td>
<td></td>
</tr>
<tr>
<td></td>
<td>60</td>
<td>39 ± 4</td>
<td>8 ± 4</td>
<td>54 ± 8</td>
<td></td>
</tr>
<tr>
<td>Test A(^b) Brain</td>
<td>10</td>
<td>2 ± 2</td>
<td>2 ± 1</td>
<td>94 ± 3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>60</td>
<td>3 ± 1</td>
<td>3 ± 3</td>
<td>93 ± 5</td>
<td></td>
</tr>
<tr>
<td>Plasma</td>
<td>10</td>
<td>17 ± 12</td>
<td>24 ± 19</td>
<td>59 ± 5</td>
<td></td>
</tr>
<tr>
<td></td>
<td>60</td>
<td>33 ± 12</td>
<td>16 ± 2</td>
<td>51 ± 14</td>
<td></td>
</tr>
<tr>
<td>Test B(^c) Brain</td>
<td>10</td>
<td>5 ± 4</td>
<td>11 ± 8</td>
<td>81 ± 10</td>
<td></td>
</tr>
<tr>
<td></td>
<td>60</td>
<td>6 ± 3</td>
<td>6 ± 2</td>
<td>86 ± 5</td>
<td></td>
</tr>
<tr>
<td>Plasma</td>
<td>10</td>
<td>36 ± 11</td>
<td>3 ± 5</td>
<td>64 ± 12</td>
<td></td>
</tr>
<tr>
<td></td>
<td>60</td>
<td>61 ± 8</td>
<td>39 ± 8</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Values are expressed as percent of total activity ± SD (\(n=3\))

\(^a\) pretreatment with saline in wild-type mice, \(^b\) pretreatment with CsA (50 mg/kg) in wild-type mice, \(^c\) pretreatment with saline in mdr1a (−/−) mice

8.4.5. **U-SPECT SCAN**

The μSPECT images obtained are shown in Figure 8.8. A low homogenous brain uptake was observed after injection of \([^{123}I]-FMIP\). As seen in Figure 8.8, almost
In vivo evaluation of $[^{123}]$-FMIP for P-gp imaging – Chapter 8

no activity was visible on the µSPECT scan. Radioactivity uptake in brain, integrated over the full scan time of 60 min, was considerably higher after CsA pretreatment as well as in mdr1a (-/-) mice. In the experiment in which CsA had been preadministrated to block P-gp, radioactivity concentration was on average $3.94 \pm 0.84$ fold higher compared to the baseline experiment. The ratio of brain radioactivity in test group B to that in the control group was about $4.27 \pm 1.20$ times increased.

![µSPECT image of mice brain at 60 min p.i. of $[^{123}]$-FMIP](image)

**Figure 8.8** µSPECT image of mice brain at 60 min p.i. of $[^{123}]$-FMIP

ROI’s were drawn around the middle of the brain, a pretreatment with CsA in wild-type mice, b pretreatment with saline in wild-type mice, c pretreatment with saline in mdr1a (-/-) mice

The regional distribution of $[^{123}]$-FMIP in mice brain was homogenous in the control group as well as in test group A and test group B. The uptake in the
striatum was not higher compared to the uptake in the other brain regions, confirming the previous finding that no specific binding of $^{[123]}$I-FMIP to the dopamine transporter is accomplished (Chapter 7).

The correlation of the biodistribution studies with µSPECT measurements are represented in table 8.2. ROI’s were obtained at 30 min p.i. and at 60 min p.i. for an exact comparison with the values of the biodistribution studies. The increase in brain uptake after CsA pretreatment and in mdr1a (-/-) mice is slightly higher in biodistribution studies compared to measurements obtained from µSPECT imaging (Table 8.2). In addition, the standard deviation is higher in the biodistribution studies. The low counts obtained when measuring the brain radioactivity in wild-type mice with saline pretreatment are a possible reason for these higher standard deviations. Another explanation can be the use of aliquots of the injection solution for calculation of the injected dose in the biodistribution study. These findings indicate not only the advantage of µSPECT imaging in small animal studies but also that in vivo ROI-based SPECT measurements correlated with the observations of the biodistribution studies.

**Table 8.2** Comparison of brain radioactivity uptake ratios of $^{[123]}$I-FMIP in the biodistribution study and µSPECT imaging

<table>
<thead>
<tr>
<th>Experiment</th>
<th>30 min p.i.</th>
<th>60 min p.i.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influence CsA$^{a}$</td>
<td>biodistribution</td>
<td>4.92 ± 1.94</td>
</tr>
<tr>
<td></td>
<td>µSPECT imaging</td>
<td>2.87 ± 0.83</td>
</tr>
<tr>
<td>Influence gene depletion$^{b}$</td>
<td>biodistribution</td>
<td>4.95 ± 2.03</td>
</tr>
<tr>
<td></td>
<td>µSPECT imaging</td>
<td>2.24 ± 0.35</td>
</tr>
</tbody>
</table>

Values are mean of three experiments ± SD. $^{a}$brain uptake in wild-type mice pretreated with Cs A/brain uptake in wild-type mice pretreated with saline, $^{b}$brain uptake in wild-type mice pretreated with saline/brain uptake in mdr1a (-/-) mice pretreated with saline

**8.5. Conclusion**

P-gp is among other localizations expressed in the BBB where it prevents accumulation of certain xenobiotics in the brain by an active transport
mechanism. Hence, P-gp can play a significant role in the resistance to CNS drugs (Schinkel et al., 1996; Linnet and Ejsing, 2008). P-gp has also been associated with several human disorders (Lam et al., 2001; Langford et al., 2004; Kwan and Brodie, 2005; Kortekaas et al., 2005; Turgut et al., 2008). Non-invasive monitoring of P-gp could be applied to elucidate the role of P-gp in these human diseases and to evaluate the efficacy of new P-gp modulators. Several tracers have already been evaluated for P-gp modulation but so far, no iodinated SPECT tracer for P-gp has been reported. Iodine-123 has a half-life of 13.2 h allowing a prolonged scanning time and consequently a longer follow-up of the radioactivity distribution is possible.

The aim of this study was to evaluate the usefulness of \([^{123}\text{I}]\)-FMIP for SPECT imaging of the P-gp transporters in brain. The synthesis and radiosynthesis of \([^{123}\text{I}]\)-FMIP were reported in Chapter 7.

The biodistribution studies revealed a 2.6 – 5.1 increase in brain uptake after blocking P-gp with CsA. The effect on blood activity was negligible indicating that the increased brain uptake is the result of a decreased tracer efflux and not due to an improved influx to the brain. Additional proof of P-gp involvement was obtained in the study with mdr1a (-/-) mice. In this study, we demonstrated a raise in brain radioactivity ranging from 2.9 – 5.0. No significant differences in other organs containing P-gp, like liver and kidneys, were observed. These finding corresponds with those reported in other studies (Hendrikse et al., 1998; Luurtsema et al., 2003) and can be explained by the unique barrier of the brain as well as the role of liver and kidneys in excretion and metabolism and experimental artefacts (bile ducts are not dissected apart from the liver).

\([^{123}\text{I}]\)-FMIP shows a fairly stable in vivo metabolic profile. One labelled metabolite (T, 9.5 min) is probably also a substrate for P-gp as the metabolite only occurs in the brain after CsA pretreatment and in mdr1a (-/-) mice. Radioactivity in brain was mainly (> 80 %) present as intact \([^{123}\text{I}]\)-FMIP at the two time points in the three different treatment regiments.
A dose escalation study with increasing concentrations CsA revealed a sigmoidal dose-response relationship between the dose CsA administrated and the brain uptake of \([^{123}I]-FMIP\). A log EC\(_{50}\) value of 24.48 mg/kg was obtained. This study demonstrated that the blockade of \([^{123}I]-FMIP\) efflux by P-gp is saturated and complete with a CsA dosage of 30 mg/kg. The dose with maximal tracer uptake and the EC\(_{50}\) value are comparable with the values reported for other tracers. \([^{11}C]\)Carvedilol for example reached maximum brain uptake at a dosage of 30 mg/kg (Elsinga et al., 2005). \([^{11}C]\)Verapamil has a EC\(_{50}\) value of 22.76 which is comparable with that of \([^{123}I]-FMIP\) (Bart et al., 2003).

Comparison of biodistribution data with in vivo \(\mu\)SPECT observations shows a relative good correlation. With mdr1a (-/-) mice, the biodistribution study showed at 60 min p.i. a 2.92 ± 1.85 fold increase in brain uptake of \([^{123}I]-FMIP\), whereas \(\mu\)SPECT measurements revealed an 2.92 ± 0.56 fold increase. In biodistribution studies, pretreatment with CsA resulted in 4.17 ± 2.79 higher brain uptake which is in agreement with the 3.04 ± 0.73 increase obtained with \(\mu\)SPECT imaging. Using \(\mu\)SPECT measurements, the obtained standard errors where remarkably lower compared to those of the biodistribution studies. The use of a \(\mu\)SPECT device eliminates potential errors due to organ removal, weighing and gamma counting in a separate system. Furthermore, the injected dose is directly measured in contrast to the biodistribution studies where aliquots of the injection solution were employed to calculate the injected dose.

While the brain was visible as a black cavity when only \([^{123}I]-FMIP\) was administrated, CsA administration or the use of mdr1a (-/-) mice improved brain uptake of \([^{123}I]-FMIP\) resulting in a better image of the brain. In all treatment regiments a homogenous brain distribution was observed, supporting the previous finding that \([^{123}I]-FMIP\) is not suitable for mapping the dopamine transporter in vivo.

Brain uptake of \([^{123}I]-FMIP\) is very low in wild-type mice with physiological saline pre-administration, consistent with the rapid action and high capacity of P-gp.
CsA pretreatment as well as mdr1a gene depletion resulted in increase (two- to five-fold) of cerebral uptake of $^{123I}$-FMIP in mice. The effect on blood activity and radioactivity concentration in other organs was negligible. These findings indicate that $^{123I}$-FMIP is a very promising radiotracer to visualize P-gp function at the BBB.

8.6. References


Chapter 9

Radiosynthesis and *in vivo* evaluation of \[^{11}\text{C}\]-MC80 for P-glycoprotein imaging

De Bruyne S.\textsuperscript{1}, wyffels L.\textsuperscript{1}, Moerman L.\textsuperscript{1}, Sambre J.\textsuperscript{3}, Colabufo N.A.\textsuperscript{2}, Berardi F.\textsuperscript{2}, Perrone R.\textsuperscript{2}, De Vos F.\textsuperscript{1}

Nuclear Medicine and Biology, submitted

\textsuperscript{1} Laboratory for Radiopharmacy, Ghent University, Harelbekestraat 72, 9000 Ghent, Belgium
\textsuperscript{2} Dipartimento Farmaco-Chimico, Universita degli Studi di Bari, via Orabona 4, 70125 Bari- Italy
\textsuperscript{3} University Hospital Gent, Cyclotron Department, De Pintelaan , 9000 Ghent, Belgium
Chapter 9

Radiosynthesis and in vivo evaluation of [11C]-MC80 for P-glycoprotein imaging

9.1. Abstract

Aim: P-gp is an ATP-dependent efflux pump protecting the body against xenobiotics. We labelled an in vitro characterized substrate (MC80) of the P-gp pump with 11C and evaluated this tracer in vivo for its potential to image P-gp function and expression.

Methods: MC80 was labelled using 11CH3I. Biodistribution studies were performed in male FVB or mdr1a (-/-) mice pretreated with physiological saline, CsA (50 mg/kg) or cold MC80 (15 mg/kg). The metabolic profile of [11C]-MC80 was characterized.

Results: The radiochemical yield was 26 ± 5 % with a total synthesis time of 25 min. Cerebral uptake was increased in knock-out mice (1.5 – 2 fold) as well as after CsA pretreatment (1.3 – 2 fold). Administration of non-radioactive MC80 caused a reduced uptake in several organs including brain, pancreas and intestine. In brain, [11C]-MC80 displayed an excellent metabolic profile (> 90 % intact at 30 min p.i.).

Conclusion: [11C]-MC80 is modulated by and shows specific binding to P-gp. Since [11C]-MC80 shows specific binding to target organs, this compound may be useful for P-gp imaging, especially in the intestines. This compound can also be a lead compound for the development of other novel radioligands for measuring the expression of P-gp in the brain.
9.2. Introduction

P-gp is an ATP-dependent efflux pump that is expressed in several normal tissues including liver, kidneys, intestine and brain (Thiebaut et al., 1987; Schinkel and Jonker, 2003). The function of this efflux pump is to protect the human body against xenobiotics. It prevents accumulation in the brain of a wide range of drugs (Schinkel et al., 1996; Linnet and Ejsing, 2008) including anti-epileptics (Luna-tortos et al., 2008), anti-HIV drugs (Kim et al., 1998) and antidepressants (Szabo et al., 1999). Overexpression of P-gp in tumors is implicated in the resistance to chemotherapeutics in some cancers (Gottesman and Pastan, 1993; Gottesman et al., 2002). Besides its role in multidrug resistance, changes or abnormalities in P-gp expression and function are involved in the etiology and pathogenesis of several neurological diseases (Kwan and Brodie, 2005; Turgut et al., 2008; Kortekaas et al., 2005; Langford et al., 2004). A decreased P-gp function, for example, diminishes the clearance of amyloid plaques, increasing the vulnerability to Alzheimer disease (Lam et al., 2001; Vogelgesang et al., 2002). Imaging of P-gp function and expression with PET or SPECT could be of great importance in drug development and medicine. Non-invasive monitoring of P-gp could be applied to elucidate the role of P-gp in several human diseases and to evaluate the efficacy of new P-gp modulators. Several tracers have already been evaluated for P-gp modulation among them $[^{11}C]$verapamil (Hendrikse et al., 1998; Lee et al., 2006), $[^{11}C]$N-desmethyl-loperamide (Lazarova et al., 2008; Zoghbi et al., 2008) and $[^{99m}Tc]$sestamibi (Kostakoglu et al., 1997; Ballinger et al., 1995). All these radiotracers have at least one limitation, including significant contamination with radiometabolites, difficulty in radiosynthesis or very low baseline brain uptake which makes it difficult to see minor changes in P-gp expression. Moreover, the reported radiotracers for P-gp are all aimed to visualize P-gp function but not the expression and quantification of P-gp.

In the search for a superior radiotracer to image P-gp function or expression, we evaluated $[^{11}C]$-6,7-dimethoxy-2-(6-methoxy-naphthalen-2-ylmethyl)-1,2,3,4-tetra-
hydroisoquinoline ([11C]-MC80) for imaging P-gp function and expression. Recently, Colabufo et al. (2008) developed several 6,7-dimethoxytetrahydroisoquinoline derivatives as novel P-gp modulators. Their P-gp interacting mechanism and their potency towards P-gp was evaluated in vitro by combining three biological assays: [3H]vinblastine transport inhibition, apparent permeability determination and ATP-ase activation. From these assays, MC80 (Figure 9.1) can be hypothesized as a transported substrate with an interaction profile similar to CsA (Colabufo et al., 2008).

This study describes the synthesis and purification of [11C]-MC80. The development of a HPLC method for quantification is completed. Specific activity, radiochemical purity and log D$_{7.4}$ are reported. We also evaluated [11C]-MC80 in vivo in mice. To investigate the P-gp modulation characteristics, [11C]-MC80 is appraised in wild-type mice with or without CsA pretreatment in addition to P-gp knock-out mice. The metabolic profile of [11C]-MC80 in all three treatment groups is determined. Finally, specific binding of [11C]-MC80 is examined by pre-administration of cold MC80.

9.3. Materials & Methods

9.3.1. GENERAL

The precursor, 6,7-dimethoxy-2-(6-hydroxy-naphthalen-2-yl-methyl)-1,2,3,4-tetrahydroisoquinoline (MC90) as well as the cold reference compound, MC80, were kindly provided by the University of Bari, Dipartimento Farmaco-Chimico, Italy. MC80 was previously reported as compound 7h while MC90 was termed 7g.
MC80 was characterized as a transported substrate with an interaction profile similar to CsA (Colabufo et al., 2008).

\[^{11}C\]N-desmethyl-loperamide has been synthesized and evaluated by another PhD student of our lab. Those data are not reported in this thesis but are referred to when evaluating \[^{11}C\]-MC80.

### 9.3.2. RADIOCHEMISTRY

The alkylating reagent \[^{14}C\]methyl iodide was prepared from \[^{14}C\]methane by gas-phase iodination. The production of both \(^{11}\text{CH}_4\) and \(^{11}\text{CH}_3I\) is described in Chapter 4.

![Figure 9.2 Radiosynthesis of \[^{11}C\]-MC80](image)

\[^{11}\text{CH}_3I\] in carrier helium was bubbled into a sealed vial containing 3 µmol MC90 and 7 µL NaH (1 M in DMF) in DMF (243 µL). When the radioactivity in the reaction vial reached maximum activity levels, the reaction mixture was heated at 30°C for 5 min. Afterwards, the crude reaction mixture was diluted with eluent and injected onto a semipreparative C\(_{18}\) HPLC column (Econosphere, 10 µm, 10 mm x 250 mm, Grace Davison Discovery Sciences, Lokeren, Belgium) that was eluted at 6 mL/min with (80:20) MeOH:sodium acetate buffer (0.02 M, pH 5.5). The eluate was monitored for radioactivity (solar-blind P.I.N. photodiode) and UV absorbance (smartline UV detector 2500, Knauer, Berlin, Germany) at 254 nM. \[^{11}C\]-MC80 (\(T_r = 9.3\) min) was collected in 30 mL PBS (pH 7.4, 0.01 M) and
loaded on a C_{18} Sep-pak column (Alltech Maxi-clean SPE Prevail C_{18}, previously activated with 1 mL EtOH and 5 mL sterile water). After the cartridge has been washed with 5 mL sterile water, the desired product $[^{11}\text{C}]-\text{MC80}$ was eluted with 1 mL EtOH. For biodistribution studies, the EtOH fraction was diluted with 10 mL physiological saline. For metabolite analysis, EtOH was evaporated to dryness and the residue was redissolved in an adequate amount of EtOH/saline (8/92 - v/v).

9.3.3. IN VITRO CHARACTERIZATION

Quality control consisted of the determination of radiochemical purity and specific activity, calculated by analytical HPLC assay using a Gracesmart C_{18} column (5 µm, 4.6 mm x 250 mm, Grace Davison Discovery Sciences, Lokeren, Belgium) at a flow rate of 1 mL/min. The mobile phase consisted of a mixture of 75 % MeOH and 25 % sodium acetate buffer (0.02 M, pH 5.5). A calibration curve of unlabelled reference compound ($0.02 \times 10^{-3} \, \mu\text{M} \, - \, 1 \times 10^{-3} \, \mu\text{M}$) was determined and controlled for its accuracy and reproducibility. Additionally, the detection limit was determined. Specific activities were decay corrected to the end of purification. Log $D_{7.4}$ was determined according to the method described in Chapter 4.

9.3.4. BIODISTRIBUTION STUDIES

Wild-type mice (FVB strain) or mdr1a knock-out mice of 5 – 7 weeks old weighing approximately 25 g were used. Mice ($n=3$ for each time point of each treatment group) were injected in a tail vein with about 150 µL EtOH:physiological saline (8:92) containing 4.5 MBq (122 µCi) $[^{11}\text{C}]-\text{MC80}$. Thirty minutes before administration of $[^{11}\text{C}]-\text{MC80}$, the mice were either treated with physiological saline or with CsA (50 mg/kg). The mice were awake during the injections. At various periods after injection of the radioligand, the animals
were sacrificed by cervical dislocation under isoflurane anaesthesia. Blood and urine were removed and organs were dissected. Tissues were weighed and counted for radioactivity using a gamma counter. To remove adhering blood, all organs were rinsed with water prior to weighing and counting. For calculation of the injected dose, five aliquots of the injection solution were weighed and counted for activity. Results are decay-corrected and expressed as % ID/g ± SD. Statistical analysis was performed using one-sided, unpaired student’s \( t \)-test. Only p-values < 0.05 are considered significant.

Specific binding of \([^{11}C]\)-MC80 was examined by pretreatment of FVB mice (\( n=3 \) for each time point) with 15 mg/kg non-radioactive MC80. At 30 and 60 min after \([^{11}C]\)-MC80 injection, animals were killed and dissected. Tissues were treated as described above. Results are decay-corrected and expressed as % ID/g ± SD. Statistical analysis was performed using one-sided, unpaired student’s \( t \)-test. Only p-values < 0.05 are considered significant.

9.3.5. METABOLITE ANALYSIS

200 µL 92:8 (v:v) - physiological saline:EtOH containing approximately 18.5 MBq (500 µCi) \([^{11}C]\)-MC80 was injected in a tail vein of awake mice (5 - 7 weeks old, weighing 25 - 30 g). At 1, 10 and 30 min p.i., the mice were sacrificed and blood and brain were taken and treated as described in Chapter 4. HPLC analysis was performed using a RP C18 HPLC column (Econosphere C18 250 mm x 10 mm, 10 µm) attached to a precolumn (Alltima C18 33 mm x 7 mm, 10 µm) with 80:20 (v:v) MeOH:sodium acetate buffer (0.02 M, pH 5.5) as solvent system at a flow rate of 6 mL/min. The same treatment regiments as for the biodistribution studies were investigated.
9.4. Results & Discussion

9.4.1. RADIOSYNTHESIS

$[^{11}\text{C}]-\text{MC80}$ was prepared with an overall decay-corrected yield of $26 \pm 5\%$ ($n=6$). Extraction efficiency of the Sep-pak column was calculated to be $87 \pm 3\%$ ($n=6$). The overall time of preparation was 25 min.

9.4.2. IN VITRO CHARACTERIZATION

9.4.2.1. Quality control, specific activity and stability

The identity of $[^{11}\text{C}]-\text{MC80}$ was confirmed by co-elution with MC80 after co-injection on HPLC. A radiochemical purity of more than 98% was obtained. Specific activity was $> 0.3 \text{ TBq}/\mu\text{mol} (> 8.1 \text{ Ci}/\mu\text{mol})$. The $[^{11}\text{C}]-\text{MC80}$ formulation remained stable during the time span of the study.

9.4.2.2. Log $D_{7.4}$

The log $D_{7.4}$ of $[^{11}\text{C}]-\text{MC80}$ in octanol was $1.96 \pm 0.08$. This value is suitable for brain penetration (Waterhouse, 2003).

9.4.3. BIODISTRIBUTION STUDIES

9.4.3.1. Biodistribution study in FVB mice

The tissue distribution of $[^{11}\text{C}]-\text{MC80}$ in wild-type mice with saline pretreatment is depicted in Table 9.1. $[^{11}\text{C}]-\text{MC80}$ is cleared from plasma via the hepatobiliary system as shown by the high liver uptake ($8.71 \pm 2.44\% \text{ ID/g}$) and the increase in radioactivity uptake.
over time in small intestine (from $3.89 \pm 0.30$ % ID/g at 1 min p.i. to $11.78 \pm 3.38$ % ID/g at 90 min p.i.) and large intestine (from $1.83 \pm 0.72$ % ID/g at 1 min p.i. to $2.18 \pm 0.82$ % ID/g at 90 min p.i.). $[^{11}C]$-MC80 also demonstrated high initial kidney uptake ($11.32 \pm 0.95$ % ID/g at 1 min p.i.), and subsequently urinary clearance was observed (data not shown). Since radioactivity uptake in the intestines already occurred at the earliest time point, it is probably not only caused by excretion of $[^{11}C]$-MC80 but is possibly also P-gp mediated.

| Tissue distribution of $[^{11}C]$-MC80 in wild-type mice |
|-----------------|-----------------|-----------------|
| % ID/g ± SD ($n=9$) | 1 min | 10 min | 30 min | 60 min | 90 min |
| Blood | 2.56 ± 0.67 | 1.12 ± 0.09 | 0.93 ± 0.09 | 0.73 ± 0.05 | 0.85 ± 0.15 |
| Brain | 7.66 ± 1.38 | 3.73 ± 0.46 | 2.03 ± 0.20 | 1.09 ± 0.18 | 0.90 ± 0.20 |
| Heart | 10.69 ± 2.49 | 3.19 ± 0.37 | 2.26 ± 0.24 | 1.54 ± 0.19 | 1.27 ± 0.22 |
| Lungs | 31.3±11.60 | 8.44 ± 0.58 | 4.24 ± 0.98 | 2.86 ± 0.56 | 1.84 ± 0.25 |
| Stomach | 4.60 ± 0.39 | 6.00 ± 1.39 | 7.72 ± 6.74 | 3.37 ± 0.62 | 4.05 ± 1.68 |
| Spleen | 3.24 ± 0.75 | 2.84 ± 0.27 | 2.53 ± 0.38 | 1.52 ± 1.12 | 1.47 ± 0.35 |
| Liver | 7.68 ± 0.27 | 8.71 ± 2.44 | 6.10 ± 0.20 | 4.86 ± 0.33 | 5.71 ± 1.51 |
| Kidneys | 11.32 ± 0.95 | 5.31 ± 2.08 | 3.62 ± 0.59 | 2.46 ± 1.61 | 3.00 ± 0.80 |
| Small intestine | 3.89 ± 0.30 | 4.51 ± 0.69 | 8.03 ± 0.91 | 11.68 ± 0.13 | 11.78 ± 3.38 |
| Large intestine | 1.83 ± 0.72 | 1.58 ± 0.20 | 1.33 ± 0.07 | 1.45 ± 0.78 | 2.18 ± 0.82 |
| Bladder | 4.27 ± 0.63 | 5.28 ± 2.11 | 4.45 ± 1.16 | 4.00 ± 1.77 | 7.08 ± 1.31 |
| Pancreas | 7.13 ± 1.77 | 9.99 ± 3.35 | 10.63 ± 1.68 | 6.85 ± 0.66 | 5.12 ± 1.64 |
| Testes | 1.66 ± 0.41 | 2.23 ± 0.28 | 2.83 ± 0.36 | 2.46 ± 0.51 | 1.91 ± 0.16 |

$[^{11}C]$-MC80 displayed good uptake in mouse brain ($7.66 \pm 1.38$ % ID/g at 1 min p.i.) followed by efficient wash-out ($0.90 \pm 0.20$ % ID/g at 90 min p.i.). Blood activity never exceeded brain uptake. Compared to $[^{11}C]$verapamil (Hendrikse et al., 1998; Lee et al., 2006) and $[^{11}C]$N-desmethyl-loperamide, $[^{11}C]$-MC80 displayed a high baseline brain uptake. This could be an advantage for imaging small fluctuations in P-gp expression or function. With a low initial brain uptake, it is not possible to image a small increase in P-gp function or a small reduction in
P-gp expression. It will be difficult to observe significant reductions in brain radioactivity uptake in the very low brain radioactivity levels.

9.4.3.2. **Biodistribution study after CsA pretreatment**

Pretreatment of animals with CsA caused a significant increase (except at 90 min p.i.) of radioactivity uptake in mice brain compared to FVB mice treated with physiological saline (Figure 9.3). The calculated p-values are 0.003, 0.007, 0.011, 0.009 and 0.293 at 1, 10, 30, 60 and 90 min p.i., respectively. Brain uptake raised 1.3 - 2 fold compared to mice without CsA pretreatment.

![Figure 9.3](image)

**Figure 9.3** Blood-brain distribution of $^{[11C]}$-MC80 in FVB mice with saline or CsA pretreatment

Values are expressed as % ID/g ± SD ($n=3$); * p < 0.05 with the student’s t-test

Except at 1 min p.i., CsA also increased the uptake of $^{[11C]}$-MC80-derived radioactivity in several peripheral organs including testes (from 2.56 ± 0.51 % ID/g to 3.73 ± 0.66 % ID/g at 60 min p.i.), pancreas (from 6.85 ± 0.66 % ID/g to 8.19 ± 0.79 % ID/g at 60 min p.i.), spleen (from 1.52 ± 1.12 % ID/g to 2.31 ± 0.15 % ID/g at 60 min p.i.), kidneys (from 2.46 ± 1.61 % ID/g to 4.53 ± 0.28 % ID/g at 60 min p.i.), and liver (from 4.86 ± 0.33 % ID/g to 8.25 ± 0.99 % ID/g at 60 min p.i.) (Figure 9.4). This increase however was not significant at every time point. Compared to mice treated with saline, radioactivity uptake in
blood (from $2.56 \pm 0.67 \% \text{ID/g}$ to $4.97 \pm 0.26 \% \text{ID/g}$), heart (from $10.69 \pm 2.49 \% \text{ID/g}$ to $28.55 \pm 1.35 \% \text{ID/g}$) and lungs (from $31.35 \pm 11.60 \% \text{ID/g}$ to $71.59 \pm 15.79 \% \text{ID/g}$) was already higher at 1 min p.i. and remained higher at each time point. These observations suggest a slower distribution of $[^{11}\text{C}]-\text{MC80}$ to the peripheral organs after CsA administration. In contrast, intestinal uptake was significantly lower with CsA pretreatment. A possible reason is the reduced binding to P-gp caused by CsA modulation. Taken together, CsA administration has an effect on tissue uptake of $[^{11}\text{C}]-\text{MC80}$ suggesting P-gp plays a role in the kinetics of $[^{11}\text{C}]-\text{MC80}$.

**Figure 9.4** Tissue distribution of $[^{11}\text{C}]-\text{MC80}$ in FVB mice with saline (A) or CsA (B) pretreatment

Values are expressed as % ID/g ± SD ($n=3$); * $p < 0.05$ with the student’s $t$-test
9.4.3.3. **Biodistribution study in mdr1a (-/-) mice**

In mdr1a (-/-) mice, cerebral uptake of [11C]-MC80 (Figure 9.5) was significantly increased at 10 min (p = 0.014) and 60 min p.i. (p = 0.001) compared to wild-type mice. The highest increase in brain uptake was 1.96 ± 0.38 (from 1.09 ± 0.18 % ID/g to 2.15 ± 0.65 % ID/g) at 60 min p.i. Significant differences in [11C]-MC80 levels in plasma were measured between the two types of mice at 10 min (p = 0.021) and 30 min (p = 0.032) p.i.

![Figure 9.5 Blood-brain distribution of [11C]-MC80 in normal FVB mice or mdr1a (-/-) mice](image)

Values are expressed as % ID/g ± SD (n=3); * p < 0.05 with the student’s t-test

At 1 min p.i. most organs displayed a reduced radioactivity uptake. In contrast lungs (from 31.35 ± 11.60 % ID/g to 45.85 ± 13.79 % ID/g) and heart (from 10.69 ± 2.49 % ID/g to 13.06 ± 1.72 % ID/g) showed an increased uptake at 1 min p.i. As with CsA, these observations suggest also a slower distribution of [11C]-MC80 to peripheral organs when using mdr1a (-/-) mice (Figure 9.6). Genetic disruption of the mdr1a gene appears to affect retention of the tracer in the excretory organs. Radioactivity uptake in the kidney raised from 2.46 ± 1.61 % ID/g to 4.41 ± 0.63 % ID/g at 60 min p.i., and liver uptake increased from 4.86 ± 0.33 % ID/g to 8.47 ± 0.57 % ID/g at 60 min p.i. The elevation in testes
Radiosynthesis & evaluation of $[^{11}\text{C}]-\text{MC80}$ for P-gp imaging – Chapter 9

(significant at 10 min ($p = 0.015$) and 30 min ($p = 0.003$) p.i.) uptake is in accordance with P-gp distribution. Contrary to the effect seen with CsA pretreatment, intestinal uptake did not alter. This can be explained by the fact that mdr1b encoded P-gp is also found in the gastrointestinal tract resulting in an unchanged intestinal uptake when using mdr1a (-/-) mice.

Figure 9.6 Radioactivity uptake in tissues of $[^{11}\text{C}]-\text{MC80}$ in normal FVB mice (A) and mdr1a (-/-) mice (B)

Values are expressed as % ID/g ± SD ($n=3$); * $p < 0.05$ with the student’s $t$-test

9.4.3.4. Biodistribution study after pretreatment with cold compound

The tissue distribution of $[^{11}\text{C}]-\text{MC80}$ in wild-type mice with and without cold MC80 pretreatment is depicted in Table 9.2.
Table 9.2  Tissue distribution of $^{11}$C-MC80 in FVB mice with and without administration of non-radioactive MC80 (15 mg/kg)

<table>
<thead>
<tr>
<th>Tissue</th>
<th>Control group</th>
<th>Test group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>30 min</td>
<td>60 min</td>
</tr>
<tr>
<td>Blood</td>
<td>0.93 ± 0.09</td>
<td>0.73 ± 0.05</td>
</tr>
<tr>
<td>Brain</td>
<td>2.03 ± 0.20</td>
<td>1.09 ± 0.18</td>
</tr>
<tr>
<td>Heart</td>
<td>2.26 ± 0.24</td>
<td>1.54 ± 0.19</td>
</tr>
<tr>
<td>Lungs</td>
<td>4.24 ± 0.98</td>
<td>2.86 ± 0.56</td>
</tr>
<tr>
<td>Stomach</td>
<td>7.72 ± 6.74</td>
<td>3.37 ± 0.62</td>
</tr>
<tr>
<td>Spleen</td>
<td>2.53 ± 0.38</td>
<td>1.52 ± 1.12</td>
</tr>
<tr>
<td>Liver</td>
<td>6.10 ± 0.20</td>
<td>4.86 ± 0.33</td>
</tr>
<tr>
<td>Kidneys</td>
<td>3.62 ± 0.59</td>
<td>2.46 ± 1.61</td>
</tr>
<tr>
<td>Small intestine</td>
<td>8.03 ± 0.91</td>
<td>11.68 ± 0.13</td>
</tr>
<tr>
<td>Large intestine</td>
<td>1.33 ± 0.07</td>
<td>1.45 ± 0.78</td>
</tr>
<tr>
<td>Bladder</td>
<td>4.45 ± 1.16</td>
<td>4.00 ± 1.77</td>
</tr>
<tr>
<td>Pancreas</td>
<td>10.63 ± 1.68</td>
<td>6.85 ± 0.66</td>
</tr>
<tr>
<td>Testes</td>
<td>2.26 ± 0.24</td>
<td>1.54 ± 0.19</td>
</tr>
</tbody>
</table>

* $p < 0.05$ using one-sided, unpaired student’s $t$-test

The brain uptake of $^{11}$C-MC80 was reduced by 20 % after pretreatment of the animals with non-radioactive MC80. This reduced uptake was significant at 30 min p.i. ($p = 0.037$). In the pancreas, pretreatment caused the most outstanding decline in tracer uptake (reduction with 52 % and 49 % at 30 min and 60 min p.i., respectively). A significantly decreased uptake of $^{11}$C-MC80 was also noticed in the heart (reduction with 22 % and 21 % at 30 min and 60 min p.i.), lungs (reduced with 47 % at 60 min p.i.), small intestines (reduction with 41 % and 44 % at 30 min and 60 min p.i., respectively), large intestines (reduction with 26 % and 35 % at 30 min and 60 min p.i., respectively) and testes (reduced with 24 % at 30 min p.i.). This study indicates that MC80 act as an inhibitor for the P-gp transporter and not as a substrate (an increased brain uptake should be observed since MC-80 will compete with $^{11}$C-MC80 for its interaction with P-gp).

Summarizing, the highest amount of specific binding of $^{11}$C-MC80 occurred in the pancreas, lungs and intestine. A lower fraction of specific binding occurred in the brain (reduction with 19 % and 18 % at 30 min and 60 min p.i., respectively),
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testes and heart. This tissue distribution of the specific binding of $[^{11}C]$-MC80 is in accordance with the known expression levels of P-gp (see Chapter 2).

9.4.4. METABOLITE ANALYSIS

The stability of $[^{11}C]$-MC80 in vivo was studied at 10 min and 30 min p.i. After protein elimination, the recovery of radioactivity in the supernatant solutions was $97 \pm 1 \%$ in plasma and $87 \pm 7 \%$ in brain. HPLC measurements of plasma and brain spiked with $[^{11}C]$-MC80, displayed one radioactive peak ($T_r = 10$ min). This peak corresponds with $[^{11}C]$-MC80 as it was found to co-elute with authentic MC80.

Table 9.3 Metabolic profile of $[^{11}C]$-MC80

<table>
<thead>
<tr>
<th>Treatment group</th>
<th>Tissue</th>
<th>Time</th>
<th>Retention time on RP-HPLC</th>
<th>2.5 min</th>
<th>10 min</th>
<th>$[^{11}C]$-MC80</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Control</strong>$^a$</td>
<td>Brain</td>
<td>10 min</td>
<td>2 ± 2 %</td>
<td>98 ± 2 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>30 min</td>
<td>9 ± 1 %</td>
<td>91 ± 1 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Plasma</td>
<td>10 min</td>
<td>37 ± 6 %</td>
<td>63 ± 6 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>30 min</td>
<td>42 ± 6 %</td>
<td>58 ± 6 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>CsA pretreatment$^b$</strong></td>
<td>Brain</td>
<td>10 min</td>
<td>1 %</td>
<td>99 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>30 min</td>
<td>7 ± 1 %</td>
<td>93 ± 1 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Plasma</td>
<td>10 min</td>
<td>35 ± 9 %</td>
<td>65 ± 9 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>30 min</td>
<td>78 ± 3 %</td>
<td>22 ± 3 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>mdr1a(-/-) mice$^c$</strong></td>
<td>Brain</td>
<td>10 min</td>
<td>2 ± 1 %</td>
<td>98 ± 1 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>30 min</td>
<td>8 ± 2 %</td>
<td>92 ± 2 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Plasma</td>
<td>10 min</td>
<td>23 ± 7 %</td>
<td>77 ± 7 %</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>30 min</td>
<td>40 ± 3 %</td>
<td>60 ± 3 %</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

$^a$pretreatment with saline in FVB mice ($n=3$), $^b$pretreatment with CsA (50 mg/kg) in FVB mice ($n=3$), $^c$pretreatment with saline in mdr1a (-/-) mice ($n=3$)

The metabolic profile of $[^{11}C]$-MC80 in the three different treatment regiments is summarized in Table 9.3.
9.4.4.1.  

**Metabolism study in FVB mice**

In brain, \(^{[11]C}\)-MC80 remained very stable with over 98 % and 91 % intact product at 10 min and 30 min p.i., respectively. The tracer underwent a more extensive metabolism in plasma. Plasma metabolite analysis showed 63 ± 6 % and 58 ± 6 % intact \(^{[11]C}\)-MC80 at 10 and 30 min, respectively. Only one polar metabolite was found, that eluted at the void volume of the column. When \(^{[11]C}\)-MC80 is demethylated, it is anticipated that \(^{[11]C}\)methyl is removed and metabolized to \(^{[11]C}\)CH\(_3\)OH, \(^{[11]C}\)CH\(_2\)O, \(^{[11]C}\)CO\(_2\)H or \(^{[11]C}\)CO\(_2\). These compounds are very polar and are believed to correspond with the radioactive peak of the solvent front.

9.4.4.2.  

**Metabolism study after CsA pretreatment**

In both tissues, the same radioactive products were found as without CsA injection (Table 9.3). Administration of CsA did not affect the metabolic profile of \(^{[11]C}\)-MC80 in brain. The percentage intact \(^{[11]C}\)-MC80 was 99 % and 93 % at 10 min and 30 min, respectively. Those values are similar to the values found in the mice pretreated with saline. Blood metabolite studies indicated that \(^{[11]C}\)-MC80 underwent an elevated metabolism when CsA was given; at 30 min p.i., the percentage unchanged \(^{[11]C}\)-MC80 was 58 ± 6 % without and 22 ± 3 % with CsA pretreatment.

9.4.4.3.  

**Metabolism study in mdr1a (-/-) mice**

Similar to the previous reported treatment regiments, two radioactive products are detected (Table 9.3). The use of mdr1a (-/-) mice did not affect the amount of unchanged \(^{[11]C}\)-MC80 present in brain. At 10 min p.i., 98 ± 1 % of parent compound remained in the brain and at 30 min p.i. 92 ± 2 % was still present as unchanged \(^{[11]C}\)-MC80. The fraction of radioactivity in plasma that represented
[\textsuperscript{11}C]-MC80 was 77 ± 7 % at 10 min p.i. and 60 ± 3 % at 30 min p.i. representing the same metabolic profile as in FVB mice.

9.5. Conclusion

MC80 was evaluated \textit{in vitro} using three biological assays. The [\textsuperscript{3}H]vinblastine transport inhibition assay defined MC80 as a potent inhibitor of [\textsuperscript{3}H]vinblastine transport. The second assay showed that MC80 did not activate ATPase within the monolayer. The ratio of drug transport through Caco-2 monolayers in the basolateral-apical and apical-basolateral directions was 3.6, indicating that MC80 is effluxed by P-gp (Colabufo et al., 2008).

[\textsuperscript{11}C]-MC80 was readily prepared (radiochemical yield of 25 %) for intravenous injection by methylation of MC90 with [\textsuperscript{11}C]methyl iodide, itself prepared from cyclotron-produced [\textsuperscript{11}C]methane. Purification by RP-HPLC and Sep-pak provided [\textsuperscript{11}C]-MC80 in high radiochemical purity (> 98 %) and very high specific activity (> 0.3 TBq/µmol).

Biodistribution studies in wild-type mice demonstrated brain uptake which quickly maximized and then washed out. Compared to [\textsuperscript{11}C]N-desmethylloperamide and the clinical used [\textsuperscript{11}C]verapamil (Hendrikse et al., 1998; Lee et al., 2006), [\textsuperscript{11}C]-MC80 has a high initial brain uptake. CsA administration, as well as genetic disruption of the mdr1a gene, resulted in significant changes in tissue distribution, confirming that [\textsuperscript{11}C]-MC80 is modulated by P-gp not only \textit{in vitro} but also \textit{in vivo}. However, the increase in brain radioactivity is not as high as for [\textsuperscript{11}C]N-desmethylloperamide and [\textsuperscript{11}C]verapamil (Hendrikse et al., 1998; Lee et al., 2006). This is probably caused by a difference in pumping efficiency. Blocking studies indicated that radioactivity uptake in intestines and pancreas is highly specific. In brain, the specific binding is not so apparent indicating non-specific binding. Since the blocking study with cold MC80 caused a reduced brain uptake of [\textsuperscript{11}C]-MC80 it was hypothesized that [\textsuperscript{11}C]-MC80 is an inhibitor of P-gp. CsA pretreatment as well as the genetic disruption of mdr1a on the other hand caused
an increased brain uptake, indicating that \([^{11}\text{C}]\)-MC80 is a substrate for P-gp. Taken together, it was assumed that \([^{11}\text{C}]\)-MC80 is a mixed substrate/inhibitor for P-gp.

Summarizing, \([^{11}\text{C}]\)-MC80 is modulated by P-gp and shows specific binding to P-gp. In brain however a high degree of non-specific binding is observed. In contrast, intestinal \([^{11}\text{C}]\)-MC80 radioactivity uptake is highly specific and sensitive towards P-gp indicating \([^{11}\text{C}]\)-MC80 has the potential for imaging intestinal P-gp function or expression.

HPLC measurements demonstrated that \([^{11}\text{C}]\)-MC80 has an outstanding metabolic profile compared to \([^{11}\text{C}]\)N-desmethyl-loperamide and \([^{11}\text{C}]\)verapamil (Hendrikse et al., 1998; Lee et al., 2006). At 30 min p.i. over 90% of the measured radioactivity in brain was related to unchanged \([^{11}\text{C}]\)-MC80. Structural analogues possessing the same metabolic stability \textit{in vivo}, but with a higher affinity and specificity for P-gp may be extremely useful for imaging of P-gp expression at the BBB.

9.6. References


Summary
The human brain is a complex organ, consisting of millions of intercommunicating neurons. Due to the complexity of the brain our knowledge about CNS disorders is still limited. SPECT and PET imaging of the living brain are unique tools for clinical researchers to elucidate the causes and consequences of brain disorders. In vivo brain mapping with PET or SPECT is of great importance in drug development as well as in the effective diagnosis, treatment and management of neurological and psychiatric illness.

In this thesis, new SPECT or PET radioligands directed towards two different brain systems, were developed and evaluated in vivo.

Chapter 1 gave a short overview of the medical imaging techniques and described the requirements of a valuable radiopharmaceutical for SPECT and PET imaging. The first part of Chapter 2 described the blood-brain barrier and the transport of compounds across this barrier. One of the most important transport mechanisms limiting brain uptake of drugs, P-gp, was detailed in the second part of this chapter. After a brief description of the discovery, structure, expression and physiological role, the potential modulation agents of P-gp were reviewed. The second brain system, the catecholamine system, was addressed in Chapter 3. The dopamine and norepinephrine system were discussed briefly, followed by a more detailed description of the mechanisms responsible for terminating the neurotransmission. After the history, structure and function of the catecholamine transporters in general were discussed, the physiological role of NET and DAT in health and disease was illustrated. The last part of chapter 3 is dedicated to MAO, one of the main enzymes causing degradation of catecholamines. In Chapter 4 the general material and methods were described.

Chapter 5 reported the synthesis, radiosynthesis and preliminary evaluation of $^{[123]}I-(S,S)$-IPBM, an iodinated reboxetine analogue. $^{[123]}I-(S,S)$-IPBM aimed at imaging the norepinephrine transporter. The precursor was prepared in an overall
chemical yield of 8 % with an enantiomeric excess of 95 %. Radiosynthesis afforded $^{[123]I}$-(S,S)-IPBM with an excellent radiochemical purity. Biodistribution studies demonstrated a high brain uptake of $^{[123]I}$-(S,S)-IPBM followed by efficient wash-out. Since $^{[123]I}$-(S,S)-IPBM was reported by others at the moment we performed our biodistribution studies, we did not conduct additional in vivo studies. Regarding their results (Tamagnan et al., 2007; Kanigawara et al., 2006), the choice to develop $^{[123]I}$-(S,S)-IPBM as radiotracer for NET was an excellent suggestion.

In Chapter 6 the radiolabelling as well as the in vivo characterization of two $^{[11]C}$-labelled pyrrole-2-carboxamide derivatives, $^{[11]C}$-RS 2315 and $^{[11]C}$-RS 2360, were described. In vitro, RS 2315 and RS 2360 are potent inhibitors of MAO-A. Both tracers were obtained with a good radiochemical yield, excellent radiochemical purity and high specific activity. Both radiotracers displayed high brain uptake followed by rapid brain clearance. Blocking studies in mice could not demonstrate specificity of $^{[11]C}$-RS 2315 towards MAO-A or B. The blocking study with $^{[11]C}$-RS 2360 on the other hand indicated specific binding at MAO-A at the earliest time point. In the imaging study with $^{[11]C}$-RS 2360, administration of clorgyline caused an overall significant reduced brain uptake indicating specific binding at MAO-A. These results indicated that $^{[11]C}$-RS 2315 is not suitable for mapping MAO-A in vivo and that further research is necessary to investigate the potential of $^{[11]C}$-RS 2360 in MAO-A imaging.

The (radio)synthesis and in vivo evaluation of $^{[125]I}$-FMIP as a selective radiotracer for DAT was reported in Chapter 7. FMIP has nanomolar affinity for DAT and better selectivity over the other monoamine transporters compared to the already existing ligands for DAT imaging with SPECT. The tributylstannyl precursor was synthesized using a five-step synthetic procedure. $^{[125]I}$-FMIP was synthesized with a high radiochemical yield and purity. The specific activity of the compound was at least 667 GBq/µmol. Biodistribution studies showed low brain uptake and high blood activity. Blocking studies indicated no selectivity of $^{[125]I}$-FMIP towards DAT. A metabolite study demonstrated that in brain, over 80 % was
present as intact $[^{123}]$I-FMIP upon 60 min p.i. In rats, regional brain distribution of $[^{123}]$I-FMIP was not in agreement with DAT distribution. These results indicated that $[^{123}]$I-FMIP is not suitable for mapping DAT in vivo.

The contribution of P-gp to the low brain uptake of $[^{123}]$I-FMIP along with its potential as P-gp imaging agent was investigated in Chapter 8. To date, no iodinated SPECT ligands for P-gp imaging have been published. Brain uptake of $[^{123}]$I-FMIP was very low in wild-type mice with saline pretreatment, consistent with the rapid action and high capacity of P-gp. Modulation of P-gp with CsA as well as mdr1a gene depletion resulted in a significant increase in cerebral uptake of $[^{123}]$I-FMIP with only minor effect on blood activity. A dose-dependent sigmoidal increase in brain uptake of $[^{123}]$I-FMIP with increasing doses of CsA was observed. In vivo ROI-based SPECT measurements confirmed the observations of the biodistribution studies. These findings indicated that $[^{123}]$I-FMIP is a very promising radiotracer to visualize P-gp at the BBB.

Chapter 9 described the radiolabelling of an in vitro characterized substrate (MC80) of the P-gp pump with $^{11}$C and the evaluation of this tracer in vivo for its potential to image P-gp function and expression. $[^{11}]$C-MC80 was synthesized with high radiochemical purity and high specific activity. Cerebral uptake was increased in mdr1a knock-out mice as well as after CsA pretreatment. Administration of non-radioactive MC80 caused a reduced uptake in brain, heart, lungs, testes, pancreas and intestines. In brain, $[^{11}]$C-MC80 displayed an excellent metabolic profile (> 90 % intact). Since $[^{11}]$C-MC80 showed specific binding to target organs, this compound can be a lead compound for the development of novel radioligands for measuring the expression of P-gp in the brain.

References


Samenvatting
SAMENVATTING

De menselijke hersenen zijn een complex orgaan die bestaan uit miljoenen communicerende neuronen. Door de complexiteit van de hersenen is onze kennis over aandoeningen van het centraal zenuwstelsel nog steeds beperkt. Beeldvorming van de hersenen met SPECT en PET zijn unieke hulpmiddelen voor klinische onderzoekers om de oorzaken en de gevolgen van hersenaandoeningen op te helderen. *In vivo* beeldvorming van de hersenen met PET of SPECT is van groot belang in zowel geneesmiddelenontwikkeling als in het stellen van de juiste diagnose, behandeling en controle van neurologische en psychiatrische ziektes. In deze thesis werden nieuwe SPECT en PET radioliganden gericht naar twee verschillende hersensystemen ontwikkeld en *in vivo* geëvalueerd.

**Hoofdstuk 1** gaf een overzicht van de medische beeldvormingstechnieken en beschreef de voorwaarden van een waardevol radiofarmacon voor SPECT en PET beeldvorming. Het eerste deel van **Hoofdstuk 2** beschreef de bloed-hersen barrière en het transport van bestanddelen doorheen deze barrière. Een van de belangrijkste transport mechanismen die de hersenopname van geneesmiddelen beperkt, P-gp, werd gespecificeerd in het tweede deel van dit hoofdstuk. Na een korte beschrijving van de ontdekking, structuur, expressie en fysiologische rol werden de mogelijke modulerende agentia van P-gp besproken. Het tweede hersensysteem, het catecholamine systeem, werd behandeld in **Hoofdstuk 3**. Het dopamine en norepinephrine systeem werden kort besproken, gevolgd door een meer gedetailleerde beschrijving van de mechanismen die verantwoordelijk zijn voor het beëindigen van de neurotransmissie. Nadat de geschiedenis, structuur en functie van de catecholamine transporters in het algemeen besproken waren, werd de fysiologische rol van de norepinephrine transporter en dopamine transporter in ziekte en gezondheid toegelicht. Het laatste deel van hoofdstuk 3 was toegewijd aan monoamine oxidase, één van de belangrijke enzymes die de
Samenvatting

afbraak van catecholamines veroorzaken. In Hoofdstuk 4 werden de algemene materialen en methoden beschreven.

Hoofdstuk 5 rapporteerde de synthese, radiosynthese en preliminaire evaluatie van $[^{123}\text{I}](S,S)$-IPBM, een geiodeerd reboxetine analoog. $[^{123}\text{I}](S,S)$-IPBM had als doel de beeldvorming van de norepinephrine transporter. De precursor werd aangemaakt met een chemisch rendement van 8 % met een enantiomere overmaat van meer dan 95 %. Radiosynthese leverde $[^{123}\text{I}](S,S)$-IPBM op met een uitstekende radiochemische zuiverheid. Biodistributie studies toonden een hoge hersenopname van $[^{123}\text{I}](S,S)$-IPBM gevolgd door een efficiënte klaring. Doordat $[^{123}\text{I}](S,S)$-IPBM gerapporteerd werd door anderen op het moment dat wij onze biodistributies deden, voerden we geen bijkomende in vivo studies uit. Hun resultaten in beschouwing nemend (Tamagnan et al., 2007; Kanigawara et al., 2006), was de keuze om $[^{123}\text{I}](S,S)$-IPBM als radiotracer voor de norepinephrine transporter te ontwikkelen een uitstekend voorstel. In Hoofdstuk 6 werd zowel de merking met radioactiviteit als de in vivo karakterisatie van twee $[^{11}\text{C}]$-germerkte pyrrool-2-carboxamide derivaten, $[^{11}\text{C}]$-RS 2315 and $[^{11}\text{C}]$-RS 2360, beschreven. In vitro, zijn RS 2315 en RS 2360 sterke inibitoren van MAO-A. Beide tracers werden bekomen met een goed radiochemisch rendement, uitstekende radiochemische zuiverheid en hoge specifieke activiteit. Beide radiotracers vertoonden hoge hersenopname gevolgd door snelle klaring uit de hersenen. Blokkeringstudies in muizen konden geen selectiviteit aantonen van $[^{11}\text{C}]$-RS 2315 voor MAO-A of MAO-B. De blokkeringstudie met $[^{11}\text{C}]$-RS 2360 toonde specifieke binding aan MAO-A op het eerste tijdstip. In de beeldvorming studie met $[^{11}\text{C}]$-RS 2360 veroorzaakte toedoening van clorgyline een algemeen significante gedaalde hersenopname wat een specifieke binding aan MAO-A indiceerde. Deze resultaten wezen aan dat $[^{11}\text{C}]$-RS 2315 niet bruikbaar is voor het in kaart brengen van MAO-A in vivo en dat verdere onderzoek nodig is om de mogelijkheid van $[^{11}\text{C}]$-RS 2360 in beeldvorming van MAO-A te analyseren.
De radiosynthese en *in vivo* evaluatie van $[^{123}I]$-FMIP als een selectieve radiotracer voor DAT werd gerapporteerd in *Hoofdstuk 7*. FMIP heeft nanomolaire affiniteit voor DAT en een betere selectiviteit vergeleken met de reeds bestaande liganden voor DAT beeldvorming met SPECT. De tributyltin precursor werd gesynthetiseerd gebruik makend van een vijf-staps synthese. $[^{123}I]$-FMIP werd aangemaakt met hoog radiochemisch rendement en zuiverheid. De specifieke activiteit van de component was minstens 667 GBq/µmol. Biodistributie studies toonden een lage hersenopname en hoge bloedactiviteit. Blokkingstudies wezen geen selectiviteit van $[^{123}I]$-FMIP voor DAT aan. Een metabolietanalyse demostrerde dat in de hersenen meer dan 80% aanwezig was als intact $[^{123}I]$-FMIP tot 60 min na injectie. In ratten, bleek de regionale hersendistributie van $[^{123}I]$-FMIP niet in overeenkomst met de DAT verdeling. Deze resultaten toonden aan dat $[^{123}I]$-FMIP niet bruikbaar is voor het in beeld brengen van DAT *in vivo*.

De deelname van P-gp aan de lage hersenopname van $[^{123}I]$-FMIP samen met zijn potentieel als agens voor beeldvorming van P-gp werd onderzocht in *Hoofdstuk 8*. Tot op heden werden nog geen geiodeerde SPECT liganden voor beeldvorming van P-gp gepubliceerd. Hersenopname van $[^{123}I]$-FMIP was zeer laag in wildtype muizen voorbehandeld met zoutoplossing, in overeenstemming met de snelle actie en hoge capaciteit van P-gp. Zowel modulatie van P-gp met CsA als verwijderen van het mdr1a gen resulteerde in een significantie stijging van de hersenopname van $[^{123}I]$-FMIP met slechts een klein effect op de bloedactiviteit. Een dosisafhankelijke sigmoidale stijging in hersenopname van $[^{123}I]$-FMIP met stijgende concentraties CsA werd waargenomen. *In vivo* ROI-gebaseerde SPECT metingen bevestigden de observatie van de biodistributie studies. Deze bevindingen wezen erop dat $[^{123}I]$-FMIP een veelbelovende radiotracer is voor de visualisatie van P-gp ter hoogte van de bloed-hersen barrière.

*Hoofdstuk 9* beschreef de radioactieve merking van een *in vitro* gekarakteriseerd substraat (MC80) van de P-gp pomp met $^{11}$C en de evaluatie van deze tracer *in vivo*.
Samenvatting

Vivo voor zijn potentieel om P-gp functie en expressie in beeld te brengen. \(^{11}\text{C}\)-MC80 werd zeer snel gesynthetiseerd met hoge radiochemische zuiverheid en hoge specifieke activiteit. De hersenopname werd verhoogd zowel in mdr1a knock-out muizen als na voorbehandeling met CsA in gewone muizen. Toediening van niet radioactief MC80 veroorzaakte een gereduceerde opname in de hersenen, hart, longen, testes, pancreas en darmen. In de hersenen vertoonde \(^{11}\text{C}\)-MC80 een uitstekend metabolisch profiel (90% intact). Omdat \(^{11}\text{C}\)-MC80 specifieke binding vertoont aan de doelorganen kan deze component een goede basismolecule zijn voor de ontwikkeling van nieuwe radioliganden voor het meten van P-gp expressie in de hersenen.

Referenties


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CURRICULUM VITAE

PERSONALIA

Name De Bruyne
First names Sylvie Julie Suzie
Nationality Belgian
Place and date of birth Eeklo, Oktober 15th, 1981
Civil status Not married
Private address Molenstraat 29 - 9880 Aalter
Mobile + 32 (0)499 23 11 89
sylviedebruyne@hotmail.com

EDUCATION BACKGROUND

June, 1999 Secondary school: Mathematics-Sciences - Emmaüs instituut – Aalter

June, 2004 Pharmacist with distinction – Faculty of Pharmaceutical Sciences – Ghent University

November, 2005 Symposium on in vivo small animal imaging – Faculty of Medicine and Pharmacy – VU Brussel

June, 2006 Methodology and radiochemical counting techniques - Faculty of Pharmaceutical Sciences - Ghent University
Nuclear chemistry - Faculty of Pharmaceutical Sciences - Ghent University
Radiobiology and radiopathology - Faculty of Medicine and Health Sciences - Ghent University
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March, 2007
PET: Technology and application professional development programme - Department of Chemistry and Centre for Professional Development - Imperial College London

April, 2007
\(^{18}\text{F} \) Radiochemistry course - VU Amsterdam

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Radioprotection and legislation - Faculty of Medicine and Health Sciences - Ghent University
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